

MountainHeart Community Services, Inc.

2018 Annual Report

Successes of our families served:

A story from our WV Birth to Three Program –

We are only in a family's life briefly while gathering information and preparing for the IFSP so I often think about that time and if we have an impact on children's lives. I met a little guy today that will be two in April and he appears to have been severely neglected prior to coming into foster care in November, 2018. He was only removed then because his baby brother was born addicted to substances and the hospital reported it to the local DSS in Virginia. Foster Mom met me at a local place to eat because I wasn't able to get to her house when I tried last week. He was so sad. He had a flat look and didn't hardly make a sound. He doesn't play with toys or anything, he doesn't acknowledge his baby brother, he has behavior concerns and he keeps losing weight. His foster mother told me that Charleston said he has "global delays" but they've not giving him a diagnosis of any kind as of yet. She described him as "lifeless." He won't hardly make eye contact but he held my hand tight while sitting at the table for about 15 minutes. I sat there with my left hand in his while I wrote and completed paperwork. This wasn't easy but I wasn't letting his hand go for nothing. His foster mother also told me that he wouldn't scribble. His social worker has tried and he just won't do it. I got to thinking. He doesn't like his hair washed, he doesn't chew foods, etc. so maybe it's a texture thing. I keep twistable crayons in my bag because we all know how kids love to get in our bags and I showed him how to use it on the back of a consent form. Seconds later he was holding the crayon and he was marking on my paper. His foster mother smiled a BIG smile and said that was a first and she couldn't wait to show his social worker and she was going to hang it on their refrigerator as soon as they got home. My heart smiled. I sent him home with his artwork and the crayon.

A story from our Child Care Resource and Referral Program –

First success – I have a case that started in 7/2016. Mother's name is Sarah and the father's name is Jason. Sarah works and at the time of application, Jason was at the end of his 1st year with WVSOM (Started school July 2015). At the time of application, they were a family of 4.

They have continued their case throughout his schooling career. He is currently in his 4th year, in good standing, and is expected to graduate with a degree as a Doctor of Osteopathic Medicine at the end of May 2019. This family has grown in size, since opening their case. They are a family of 5 now. Though this story hasn't come to an official end YET, I see this case as a success story for the Agency.

Second success – I have a new case, which was opened Feb 2019. They are a family of 6. Mother's name is Mandy and father's name is Andrew, who is in his 4th year with WVSOM and is in good standing and is expected to graduate with a degree of Doctor of Osteopathic Medicine at the end of May 2019.

Actual Letter from applicant -

I was stuck. I had high hopes when it all started, but I just couldn't seem to make my way. Part-time jobs would lead to full-time jobs that would either seemingly disintegrate into thin air or become part-time again. I knew I had to do something, but I also knew I couldn't do it without support. My family was not in a position to help. I was looking for a way to be able to handle every need my two children and I would ever have. I was looking for a long-term solution, a "real" job or a "real" profession on which I could rely.

One day, while working one of my part-time jobs, a stranger planted the idea in my head to pursue a medical career, and I decided to investigate it further. If I could manage it, the reward should be exactly what I need. To get there, it would take two years of preparation time and two to three years of full-time, intense focus on my part.

