

EDUCATIONAL SERVICE DISTRICT 112

# Early Head Start



Annual Report 2023



# Letter from the Director



The 2023 program year was full of successes and challenges. Although COVID-19 was less prevalent, we continued to feel the effects of the pandemic across our programs. The workforce crisis in ECE made it challenging to find and retain staff who met the qualifications and were willing to work for less compensation than other colleagues in the education system. Fortunately, we were able to access federal stabilization funding to offer staff recruitment and retention incentives. However, we still struggled to attract as many staff as needed to operate our programs. As a result, we were forced to place enrollment holds on many of our classrooms while we hired and onboarded staff. This meant that we could not serve as many children and families as we would have liked. We are currently on an enrollment plan with the Office of Head Start and plan to make program changes in 2024 to address our staffing challenges and needs so that we can reach full enrollment.

Our current staff have worked tirelessly over the last few years to address the intense needs of children and families. The pandemic was very hard on families, especially those furthest from opportunity. I am proud of our staff for their compassion, commitment, and heart for service. We supported families with education, family support, and connection to community resources, including much-needed supplies and materials to help them get through. We continue to see the effects of the pandemic on the growth, development, and social-emotional learning of children. We were able to embed additional mental and behavioral health supports for our staff and children and families in response to these growing needs.

The ESD 112 Early Care and Education department is the largest ECE provider in our region. As a regional agency, we can leverage resources from multiple funding streams to support children prenatally to the age of 12 alongside their families. We are proud of the comprehensive programs we offer so that families can choose the services that best meet their needs. ESD 112 is audited annually by the State Auditor's Office. The audit was clear, with no findings.

Despite the challenges we have faced, we believe that our programs are strong, and we have exciting plans for new and innovative approaches to staff recruitment and wellness, as well as family support services. We appreciate the support of our countless community partners and the families who walk alongside us to focus on continuous quality improvements for the children we serve.

Sincerely,

*Jodi Wall*

Executive Director





We serve **79** home-based families and **60** center-based families in Clark County.



# Annual Report

The mission of Educational Service District 112 (ESD 112) is to equalize educational opportunities for learning communities through innovative partnerships, responsive leadership, and exceptional programs. ESD 112's Early Head Start program marshals partners and professionals to deliver comprehensive services for 139 infants, toddlers, and pregnant women in Southwest Washington communities. Service areas served last year included 79 home-based families and 60 center-based families in Clark County.

<b>2022-2023 TOTAL SERVED</b>		<b>FUNDED SLOTS: 139</b>
		<b>157 (100% OF FUNDED ENROLLMENT)</b>
Families living below 100% of the poverty line, homeless, or foster status	<b>89%</b>	
Families experienced homelessness	<b>13%</b>	
Foster children	<b>10%</b>	
Children enrolled for their 2nd or more year	<b>49%</b>	
Families' ethnicity was Hispanic or Latino origin	<b>26%</b>	
Single-parent families	<b>56%</b>	
Families who were unemployed	<b>36%</b>	
Children with a disability	<b>22%</b>	
Children served with a disability were newly identified by the Early Head Start program this year	<b>7%</b>	
Percentage of eligible children in the community who were served by our Early Head Start programs	<b>7%</b>	

## ●●● Health Services

Our program engages in ongoing efforts to coordinate health and nutrition services for children and families. Identifying each child’s medical, dental, and nutritional needs is done through partnering with families and addressing barriers to these important components of child health and development. Staff assist families in finding medical and dental homes and accessing insurance for the family through state and local programs. Our ECE Nurse continues to support our Family Support Specialists with postnatal

and postpartum visits and services. Through these efforts, we have connected many new mothers with our Mental Health Consultant, who assists parents with mental health referrals to partners within our community.

Family support staff bring nutritional information to home visits, supporting healthy eating habits and opportunities to make preparing food and cooking a family activity. Our Nutritionist provided fun family recipes that included cultural and dietary options. Because many of our families struggle with food security, our staff has connected with many food banks and school districts to ensure we have appropriate resources to support accessibility.

Our Hearing and Vision Specialist continued to provide hearing/vision and growth assessment screenings within our centers, while also training our family support staff as they conducted these in the homes. This information from these screenings is provided to all families, along with a referral process so practitioners can follow up on any concerns. We have also streamlined our immunization process to ensure we can alert families of upcoming immunizations within a reasonable timeframe to prevent any interruptions in providing care in our centers.



