

Native American Professional Parent Resources, Inc.



Early Head Start 2013-2014 Annual Report

NAPP, INC.
2201 San Pedro Building #3 Suite 210
Albuquerque, NM 87110
505-280-7344
www.nappr.org

To Our Stakeholders

As I reflect on the NAPPR Early Head Start (EHS) Program, I look back on both the program challenges and the EHS successes. I am both encouraged and pleased by the accomplishments we have made this year through hard work, dedication, commitment and our partnerships with our Early Head Start families, Grantee staff, and Governing Body members. It is through our joint perseverance that we have implemented program enhancements that focus on ensuring improvements to the quality of, and access to, excellent early childhood education.

Looking forward into the future, I look forward to creating more collaborations and partnerships with our community stakeholders. Together, we will create many new opportunities to improve services to young children and their families. As we approach a new program year, we will renew our commitment to excellence and we will provide high quality services to our children and families.

Arra Carbajal
NAPPR EHS Program Director

Native American Professional Parent Resources

Our Mission

NAPPR empowers, educates and provides culturally appropriate supportive services to build healthy Native American children and families.

Our Vision

Healthy families • Strong communities

Our History

Native American Professional Parent Resources, Inc. (NAPPR) is located in Albuquerque, New Mexico. NAPPR was founded in 1981 as a joint project between the Bureau of Indian Affairs and the New Mexico Department of Health to provide early intervention services to Native American families with young children experiencing developmental delays. Since that time NAPPR has established itself as an independent 501(c)(3) nonprofit organization and grown from serving approximately 30 families per year to serving over 400 families in a four-county area. Services provided now include Early Intervention, Tribal Home Visiting, Early Head Start, Healthcare Education and Outreach, and support services for Indian Health Service-funded Dental Clinics.

NAPPR Early Head Start Program

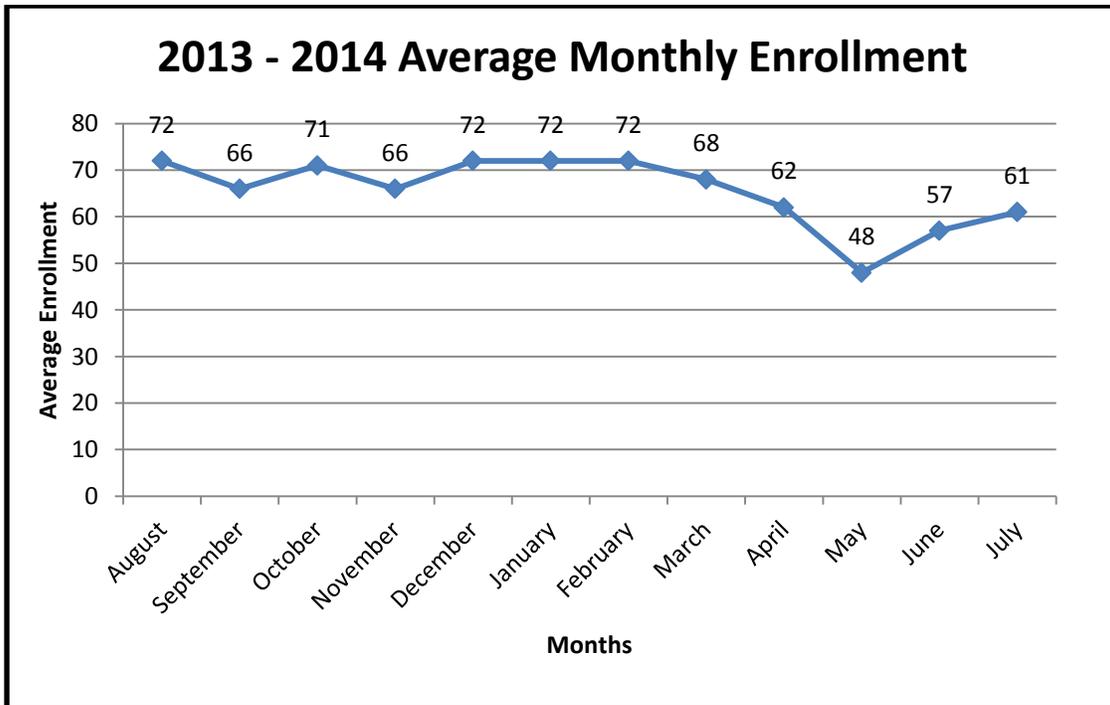
With the passage of the Head Start Reauthorization Act of 2007, each Head Start Agency shall make available to the public a report published at least once each fiscal year that discloses information from the most recently concluded fiscal year. The information required in the annual report is contained in the following pages.