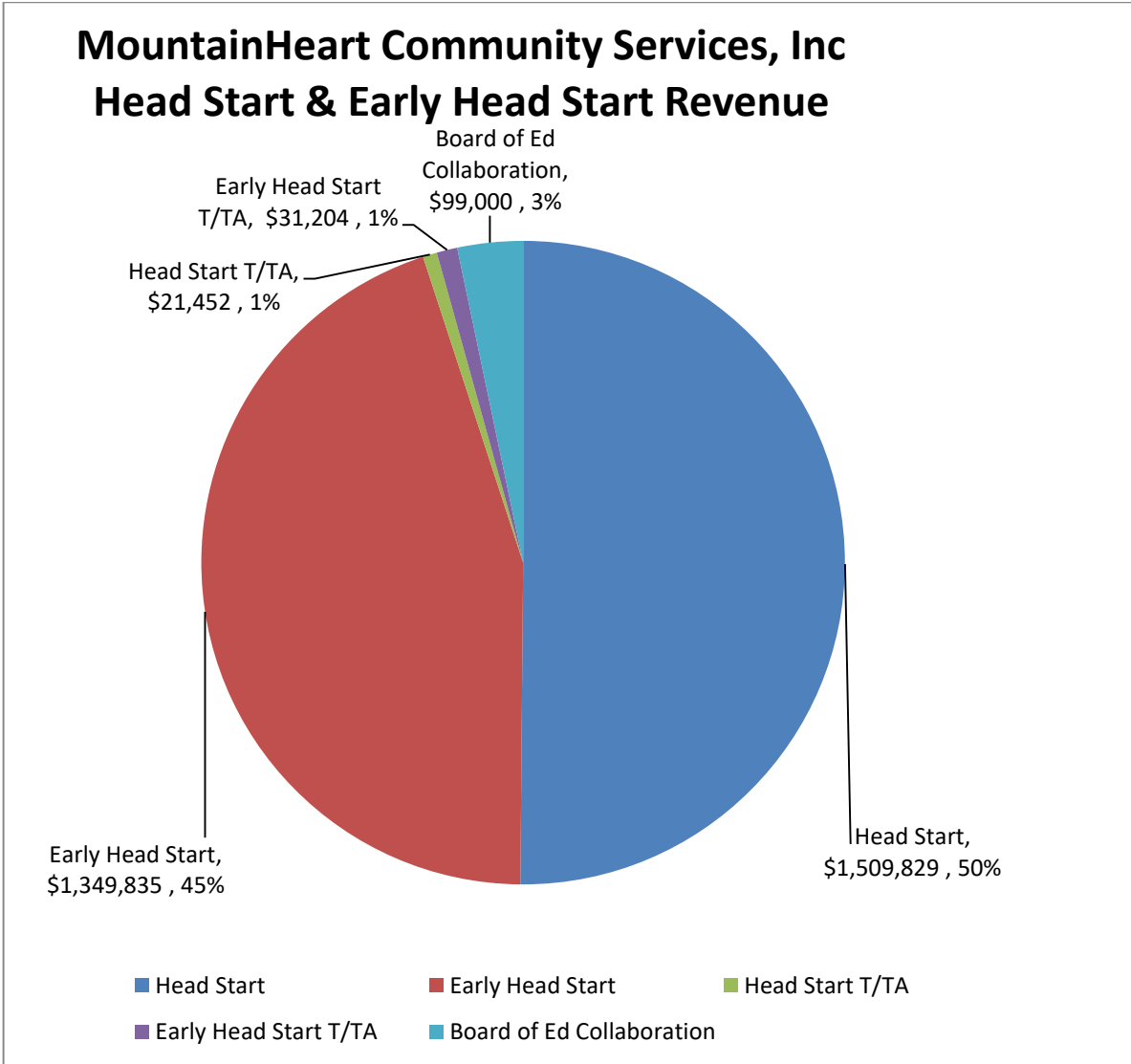
I approached the Department of Health and Human Resources to further gauge the feasibility of what I was thinking. I received information about the child care subsidy program which could assist with my child care costs. I contacted the local MountainHeart Child Care Resource and Referral office to inquire about eligibility. After a face to face interview and submission of documents needed to determine eligibility, I was approved for services.

I received exactly the kind of support I needed: assistance with child care costs and a loving child care program--of my choice--for my children to be while I was training in the classroom, studying, or getting hands-on training. Though the program in which I was enrolled was rigorous and full of various stressors, my mind was set at ease by the benefits of the child care subsidy program administered by MountainHeart. I knew my children were safe, warm, fed, and attended by child care professionals who are regulated/licensed through the WV DHHR.

After 27 months in my program, I graduated with a competitive degree and several job offers, none of which would have been possible without assistance from MountainHeart.

