

Oahe Child Development Center, Inc. Annual Report

September 1, 2020 - August 31, 2021 2307 E. Capitol Ave, Pierre, SD 57501 605-224-6603 <u>www.oahechild.com</u>

Vision Statement

Caring communities that maximize the potential of all children and families

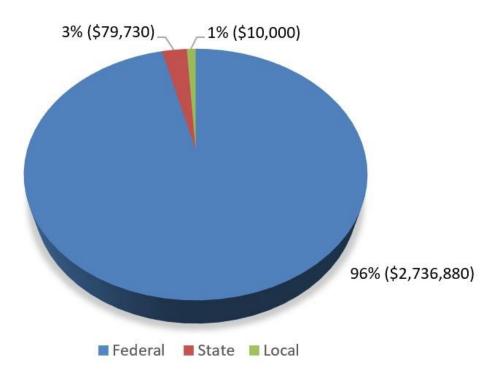
Mission Statement

Empowering individuals, strengthening families, and building communities for school and life success

Oahe Child Development Center, Inc.

During the 2020-21 program year, Oahe Child Development Center (OCDC) served 148 Head Start children from 133 families and 54 Early Head Start pregnant mothers, infants, and toddlers from 53 families. The monthly average enrollment was 95% of funded enrollment. Covid-19 impacted our ability to enroll 100% of our funded enrollment. Head Start centers were located in Hughes and Jones County. Head Start home based services were provided in Hyde, Hughes, Stanley and Sully Counties. Early Head Start home based services were provided in Hughes, Hyde, Jones, Stanley, and Sully County. OCDC served approximately 76% of the eligible population.

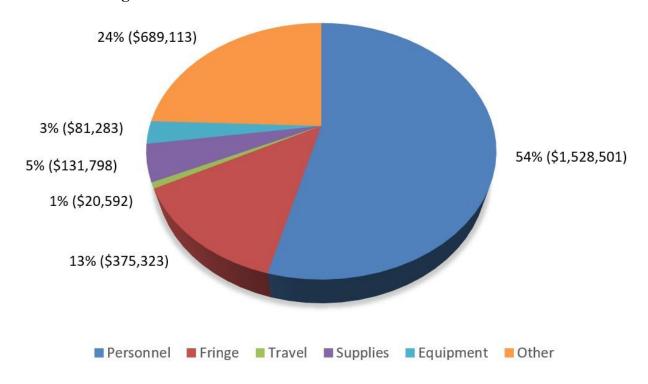
2020 – 2021 Funding: \$2,826,610



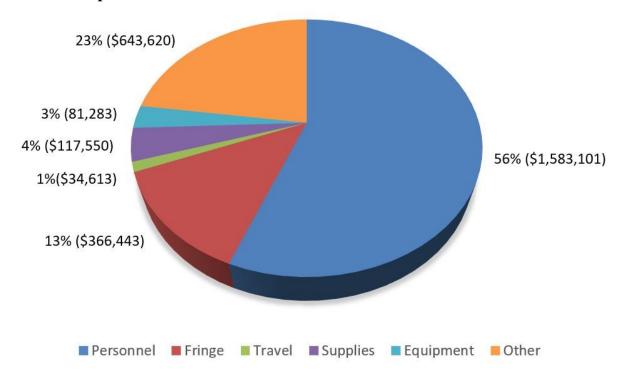
Financial Information

- Federal funding primarily comes from the Head Start Basic Grant, Head Start Training Grant, Early Head Start Basic Grant, Early Head Start Training Grant, and Cares Act Funding.
- State funding comes from USDA Food Program Reimbursements.
- Local funding comes from United Way.

2020 - 2021 Budget



2020 - 2021 Expenditures



Most Recent Audit and Review

The results from the most recent Federal Monitoring Review (December 2020), showed no areas of noncompliance. The most recent financial audit (May 2021) had no findings as well.

Medical / Dental Information

Oahe Child Development Center works with parents and the community to continue to educate regarding the importance of preventative care. The following chart shows information regarding the end of the 2020-2021 program year:

	Head Start	Early Head Start
The percentage that are up-to-date on a schedule of age-appropriate preventive and primary health care regarding medical exams.***	84%	65%
The percentage of Head Start children who completed professional dental exams since last year's Program Information Report. (HS)	82%	N/A
The percentage of Early Head Start children that are up-to-date according to the state's EPSDT schedule regarding dental exams. (EHS)	N/A	67%

^{***}For Head Start children, 15 were up to date at the beginning of the program year and 124 were up to date at the end of the program year. For Early Head Start children, 25 were up to date at the beginning of the program year and 34 were up to date at the end of the program year.