### HEALTH SERVICES

	AT TIME OF ENROLLMENT	AT END OF ENROLLMENT
Children & pregnant women with health insurance	<b>99%</b>	<b>99%</b>
Children with an ongoing source of continuous, accessible health care	<b>93%</b>	<b>97%</b>
Children up-to-date on medical exams	<b>38%</b>	<b>72%</b>
Children up-to-date on immunizations	<b>66%</b>	<b>79%</b>
Children up-to-date on dental care	<b>N/A</b>	<b>50%</b>

"Getting to know my Family Support Specialist and having her be a part of our lives for a considerable amount of time was great. The ongoing support and the community/relational aspect were great benefits."

- EHS Home-Based Parent



## ●●● School Readiness

Adults play a pivotal role in supporting young children's growth and development. While the pandemic has abated, both staff and families have expressed significant ongoing stress, anxiety, and uncertainty. Caregiver stress can make it more challenging for adults to meet children's needs effectively, including providing opportunities for rich and engaging learning and discovery. When adults' needs are not met, it is much more challenging for them to support and promote children's school readiness. We recognize that it will take time to heal and recover from the aftermath of the pandemic and continue to focus on promoting building relationships and a sense of community and belonging.

This year, we provided the Circle of Security Parenting Series to families and staff during separate and multiple sessions. This eight-week course focuses on attachment and helping adults understand where young children are on the circle, including recognizing a child's need for connection with a trusted caregiver. Through skilled facilitation, participants reflected on their experiences as children and how this new learning strengthened their ability to remain well-regulated and attuned to children's needs. Participant feedback proved

compelling, with some families using the experience to recruit other families to enroll in Early Head Start and others who indicated it was so powerful that they intend to participate again.

Staff and families have expressed concerns about children's development as a result of social distancing and some of the health and safety practices we had put in place, including mask-wearing. We recognize these practices limit young children's ability to observe how adults' mouths move as they form words and speak in sentences. While we have moved away from regular mask-wearing and social distancing, many of the children now in our care were shaped by these practices. Classroom staff are being much more intentional about how their voices sound as they interact with young children, as well as actively helping children build social skills, including developing friendship skills.

That said, children are resilient. We continue to utilize the developmental screening tools to monitor children's development, collaborate with families when there are noted concerns, and identify next steps. Part of this process now more intentionally includes deeper conversations and reflections about the potential lack of opportunities for children to grow and practice emerging skills in an enriching environment. As a result, staff and families are choosing to give children more time at the center. They will continue to monitor, and conduct a rescreening, before facilitating a referral to early intervention for evaluation. Trend data suggests that referrals for children are slightly lower this year when compared to previous years. This may, in part, result in lower enrollment and will be something that we continue to monitor over time.

In addition, we have also strengthened our transition practices by advocating at the state level to have program-wide variances in place, which allows us to keep children who turn three in Early Head Start a little longer. Previously, we would need to submit an individual request and await approval from the Department of Children, Youth and Families



licensing department. Having that additional time allows us to work more closely with families and with children to promote executive function and friendship skills, provide opportunities for children to build relationships with their new teachers, experience being in a classroom with a large group of children for small periods, before making the transition.

We are currently implementing two different ongoing formative child assessment tools. In our home-based program, we use Galileo, and we use Teaching Strategies GOLD (TS GOLD) in our center-based programs. Finding an assessment tool sensitive enough to capture the small, incremental changes in development for infants and toddlers has been challenging. Home-based staff report that the tool and assessment results have helped them strengthen conversations with families about child development, what families can expect their children to do next, and the role families play in nurturing their child's growth by providing learning opportunities in their daily routines.

We continue to use the GOLD assessment system for children enrolled in our center-based Early Head Start programs. This assessment system is also being used for all children in our child care centers and is a requirement in our state-funded ECEAP preschool program and our pilot Early ECEAP site for families with infants and toddlers who need child care. Having a standard assessment measure in our center-based programs promotes greater continuity and alignment of instructional, professional development, and family engagement practices across the developmental continuum.

Our school readiness goals include information about external factors that may create additional challenges for families as their children's first and most important teachers. We utilized this information and child assessment data to set goals, identify and implement specific strategies, and revisit progress so that we can adjust as needed. Classroom staff and home visitors utilize the goals in various ways, including posting the information in centers and classrooms, sharing the information



*"My favorite moments in the program would be when he'd come home and show me the new things he'd learned, whether that be by saying a new word, sharing things, or even learning how to sign language some."*

- EHS Center-Based Parent

with families, reflecting on their current practices, and identifying strategies to improve their practice.

Below is data on our current school readiness goals for EHS Center-Based and Home-Based. Since the two programs use different assessment tools, the goals are measured in different ways, and therefore the data is displayed slightly differently. The Home-Based assessment tool is also broken down with different age ranges so all children are lumped together in the data.