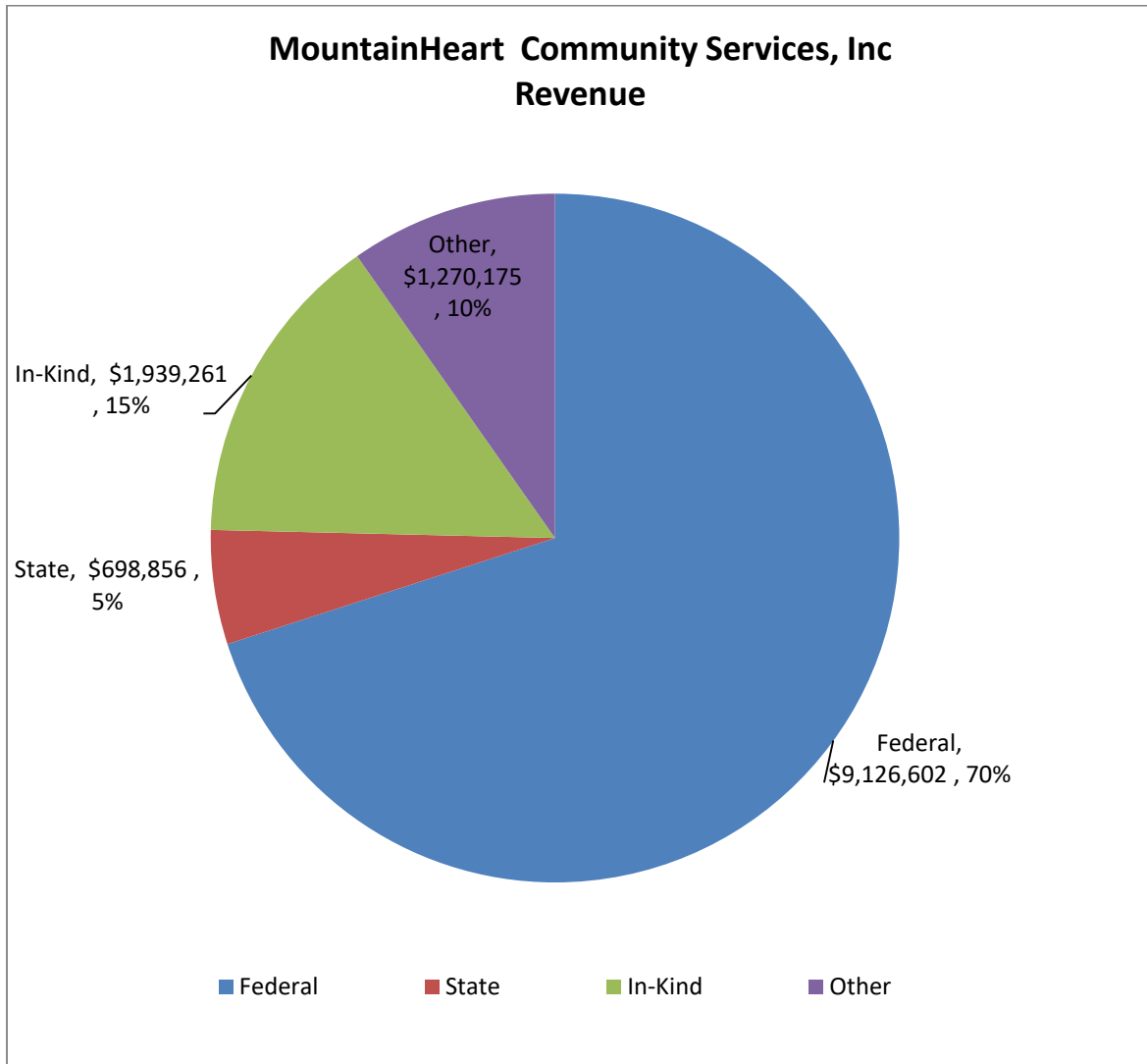
Sec. 6444(a) (2) of the Head Start Act of 2007 requires Head Start programs to produce annual reports that contain the following information

MountainHeart Community Services, Inc.
 Head Start/Early Head Start, BOE Collaboration 2018
 Revenue (unaudited)