- Our program provides services to pregnant women and families with children zero to three whose income is at, or below the federal poverty guidelines living in the Bernalillo County and Sandoval County.
- Families qualify for our program if their income is below the federal poverty line, they are a recipient of public assistance, they have a foster child in their care and/or if they are homeless.

- Some enrollees may exceed the allowed over-income enrollment with family incomes ranging between the 100% -130% of the federal poverty line only when income eligible participants are exhausted.
- Our program year begins August 15 and ends on August 14
- Our fiscal budget year begins January 1 and ends on December 31

Average Enrollment

The line graph below illustrates the average monthly enrollment of children in the program year 2013 - 2014:



Number of Children Served

Our program is funded for enrollment of 72 slots with 56 being served in our Home-based option and 16 in our Child Development Center which is located at:

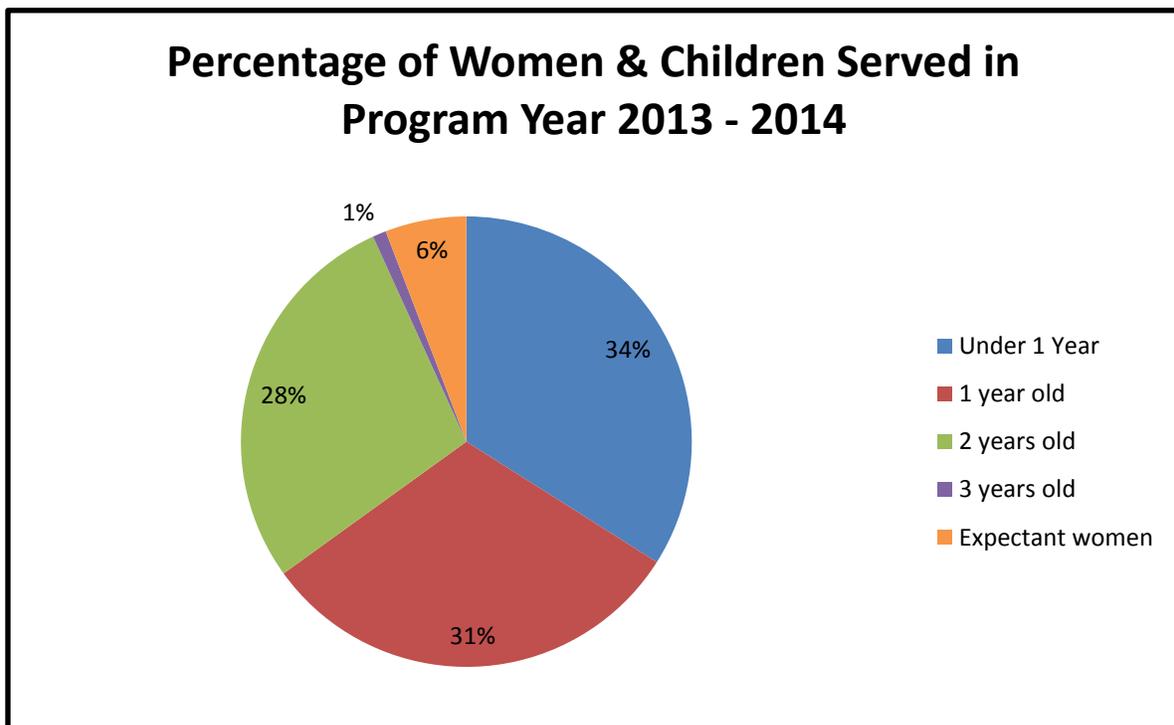
- 5407 4th Street NW
Albuquerque, NM 87107

During the program year 2013-2014, due to turnover in enrollment, the actual number of

children and expectant women served was 103 with the following actual enrollment numbers:

- Under 1 year = 35 children
- 1 year old = 32 children
- 2 years old = 29 children
- 3 years old = 1 children
- Expectant women = 6 women

The chart below illustrates the percentage of the number of children served by age and the percentage of pregnant women served:



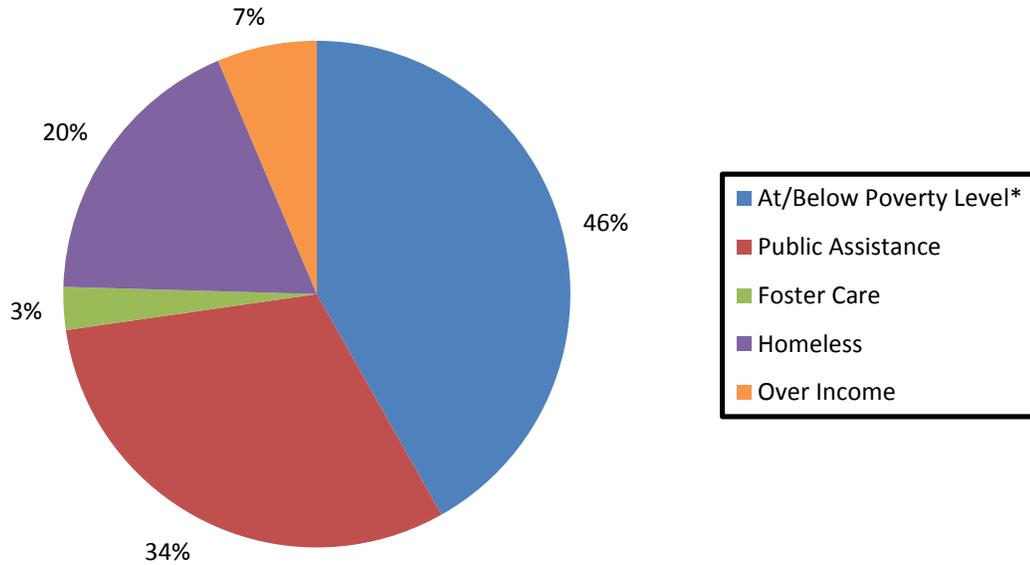
Our Service Population

NAPPR EHS Children & Families

Our Early Head Start program serves children and families from diverse socio-economic and ethnic backgrounds with an emphasis on serving Native American children and their families.

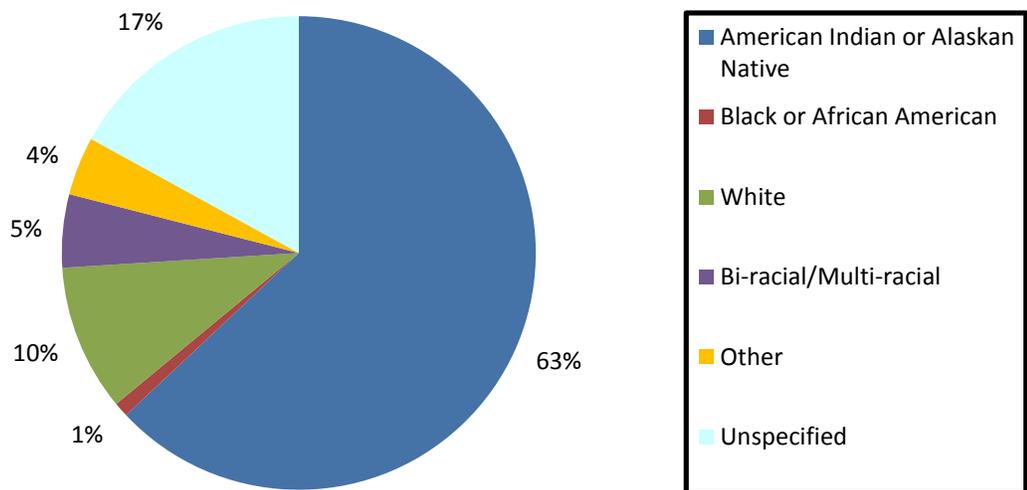
The following tables show the percentages of the children we serve as categorized by eligibility type, race, disability, and the primary language spoken in the child's home:

Percentage of Total Served by Eligibility Type

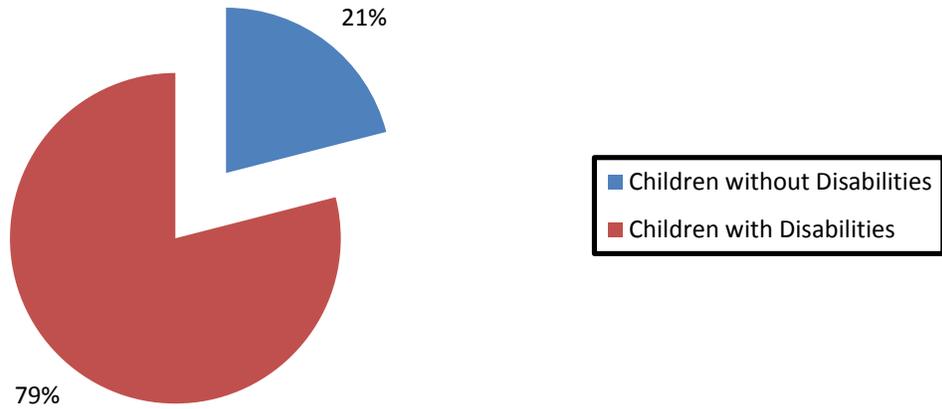


* Based on the Federal Poverty Guidelines at or below 100% Poverty Level

Percentage of Total Served by Race

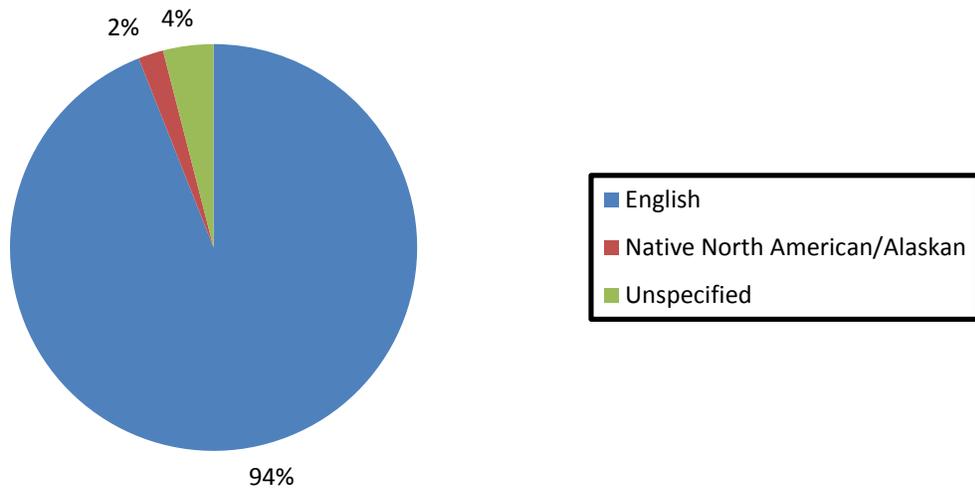


Percentage of the Total Enrollment of Infant & Toddler Part C Early Intervention Services



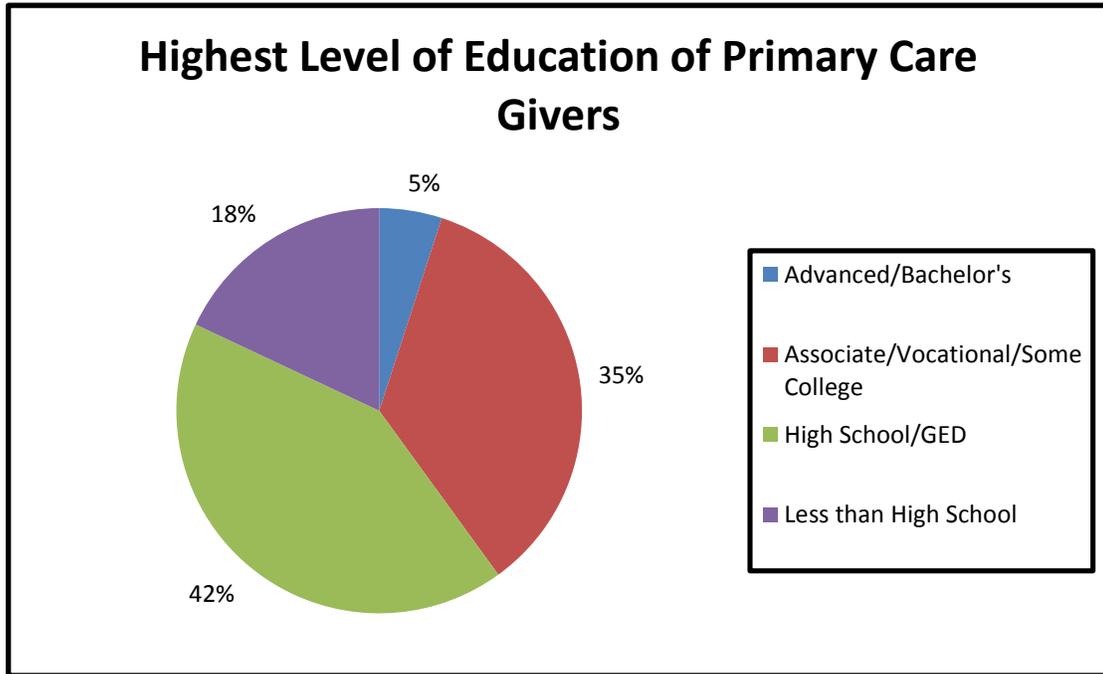
More than 21% of the participants in the NAPPR EHS Program are children with disabilities which is more than double the performance standard that ensures 10% of enrollment opportunities are available to children with disabilities.