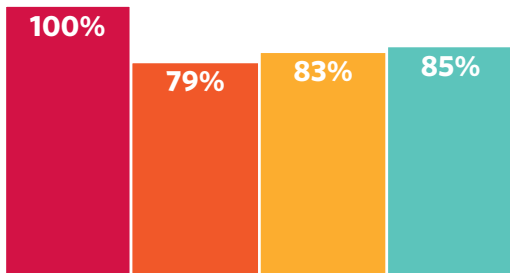
% of assessed children who met or exceeded expectations for each indicator

● INFANT ● AGE 1 ● AGE 2 ● AVERAGE

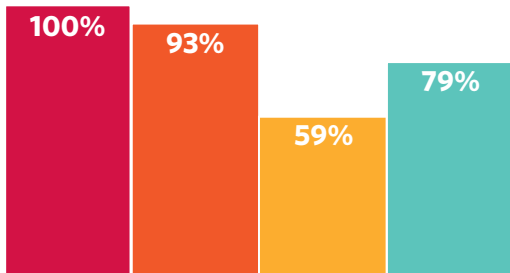
## SOCIAL EMOTIONAL DEVELOPMENT



**Goal:** Children will use strategies to regulate their emotions and participate with others across multiple settings.



CHILDREN TAKE CARE OF THEIR OWN NEEDS APPROPRIATELY



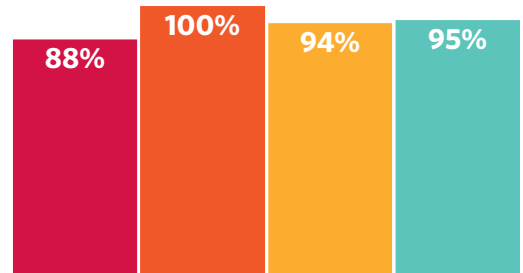
CHILDREN SOLVE SOCIAL PROBLEMS



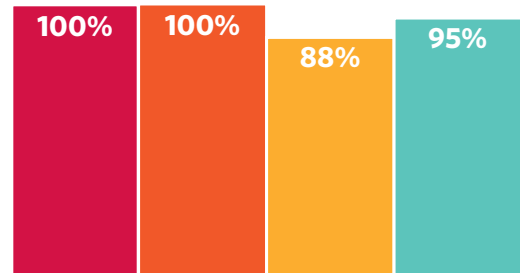
## APPROACHES TO LEARNING



**Goal:** Children will demonstrate attentiveness, engagement, and persistence across a variety of learning situations.



CHILDREN SHOW CURIOSITY AND MOTIVATION

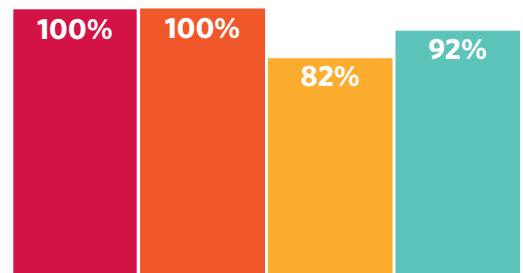


CHILDREN PERSIST

## COGNITION



**Goal:** Children will demonstrate the ability to solve problems when faced with new or challenging learning situations.



CHILDREN SOLVE PROBLEMS

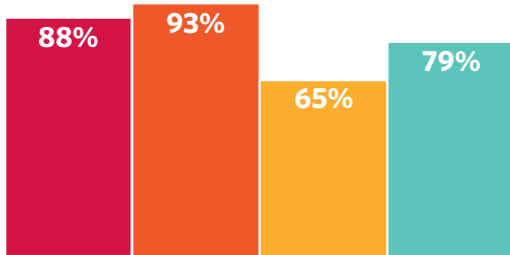
\*This is a set of children assessed at the end of August 2023. Due to EHS being a year-round program some of these children may have been newly enrolled. (Infants - 8, 1 year olds - 14, 2 year olds - 18).



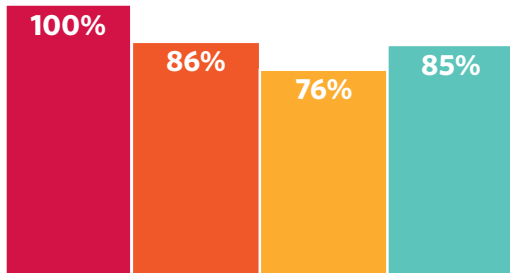
## LANGUAGE AND COMMUNICATION



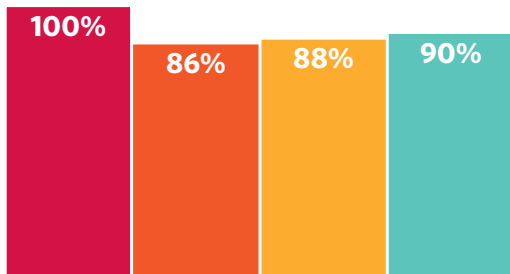
**Goal:** Children will produce, listen to, and understand language as part of developmentally appropriate conversation.