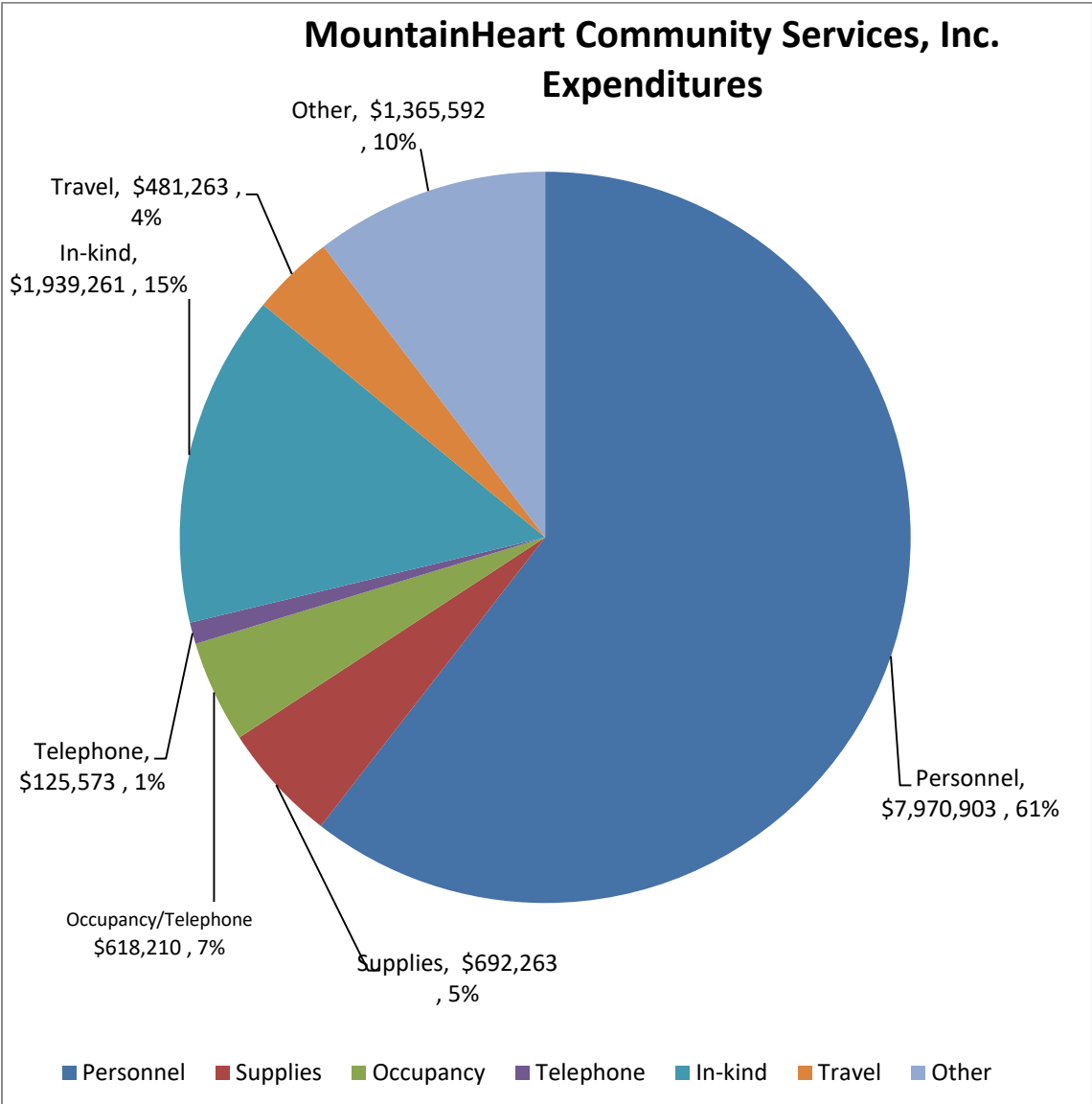
Head Start	\$	1,509,829	50%
Early Head Start	\$	1,349,835	45%
Head Start T/TA	\$	21,452	1%
Early Head Start T/TA	\$	31,204	1%
Board of Ed Collaboration	\$	99,000	3%
	\$	3,011,320	

MountainHeart Community Services, Inc.
 Agency Funds 2018 (unaudited)