School Readiness

The focus of school readiness is making sure that children are ready for school, families are ready to support their children's learning and schools are ready for children. OCDC partners with families to set school readiness goals which emphasize five domains of learning: (1) Physical Development (2) Social and Emotional Development, (3) Approaches Toward Learning, (4) Language and Literacy Development, and (5) Cognition. School readiness goals apply to infants, toddlers, and preschool-aged children, with expectations progressing as children get older. The goals are aligned with South Dakota Early Learning Standards, Head Start Framework, and expectations of local schools. Creative Curriculum and Parents As Teachers are the curriculum used and progress towards school readiness goals is measured three times per year using data from Teaching Strategies GOLD Assessment.

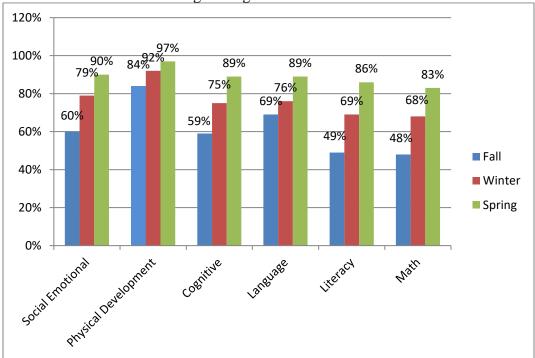
OCDC School Readiness Goal Scores 2020-2021 Percentage of Children Meeting or Exceeding Age Level Expectations

	Fall	Winter	Spring
Develop/use perceptual information to guide motions/interactions such as traveling, navigation, and balance.	87%	91%	98%
Develop skills to manipulate and explore.	82%	92%	98%
Develop healthy habits and safe practices.	84%	94%	98%
Regulate own emotions and behaviors.	66%	82%	90%
Establish positive relationships and interactions.	72%	87%	94%
Demonstrate a positive self-concept and self-confidence.	63%	83%	90%
Begin to learn and use rules, routines and directions.	78%	85%	92%
Develop persistence/attentiveness, curiosity/initiative, and flexibility/creativity.	76%	87%	93%

Demonstrate receptive and expressive language.	78%	85%	93%
Engage, respond to, and understand stories and books.	64%	80%	92%
Demonstrate alphabet knowledge and phonological awareness.	57%	73%	86%
Demonstrate the concepts of print.	52%	72%	89%
Demonstrate early writing skills.	58%	73%	90%
Begin to develop inquiry, reasoning, and problem-solving skills.	67%	79%	92%
Begin to learn/use simple mathematic skills.	58%	75%	86%

The following chart shows the percentage of enrolled children that met or exceeded age level expectations across all learning domains during the 2020-21 program year, as assessed by

Teaching Strategies GOLD assessment.



OCDC Program CLASS Scores

Classroom Assessment Scoring System (CLASS) is used to monitor classroom quality. The classrooms are scored on a scale of 1-7 with 7 being the best, except for the negative climate in which a score of 1 is the best. The following are scores from our most recent Federal CLASS Review, which occurred in April 2018.

Domain	Dimension	2018 National CLASS Scores Average	2018 OCDC CLASS Scores
Emotional	Positive Climate	6.04	6.00
Support	Negative Climate (Smaller number is better)	1.06	1.00

	Teacher Sensitivity	5.90	6.25
	Regard for Student Perspectives	5.44	6.38
	Average of Dimension	6.08	6.4063
Classroom	Behavior Management	5.99	6.50
Organization	Productivity	6.10	6.75
	Instructional Learning Formats	5.29	6.19
	Average of Dimension	5.80	6.4792
Instructional	Concept Development	2.44	2.25
Support	Quality of Feedback	2.98	3.63
	Language Modeling	3.46	3.75
	Average of Dimension	2.96	3.2083

Transition activities and information are provided to ensure the smooth movement of children and families from Head Start into a public education setting, from Early Head Start to Head Start, as well as through other life changes. This is accomplished through the use of informational materials, parent socials, visits to the public school or Head Start, transition meetings with local education agencies, transfer of records, and ongoing education about the transition process. Examples of transition activities included: educational material sent to families about sippy cups, pacifiers, toilet training, new siblings, new baby packets, meetings with kindergarten teachers, and transition plans for each child. Transition packets and information are given to families for summer activities and information about the child's next placement.