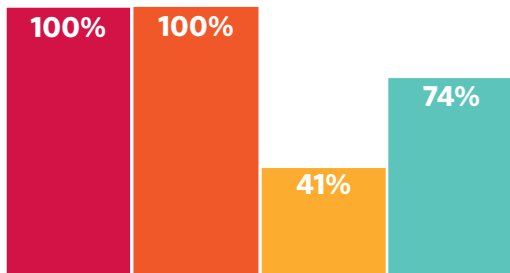
CHILDREN USE AN EXPANDING, EXPRESSIVE VOCABULARY



CHILDREN SPEAK CLEARLY



CHILDREN USE CONVENTIONAL GRAMMAR

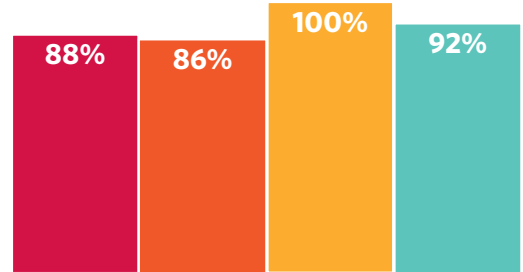


CHILDREN USE SOCIAL RULES OF LANGUAGE

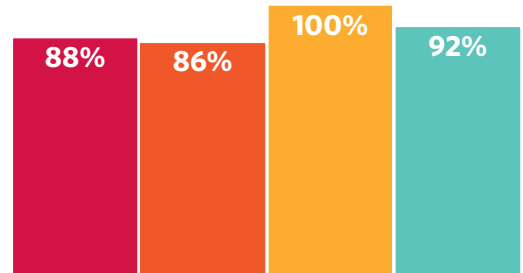
## PERCEPTUAL, MOTOR & PHYSICAL DEVELOPMENT



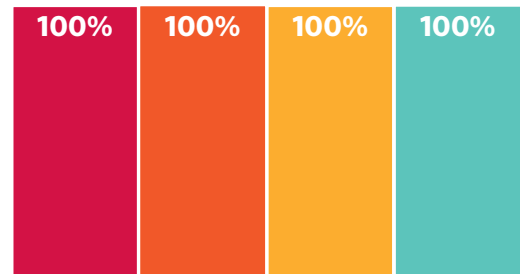
**Goal:** Children will demonstrate large-motor and fine-motor strength and coordination.



CHILDREN DEMONSTRATE TRAVELING SKILLS



CHILDREN DEMONSTRATE BALANCING SKILLS



CHILDREN USE FINGERS AND HANDS

*% of assessed children who met or exceeded expectations for each indicator*

● INFANT ● AGE 1 ● AGE 2 ● AVERAGE

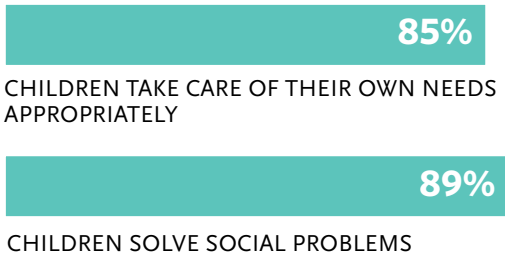
\*This is a set of children assessed at the end of August 2023. Due to EHS being a year-round program some of these children may have been newly enrolled. (Infants - 8, 1 year olds - 14, 2 year olds - 18).

% of assessed children who met or exceeded expectations for each indicator

## SOCIAL EMOTIONAL DEVELOPMENT



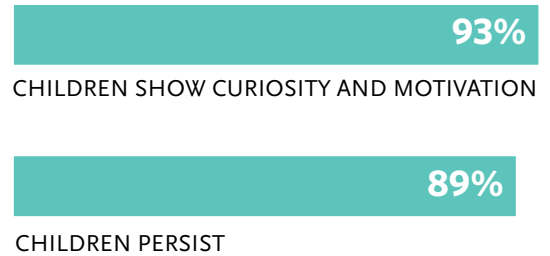
**Goal:** Children will use strategies to regulate their emotions and participate with others across multiple settings.