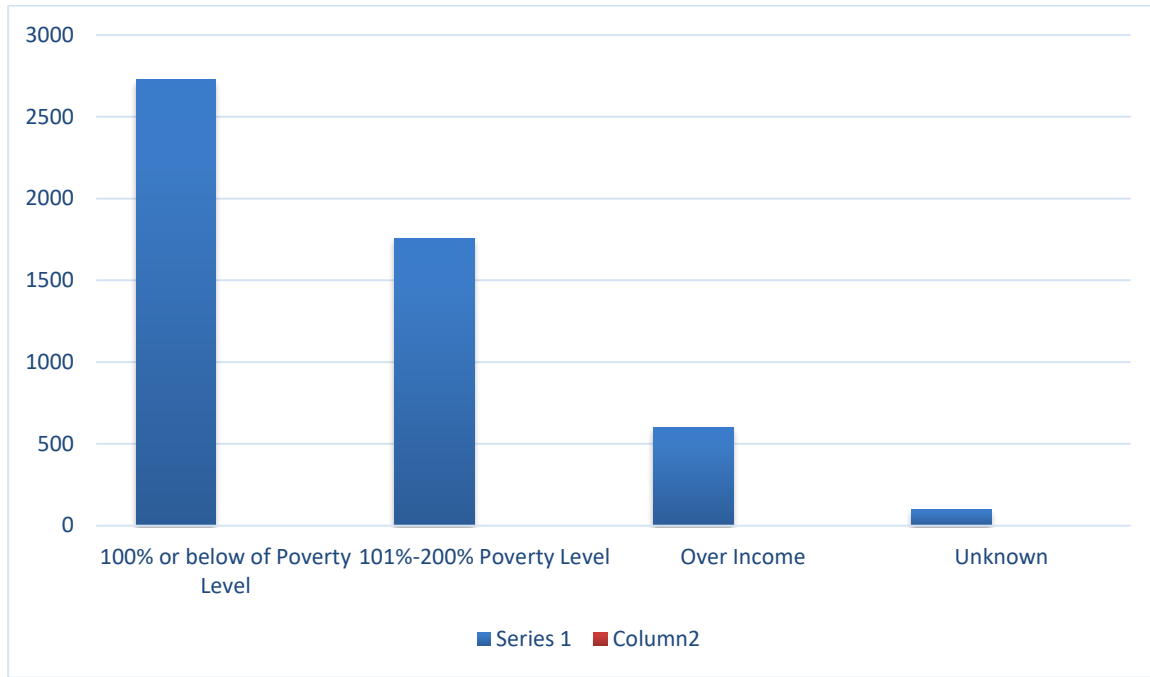
Federal	\$	9,126,602	70%
State	\$	698,856	5%
In-Kind	\$	1,939,261	15%
Other	\$	1,270,175	10%
	\$	13,034,894	

MountainHeart Community Services, Inc.
 Agency Expenditures 2018 (unaudited)

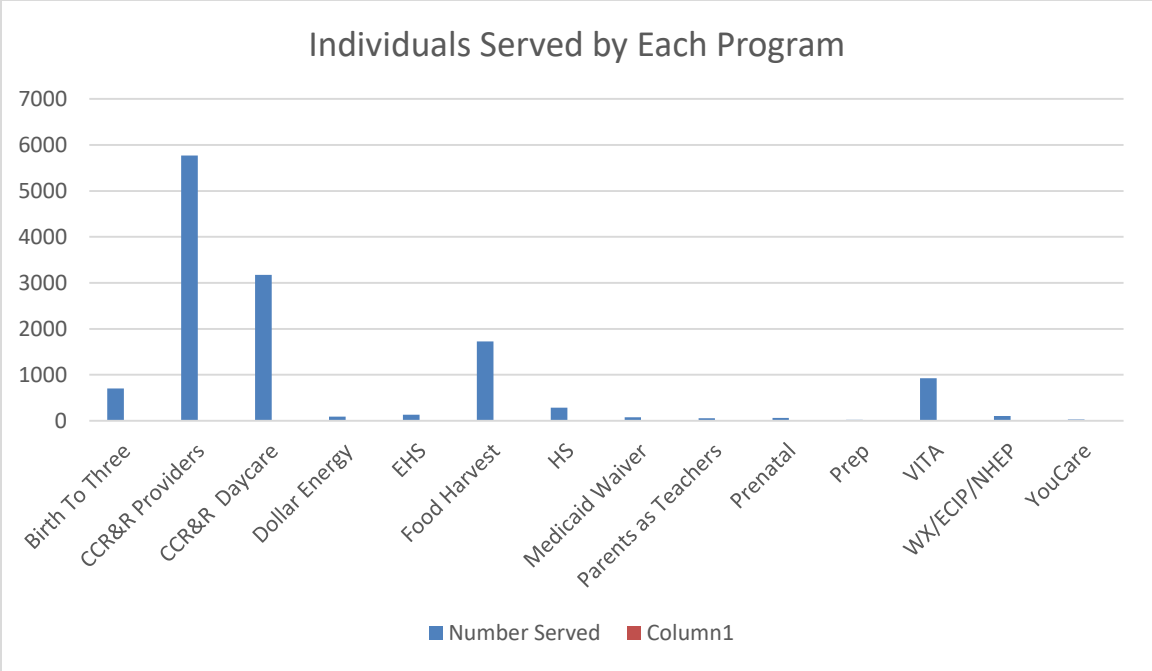


Personnel	\$	7,970,903	61%
Supplies	\$	692,263	5%
Occupancy	\$	594,955	5%
Telephone	\$	125,573	1%
In-kind	\$	1,939,261	15%
Travel	\$	481,263	4%
Other	\$	1,365,592	10%
	\$	13,169,810	

MountainHeart Served 5,186 families and 14, 939 Individuals.