Percentage of Primary Language Spoken in Child's Home



NAPPR EHS Staff

The chart below illustrates the level of education attained by the child's primary care giver. 18% of primary care givers have less than a high school diploma or GED.



Funding

Budget

The budget period is from January 1, 2014 through December 31, 2014. The program year is from August 15, 2013 through August 14, 2014.

FY 2014 NAPPR Early Head Start Received a Total of \$1,050,701	
Allocated as Follows:	
Early Head Start Program Operations	\$1,025,395
Early Head Start Training and Technical Assistance	\$25,306

Budgetary Expenditures for Fiscal Year 2014

Personnel	\$517,678
Fringe	\$120,312
Travel	\$35,508
Equipment	\$0
Supplies	\$67,361
Contractual	\$49,169
Construction	\$0
Other Operating Expenses	\$235,637
TOTAL	\$1,025,395

Result of the Most Recent Financial Audit

NAPPR receives a comprehensive A-133 single audit due to the amount of federal funding received. The most recent annual audit may be found at <http://www.nappr.org>

Results of the Most Recent Federal Review

All Early Head Start programs undergo an extensive Federal Review once every three years. The review focuses primarily on the program's compliance with all applicable federal, state and local requirements. The NAPPR EHS Program underwent its Federal Monitoring review during the week of 5/18/2014-5/22/2014. During the review, the monitoring review team used a sample methodology that included a random selection of child files, staff files, and Center and group observations. Two areas of non-compliance were found;

1. Child Health and Safety

1304.20 Child Health and Developmental Services 1304.20(a)(1)(ii)Determining Child Health Status

(1) In collaboration with the parents and as quickly as possible, but no later than 90 calendar days (with the exception noted in paragraph (a)(2) of this section) from the child's entry into the program (for purposes of 45 CFR 1304.20(a)(1), 45CFR 1304.20(a)(2), and 45CFR 1304.20(b)(1), "entry" means the first day that Early Head Start or Head Start Services are provided to the child), grantee and delegate agencies

must:

(ii) Obtain from a health care professional a determination as to whether the child is up-to-date on a schedule of age appropriate preventive health and primary health care which includes medical, dental and mental health. Such a schedule must incorporate the requirements for a schedule of well child care utilized by the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) program of the Medicaid agency of the State in which they operate, and the latest immunization recommendations issued by the Centers for Disease Control and Prevention, as well as any additional recommendations from the local Health Services Advisory Committee that are based on prevalent community health problems;

Part 1304.20(a) (1)(ii)

The NAPPR EHS Program did not obtain from a health care professional determination as to whether the children were up to date on a schedule of age-appropriate preventive and primary health care within 90 calendar days of their entry into the program.

2. Child Health and Safety

1304.20 Child Health and Developmental Services

1304.20(b) (1) Screening For Developmental, Sensory and Behavioral Concerns

(1) In collaboration with each child's parent, and within 45 calendar days of the child's entry into the program, grantee and delegate agencies must perform or obtain linguistically and age appropriate screening procedures to identify concerns regarding a child's developmental, sensory (visual and auditory) behavioral, motor, language, social, cognitive, perceptual, and emotional skills (see 45CFR 1308.6(b) (3) for additional information. To the greatest extent possible, these screening procedures must be sensitive to the child's cultural background.