## APPROACHES TO LEARNING



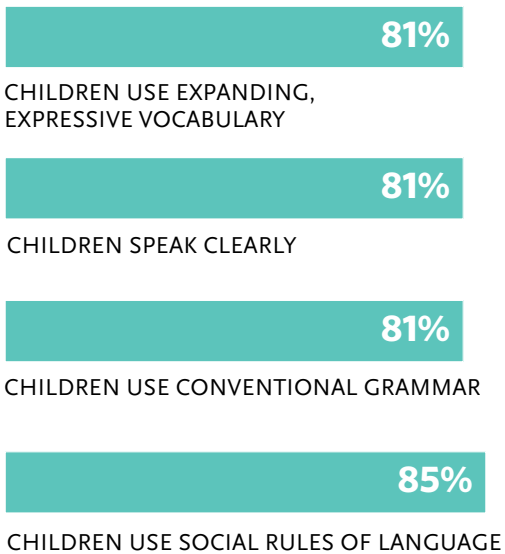
**Goal:** Children will demonstrate attentiveness, engagement, and persistence across a variety of learning situations.



## LANGUAGE AND COMMUNICATION



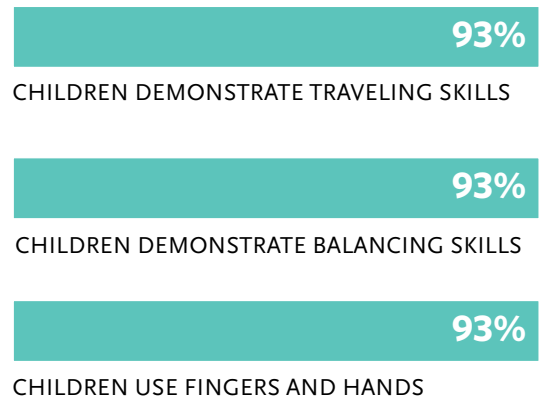
**Goal:** Children will produce, listen to, and understand language as part of developmentally appropriate conversation.



## PERCEPTUAL, MOTOR & PHYSICAL DEVELOPMENT



**Goal:** Children will demonstrate large-motor and fine-motor strength and coordination.



## COGNITION



**Goal:** Children will demonstrate the ability to solve problems when faced with new or challenging learning situations.



\*This is a set of children that were enrolled anytime between May 2023-August 2023. Due to EHS being a year-round program some children may have been newly enrolled and not assessed. (27 children assessed)

## ●●● Family Engagement

Family engagement is an ongoing priority for our programs. We strive to build positive, authentic relationships with each family we encounter. Strong connections with families promote well-being, positive child-family attachment, and ongoing learning and educational opportunities to better support children's development. Our staff feel children are most successful when parents are actively involved in their learning, and we are continuously looking for more ways of involvement.

Family support staff engage in Community Connects at each of our centers every other month. This allows families to collaborate with staff and other parents about topics that are important to them and their community. These meetings also help to build support systems and prevent isolation for families as they parent young children.

Our Health Services Advisory Committee continues to discuss medical and dental care, mental health supports, and health topics. Our Clark County HSAC meeting continues to be virtual and is meeting regularly to determine

ways to improve access and information for our community. Policy Council numbers are starting to increase. We saw seven family members attend our November session, and we continue to use our virtual option to allow families flexibility. Currently, our Policy Council is working on a First Responder/Community Event, which will be held in May. This has been fully parent-driven and is meant to connect families to community partners and provide some opportunities for children to interact with law enforcement, firefighters, and other responders to promote a sense of belonging and connection.

We continue to provide access to information about housing, food support, transportation, substance abuse, and mental health support. Our connection to community partners is strong and allows us to link families with protective factors that can help decrease and eliminate risks and stressors. In addition to our regular partners, this year, we have worked closely with Janus Youth, Council for the Homeless, YWCA SafeChoice, PCAP, Northwest Children's Outreach, and many more.



*"The program did a great job supporting me in everything. You name a good thing a parent asks for in a child care center, Park Crest is it!"*

- EHS Center-based Parent

## FAMILY NEEDS & GOALS

Below is information on the most common **Focuses** and **Goals** that families have identified this past year and shows which focuses/goals were met or met partially, abandoned/unmet, or some of the identified focuses/goals still being addressed currently.

### MOST COMMON FOCUSES IDENTIFIED BY FAMILIES\*

FOCUSES IDENTIFIED			
Financial - 28	23	1	4
Food - 16	14	1	1
Families & Communities - 14	14	0	0
Child Health - 12	11	0	1
Child Care - 11	7	2	2
Housing - 10	9	1	0
Adult Health - 7	5	2	0
Transportation - 4	3	1	0
Legal - 4	1	2	1
Education/Training - 3	1	0	2
Employment - 3	2	1	0
ESL Classes - 3	2	1	0
Promoting Primary Language - 3	3	0	0
Family Ed. at Home - 3	3	0	0