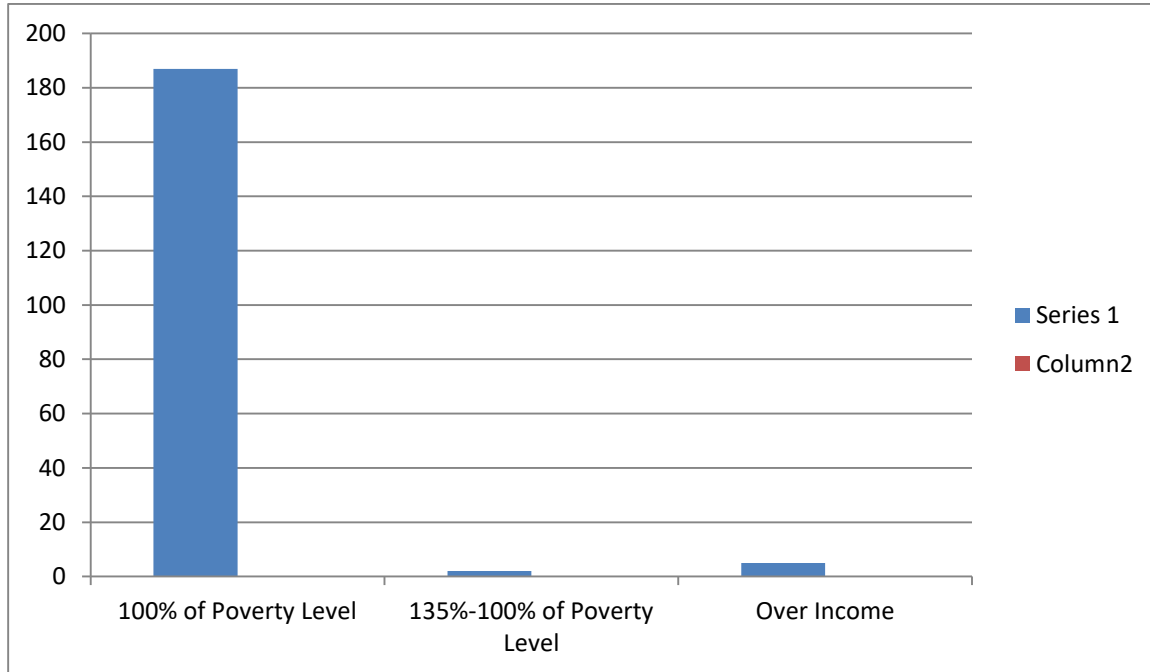
100% or below of Poverty Level	2727
101%-200% Poverty Level	1759
Over Income	602
Unknown	98



Individuals served by each program

Programs	Number Served
Birth To Three	705
CCR&R Providers	5772
CCR&R Daycare	3171
Dollar Energy	90
EHS	135
Food Harvest	1724
HS	283
Medicaid Waiver	75
Parents as Teachers	53
Prenatal	61
Prep	25
VITA	926
WX/ECIP/NHEP	104
YouCare	27