Parent Engagement

OCDC believes that parents are a child's first and most important educator and sends home weekly educational home activities for the parents to complete with their child(ren). Parents are asked about their child's strengths, needs, and interests. This parent engagement helps to promote positive child outcomes. Parents are encouraged to be engaged throughout the learning process as well as asked to be engaged in a variety of activities, committees, and volunteering opportunities in the program, some of which include Health Services Advisory Council, interview committees, parenting classes, Policy Council, and Parent Committees. Some specific parent engagement activities during the 2020-2021 program year included: "Let's Have A Ball" where the focus was on healthy moving and healthy eating activities, "Stress Relieving Activities" Night, and "Pete The Cat Literacy and Math Night."

Staff build relationships with parents and encourage them to set and achieve goals for themselves and their child(ren). The Head Start Parent, Family and Community Engagement Framework is utilized as a tool when working with families to set goals. OCDC's Head Start families set 151 goals for themselves during our 2020-2021 program year and completed 151 of them for a 100% completion rate. Early Head Start families set 107 goals and completed 81of them for a 76% completion rate. Parents are encouraged to attend parent events that focus on health and safety, mental health, nutrition, transition, family and community services, and education topics. During the 2020-21 program year, OCDC had 298 people volunteer services or items to our program, and 190 of those were current or former Head Start or Early Head Start parents.

Parent Statistics from our 2020-21 Program Year

Percent of parents that:

stated staff kept them informed of program information, activities, socials or parent meetings.	99%
felt program staff listened to their concerns and provided appropriate information, resources, and referrals to meet their family's needs.	100%
gained knowledge regarding their child's health care needs.	99%
stated they strengthened their ability to help their child build social and emotional skills	99%
stated they strengthened their ability to help their child build math skills	96%
stated they gained knowledge and strategies that helped them with their child with his/her literacy and language skills.	99%
stated they had become more involved with their child's education.	97%
stated their family developed or maintained healthy eating habits	98%
stated their family developed or maintained an active lifestyle	95%
stated our program gave them an opportunity to advance their career and other life goals.	83%
stated they were more aware of the agencies in the community that provide services to their family	97%
were aware that OCDC was able to help their family obtain mental health counseling when needed.	99%
felt their self-confidence and leadership skills improved by being involved with our program.	92%
felt that OCDC staff helped them make progress towards their family goals	99%
had experiences in our program that supported their self-sufficiency, parenting skills, or their family's independence.	97%
stated the overall quality of services that OCDC provided to their families as above average and excellent.	91%

The following are a few comments from the parents of our enrolled children during the 2020-2021 program year:

- Before he started EHS, my son had a very limited vocabulary and a lot more behaviors.
 Now, he can speak a lot more and his behaviors have decreased as he has developed the skills to verbally communicate his needs. He has also started to follow simple directions very well for the most part.
- When our youngest came to us she was labeled "failure to thrive" and now after 2 years with our family and 1 full year of EHS, she is at or above her goals in every area.
- My oldest son was diagnosed with a cognitive learning disability. We wouldn't have known or caught it as easily if it hadn't been for his teacher at OCDC. Recently, we found out he is on the autism spectrum. OCDC pointed us in the right direction to get my son the help he needed that qualified him for services he needed to help him succeed in school. For that I am forever thankful.
- Head Start has been a part of my life for nearly 6 years from the nutritious meals to the Conscious Discipline training to helping my family get set up with counseling- they have been there to help in all aspects. The caring teachers and staff make it a perfect first place for any child's education to start.

Summary of Key Findings from the Community Assessment

Key findings from the overall community assessment that provide vital information for program planning include:

- Children need to continue to grow in the areas of math and social skills.
- South Dakota childhood obesity is still a concern.
- Alcohol/other drug abuse are concerns in the community; however, individuals surveyed did not feel it was a concern for their family, only for other families in the community.
- Bullying and other social emotional skills are a concern in the community.
- There is a steady decline in population in all of the counties OCDC serves except for Hughes and Stanley Counties.

Strengths noted in the community assessment were:

- Head Start and Early Head Start and preschool services
- Faith/spiritual support systems
- School systems
- Collaborative Helping Communities

OCDC used the information obtained from the community assessment in conjunction with other program data to guide program services and set program goals and objectives.