### MOST COMMON GOALS IDENTIFIED BY FAMILIES\*

GOALS IDENTIFIED			
Housing - 13	7	2	4
Family Ed. at Home - 8	2	0	6
Parenting Skills - 7	4	0	3
Parent Knowledge of Child Development - 7	0	0	7
Physical Health/Exercise - 6	1	3	2
Nurturing Relationships - 6	0	0	6
Child Care - 5	0	0	5
Employment - 5	1	0	4
Advocating for Child's Education/Transitions - 5	5	0	0
Financial - 4	2	2	0
Adult Health - 4	3	1	0
ESL Classes - 4	3	1	0
Education/Training - 3	0	2	1
Parent/Family Relationships - 3	1	0	2
Child Health - 3	2	1	0
Promoting Primary Language - 3	3	0	0
Transportation - 2	0	2	0



MET OR MET PARTIALLY



ABANDONED OR UNMET BY FAMILY



STILL OPEN/WORKING ON

\* Household Items were the highest need identified this past year because families requested diapers & wipes and hygiene kits through our CARES funding. Clothing was the #2 need identified, but due to our local partnership with Northwest Children's Outreach we can meet this clothing need most of the time. Those two items have been left off the data so that it doesn't skew the charts.

## Professional Development

As we continue to address and respond to the staffing crisis within our field, we are tasked with thinking of new ways to build adult capacity, address the needs of newer and less experienced staff at a time when children and families have more complex needs than we've seen previously, and determine ways of building strong relationships and foundations with staff to increase retention and skills leading to confidence and job satisfaction. This year, we continued to build upon and strengthen professional learning routines to address these growing needs and challenges.

We implemented the second year of Collaborative Planning Days for teaching teams. These are days where centers are closed to families, and staff have opportunities to focus on team building, site and classroom-based collaboration, and shared professional learning experiences. After last year's positive feedback and success, we've added additional days to allow staff at least one protected day per month to



*"The most meaningful part of the program for me was how the staff treated my son like family and saw him for who he is right from the start."*

- EHS Center-based Parent

focus on this type of connective work and learning. Adult time to connect with one another, without children in the room, has been invaluable, especially when operating within an extended day child care model. Staff have utilized the protected time to case conference, engage in shared lesson planning and routine and environment modifications, connect with Family Support Specialists, attend site-specific training supported by Social Emotional Learning and Continuous Quality Improvement Specialists, plan individualized activities and strategies to meet individual child needs, and analyze child assessment data, among other things. During Collaborative Planning Days, we also moved into the second year of Essential Fellowship training for Center Directors. This year, the focus of the professional learning experience was to slow down the content and go deeper with discussions about what it means to be an Instructional Leader.

This year, we also launched a new option for self-paced Teacher and Family Support Staff orientations through a Canvas platform. Our new employee orientation process comprises the first four months of employment in an effort to slow down the pace of learning and revisit topics and information over time. Until this year, this process has always been done as a series of facilitated one-on-one trainings with Center Directors and Family Support Coordinators. Due to the increased pace of staff turnover during this pandemic recovery period, our programs needed to address capacity concerns for supervisors. We built a self-paced orientation platform as an option for new staff, in addition to retaining the facilitated in-person options.

The pilot period of this new platform has already shown promising success, with Center Directors feeling like they have more time and capacity to have deeper conversations about the learning after staff have already accessed it on their own. We've also received feedback from teachers that this new platform honors their preferred learning style and that they appreciate the option of choosing how they access information. Additionally, staff have noted that the Canvas platform is helpful during orientation because things are available to view multiple times. As we continue to finish the development of this

## Professional Development (continued)

first iteration of this platform, we are looking to make orientations available in Spanish this year, and the use of technology in this way allows us to better meet accessibility needs.

Along this same line, we continue to think about ways our professional development system can help support and address the ongoing staffing crisis. Many new staff are stepping into roles without a current understanding of our ESD 112 programs, sometimes without much knowledge or experience in the field of ECE, and at a time when they are met with complex trauma and the needs of students and families. This year, we are in the beginning stages of exploring mentorship models to increase staff understanding, confidence, and competence as they begin new positions. We continue to receive feedback and requests for more opportunities to see practices in action. We have created some trial models for staff to learn through job-embedded supports to increase teacher, Center Director, and Family Support Staff efficacy and reduce burnout and turnover.

This year, a Center Director mentorship model was piloted, and teacher and family support staff mentorship programs were drafted and are set to

be piloted next year. We anticipate we will continue to learn and revise these models based on staff feedback and input. This will be an iterative process. The mentorship models are designed to be additional support for new staff. They pair staff with experienced staff in the same role to shadow and learn alongside them in the beginning weeks of employment. They set a foundation for the four-month orientation and onboarding process, focus deeply on relationship-building and fostering a sense of curiosity and wonder about staff practices and values, and allow time to adjust to a new role without the weight of responsibility of being in ratio or holding a caseload.