The NAPPR EHS Program did not perform or obtain age-appropriate screening procedures to identify concerns regarding children's development and sensory—visual and auditory skills within 45 calendar days of their entry into the program.

All findings were corrected and based on the findings from a monitoring review dated January 23, 2015, ACF closed the findings and determined that no corrective action was required

Child Health Outcomes

Our program realizes the importance of the physical well-being of our children; our program puts a strong emphasis on the overall health and wellbeing of the children and families we serve. Our Early Head Start program provides developmental and health screenings to our children during enrollment. Also, our families are encouraged to find a medical home that will provide an ongoing source of continuous and accessible medical care.

By the end of the program year, 100% of the children served in Early Head Start had health insurance and 100% had a medical home.

Health Advisory Committee

EHS works closely with health agencies throughout the community to help each family gain access to ongoing medical services.

The Health Advisory Committee (HAC) is an advisory and advocacy body critical in meeting the health needs of Early Head Start children. It provides input to develop the EHS health services plan and evaluates how policies comply with Early Head Start Childhood Development and Health Services Program standards.

The HAC consists of representatives from UNM hospital, NM Child Care Licensing, Policy Council members, EHS family members and EHS staff.

Parent Involvement Activities 2013-2014



Parents are the most important people in their child's world. Thus, the NAPPR EHS takes an active role in the fostering of parent education and involvement. Our program

provides a variety of opportunities for parents to become involved throughout the program year.

Parents are engaged in a parent orientation where they are introduced to the many different opportunities to learn and participate in the program. During the orientation, parents are presented with extensive resources provided in our parent handbook to begin the process of helping families connect with what they need to aid them in the health, safety, education, and empowerment of their family.

Parent involvement occurs most commonly through home visits or as parents spend time in the Early Head Start classrooms. Parents also have the opportunity to be involved in activities such as:

- Parent Committee meetings
- Parent-teacher conferences
- Parent Orientation activities
- Policy Council Meetings
- Volunteering in various program activities
- Interview teams to hire new staff
- NAPPR EHS Self –Assessment process
- Family Literacy Events
- Socializations
- Family Goal Setting
- Parent Trainings
- Fatherhood Activities

School Readiness



The NAPPR EHS School Readiness goals are aligned with: The Head Start Child Development and Early Learning Framework; The New Mexico Early Learning Guidelines.

NAPPR EHS School Readiness goals

LANGUAGE AND LITERACY

1. The child will respond to the message of another's communication
2. The child will convey a message to another person
3. The child will begin to develop the foundations for early literacy

PHYSICAL DEVELOPMENT AND HEALTH

1. The child will move her body to achieve a goal
2. The child will manipulate objects and use simple tools
3. The child will begin to care for self and practice personal safety

SOCIAL AND EMOTIONAL DEVELOPMENT

1. Child will begin to regulate feelings and behaviors
2. Child will demonstrate an awareness of personal characteristics and abilities
3. Child will develop secure and trusting relationships with adults
4. Child will use beginning social skills with other children

APPROACHES TO LEARNING

1. Child will utilize curiosity, initiative, persistence, imagination and problem solving in his or her everyday activities

COGNITIVE AND GENERAL KNOWLEDGE

1. The child will inquire about the world and experience the properties of things
2. The child will understand cause and effect, the permanency of things and beginning numeracy concepts
3. The child will find solutions and represent thoughts and feelings in creative ways

Child Outcomes

NAPPR Early Head Start moved from using the Portage Assessment in program year 2012-2013 to the Teaching Strategies Gold (TS Gold) assessment in 2013-2014. This decision was made for the following reasons:

- Compatibility with the Head Start Child Development and Early Learning Framework, the New Mexico Early Learning Guidelines and our program's school readiness goals,

- Ability to be integrated into ChildPlus.
- Use of a visual continuum which allows staff to see a child's development as "emerging" from one age or developmental level into another level, and
- Full range of development, including birth through kindergarten, which follows not only the child's development long term, but highlights the use of school readiness goals.

TS Gold was administered twice for the program year 2013-2014. The first assessment was completed in January 2014 and the second was completed in April 2014. Both the Home-based and Center-based programs are using the TS Gold assessment tool and both were administered at the same time.