We know that the work of adults in our EHS programs is sometimes challenging, frustrating, and tiring. Additionally, we know it can also be joyful and meaningful. Many Teachers and FSS enter the field because they hope to make a difference in someone's life. Professional learning routines can be a great way to ensure that we meet the needs of staff so that they have what they need to meet the needs of others. We continue to explore ways to ensure that professional learning spaces help staff pause, take a breath, and find excitement in reflecting and deepening skills and knowledge.

## Community Assessment Survey

Drawing from the data and key findings of ESD 112 2023 Community Assessment and input from leadership team members, the following reflections and recommendations will be considered to support ESD 112's continued responsiveness to community need.

**Reflection 1: Program Design, 2023 update.** Since the 2022 Community Assessment was conducted, ESD 112 made adjustments to its allocation of funded Early Head Start, Early ECEAP, and ECEAP slots to meet the needs of children and families and offer services where staffing and facilities support the fullest enrollment. Further, ESD 112 program data and leadership team reflections continue to highlight the significant challenges with the early childhood workforce crisis. Staffing shortages impacting ESD 112's programs are

limiting the ability to meet families' needs. National data show that early childhood staffing shortages are a widespread issue; compensation is a critical factor leading individuals to leave the early care and education workforce.

**Reflection 2: Parent Training and Employment, 2023 update:** Data show steady rates of employment among families served by ESD 112, though unemployment remains higher than the general population.

Unemployment rates in the broader service area continue to trend higher than the statewide rate, pointing to an ongoing need for educational counseling, job training, and resources to families related to employment skill building and job search.

**Reflection 3: Health Services, 2023 update:** Updated

## Community Assessment Survey (continued)

data continue to show challenging health outcomes for adults in ESD 112's service area as well as factors impacting infant and child health and well-being. Access to primary care providers, dentists, and mental health providers across the service area remains difficult as the numbers of providers are limited and other factors such as location, insurance, language, and availability impact access. While there has been some improvement in the ratio of mental health providers to individuals in the service area, there is also unprecedented demand for mental health services for both children and adults. ESD 112's ongoing focus to connect, refer, and provide health and mental health services to families is in direct response to data and evident needs.

**Reflection 4: Affordable Housing and Homelessness, 2023 update:** Updated data show that affordable housing and homelessness are ongoing critical issues in ESD 112's service area. Data continue to show disparity in housing costs and affordability in ESD 112's service area as well as a high rental cost burden. Homelessness has increased in the service area, with the greatest numbers of individuals experiencing homelessness or unstably housed residing in Clark County and Cowlitz County. ESD 112 has increased the number of children that it serves in its programs who are experiencing homelessness and has observed that more than 30% of families qualify for services based on the McKinney-Vento definition of homelessness.

**Reflection 5: Bilingual Support, 2023 update:** The need for bilingual service providers remains a barrier to accessing services for some individuals in ESD 112's service area. The need for bilingual service providers is integral to all other recommendations in the report, as ESD 112 continues to serve a diverse population of children and families.

**Reflection 6. Public School District Relationship-Building, 2023 update:** Disparities in quality and student outcomes remain evident in public school districts within ESD 112's service area. Challenges remain with regard to kindergarten readiness – rates of kindergarteners who entered school ready in all

areas of development and learning are less than 50% in a majority of school districts in the service area. Further, reflections from ESD 112 leadership team members highlight challenges with long waitlists for referrals for evaluations for children with a suspected disability and for early intervention and preschool special education services. Data and reflections point to the value in continuing to partner with school districts to enhance services to families.

**Reflection 7: Impact of COVID-19, 2023 update:** The COVID-19 pandemic has stabilized in ESD 112's, though its impact continues to be seen in community data from the last several years. Data also show recovery from the pandemic, as unemployment has returned to pre-pandemic levels and communities are no longer impacted – to the same extent as in 2020 and 2021 by program shutdowns. Other pressing factors, some of which may be linked to the COVID-19 pandemic, have taken a central focus on impacting need in ESD 112's service area. This includes factors such as inflation and the staffing crisis taking place in the child care sector.