Data was aggregated as follows:

- Home-based caseload level and Center-based classroom level,
- Home-based and Center-based program levels and
- Program level.

The percentages show from 1-6, the developmental areas in which children fall *below* their age range (with 1 being the highest percentage of children scoring below age level and 6 being the lowest percentage of children scoring below age level). For example, a developmental area designated as 1 would be an area in which many children scored below their age range, a developmental area designated as 6 would be an area in which few children scored below their age range. These rankings and percentages have significant implications for the NAPPR EHS program plans and goals.

Home-Based Findings

Three home visitors collected developmental information for the children on their caseloads with collection points in January and April 2014, using the TS Gold. The aggregation of the caseloads showed the following:

1. Mathematics/Cognitive and General Knowledge (highest % of children scoring below age level)
2. Literacy/Language and Literacy
3. Language/Language and Literacy
4. Cognitive/Cognitive and General Knowledge
5. Physical/Physical Development (and Health)
6. Social-Emotional/Social and Emotional Development (lowest % of children scoring below age level)

Home-Based Results		
	Meeting or Exceeding Expectations	Children Scoring Below
Mathematics/Cognitive & General Knowledge	66%	35%
Literacy/Language & Literacy	67%	33%
Language/Language & Literacy	75%	25%
Cognitive/Cognitive & General Knowledge	80%	20%
Physical/Physical Development	81%	19%
Social-Emotional	84%	16%

Center-Based Findings

Four Center-based teachers in two classrooms collected developmental information for the children in their classrooms with collection points in January and April 2014, using the TS Gold. The aggregation of the two classrooms showed the following:

1. Mathematics/Cognitive and General Knowledge (highest % of children scoring below age level)
2. Social-Emotional/Social & Emotional Development
3. Literacy/Language & Literacy
4. Language/Language & Literacy
5. Cognitive/Cognitive and General Knowledge
6. Physical/Physical Development (and Health) (lowest % of children scoring below age level)

Center-Based Results		
	Meeting or Exceeding Expectations	Children Scoring Below
Mathematics/Cognitive & General Knowledge	47%	53%
Literacy/Language & Literacy	74%	28%
Language/Language & Literacy	77%	23%
Cognitive/Cognitive & General Knowledge	82%	18%
Physical/Physical Development	89%	11%

Social-Emotional	72%	28%
------------------	-----	-----

Curricula

The NAPPR EHS Home-based option utilizes the Parents as Teachers (PAT) curriculum, an evidence based, and nationally recognized curriculum. The PAT curriculum is designed to support a parent's role in promoting school readiness and healthy development of children. The PAT approach is intimate and relationship-based. This curriculum incorporates learning experiences that are relevant and customized for the individual needs of each family and child. As a result, the NAPPR home visitors benefit from our understanding of the evolving needs of today's families and children.

The NAPPR EHS Center-based option uses the Creative Curriculum. This curriculum is a researched based, nationally recognized curriculum that outlines goals in the eight domains of learning including:

- Social emotional development
- Approaches to learning
- Literacy
- Language development
- Math
- Science
- Creative arts
- Physical health/development

The Creative Curriculum guides the staff in the provision of materials and activities to support these goals in preparing children for school. Experiences are provided in the classroom to meet the child's individual's needs and to stimulate learning in all developmental areas, with strong emphasis on language/cognitive skills, early literacy skills and the development of positive social skills. Health education activities in the curriculum include daily tooth brushing, monthly nutrition activities and other activities designed to encourage development of healthy habits and reduce fear and anxiety related to preventive care exams.

Individualized Approach

The NAPPR EHS staff utilizes an individualized observation and planning process for each child and their family. Staff assess, with the parent, the child's developmental strengths and needs across the eight domains of learning. Information is obtained through informal interviews with the parent, ongoing observations using the Teaching Strategies Gold assessment and the Ages and Stages screening tools. If applicable, information from a child's Individual Family Service Plan is also used. Information from these sources is then used to tailor experiences and services for each child and their family, and to create ongoing plans to address the child's developmental objectives and goals.

The NAPPR EHS program also provides information to parents of children with special needs, such as parent-friendly articles describing the special education process, individualized education plans, parent's rights in special education, and community resources.

Respectively submitted by,

Arra Carbajal
NAPPR EHS Program Director