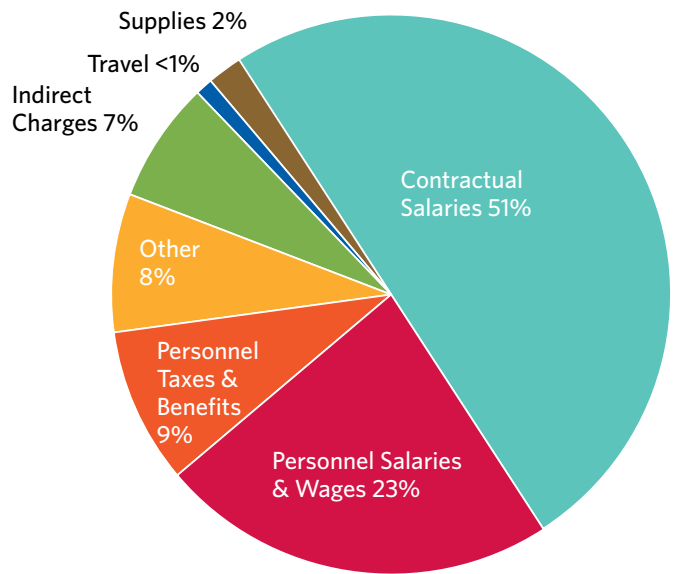
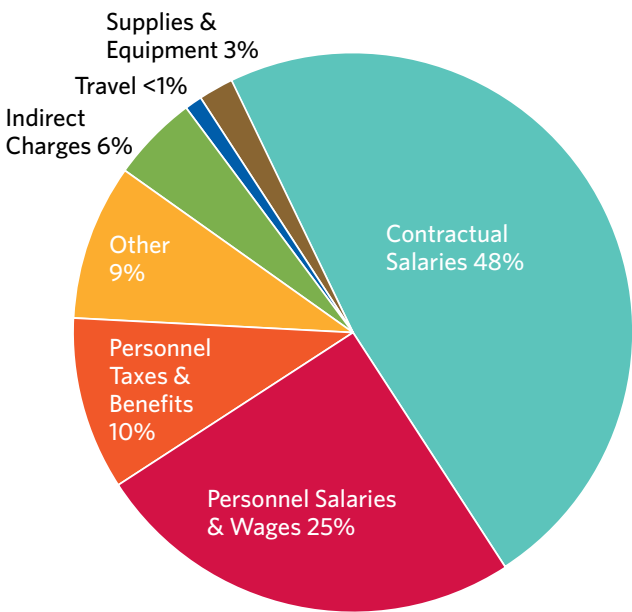
# EHS Budget

## ACTUAL ANNUAL BUDGET September 1, 2022 - August 31, 2023

	EHS	EHS: HB T/TA	TOTAL
<b>INCOME</b>			
Federal Early Head Start Grant	2,514,173	54,246	2,568,419
<b>TOTAL INCOME</b>			<b>2,568,419</b>
<b>EXPENSES</b>			
Personnel Salaries & Wages	617,453	13,723	631,176
Personnel Taxes & Benefits	248,878	6,261	255,139
Travel	-	16,424	16,424
Equipment	8,800	-	8,800
Supplies	55,442	-	55,442
Contractual Salaries	1,236,217	-	1,236,217
Other	209,302	14,527	223,829
Subtotal, Direct Charges	2,376,092	50,935	2,427,027
Indirect Charges	138,081	3,311	141,392
<b>TOTAL EXPENSES</b>	<b>2,514,173</b>	<b>54,246</b>	<b>2,568,419</b>
<b>IN-KIND CONTRIBUTIONS &amp; DONATION (non-federal share)</b>			
Parent Services (In-Kind)	-	-	-
Community Partners (In-Kind)	-	-	-
Donated Supplies	-	-	-
<b>TOTAL (non-federal share)</b>	<b>-</b>	<b>-</b>	<b>-</b>

## PROJECTED ANNUAL BUDGET September 1, 2023 - August 31, 2024

	EHS	EHS: HB T/TA	TOTAL
<b>INCOME</b>			
Federal Early Head Start Grant	2,713,578	54,246	2,767,824
<b>TOTAL INCOME</b>			<b>2,767,824</b>
<b>EXPENSES</b>			
Personnel Salaries & Wages	617,795	13,822	631,617
Personnel Taxes & Benefits	249,717	5,111	254,828
Travel	-	9,613	9,613
Equipment	-	-	-
Supplies	55,305	-	55,305
Contractual Salaries	1,405,725	-	1,405,725
Other	203,725	22,075	225,800
Subtotal, Direct Charges	2,532,267	50,621	2,582,888
Indirect Charges	181,311	3,625	184,936
<b>TOTAL EXPENSES</b>	<b>2,713,578</b>	<b>54,246</b>	<b>2,767,824</b>
<b>IN-KIND CONTRIBUTIONS &amp; DONATION (non-federal share)</b>			
Parent Services (In-Kind)	527,373	-	527,373
Community Partners (In-Kind)	164,583	-	164,583
Donated Supplies	-	-	-
<b>TOTAL (non-federal share)</b>	<b>-</b>	<b>-</b>	<b>691,956</b>





*"It's a good program and they are very supportive. They care about you and strive to put the needs of your child first. Kind, loving, helpful regardless of how difficult family circumstances or needs are."*

- EHS Center-based Parent



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