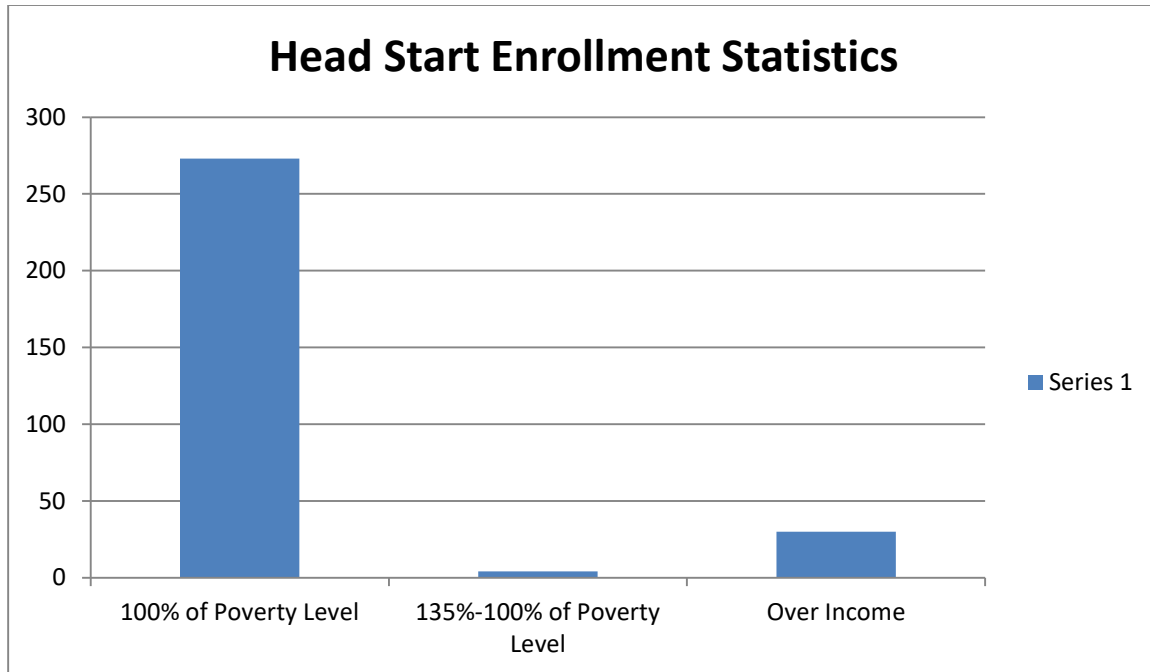
The total number of children and families served, the average monthly enrollment (as a percentage of funded enrollment): and the percentage of eligible children served.



191 children were served during 2018 by the Early Head Start Program. 100% enrollment was achieved throughout 2018. The above chart indicates the status children were approved under: 187 children served were approved below 100% of the Federal Poverty Guidelines, 2 children served was approved between 135-100% of the Federal Poverty Guidelines, and 5 children served was approved over the Federal Poverty Guidelines.

97% of the children served through the Early Head Start Program received a medical exam.

96% of the children served through the Early Head Start Program received a professional dental exam.



265 children were served during 2018 by the Head Start Program. 100% enrollment was achieved throughout 2017. The above chart indicates the status children were approved under: 264 children served were approved below 100% of the Federal Poverty Guidelines, 5 children served were approved between 135-100% of the Federal Poverty Guidelines and 25 children served were approved over the Federal Poverty Guidelines.

The percentage of enrolled children that received medical and dental exams.

97% of the children served through Head Start Program received a medical exam.

97% of the children served through Head Start Program received a dental exam.

Information about parent involvement activities.

Head Start/Early Head Start believes that the parent/guardian is the most important person in a child's life. Head Start/Early Head Start provides opportunities for parents that will build leadership skills that will last a lifetime. Children and parents both receive benefits from the Head Start/Early Head Start program. Parents and family members are encouraged to get involved in their child's development during home visits, training, monthly parent meetings, and policy council. Head Start/Early Head Start's goal is to provide parents/guardians and family members opportunities to understand and appreciate the needs of young children and ways to meet those needs.

Head Start/Early Head Start is continuously searching for and discovering new and exciting ways of involving the whole family into our Head Start/Early Head Start program. Head Start/Early Head Start provides many parent involvement activities. All parents/guardians are encouraged to be involved with Head Start/Early Head Start. Fortunately, there are different levels of involvement from which

parents/guardians can choose. The simplest level of involvement is through home visits and home activities with your children. The next level of parent/guardian involvement is serving on Policy council, attending advisory committee's meetings and being involved with making decisions that will affect the entire program.

The agency's efforts to prepare children for kindergarten.

Domain: ***Physical Development & Health***

Domain Elements: Physical Health Status, Health Knowledge & Practice

Program Goal: Families will gain knowledge about the importance of daily activity and making healthy food choices.

EHS Goal: All infants and toddlers will meet their gross motor developmental milestones appropriately regarding traveling, balancing and manipulative skills.

Domain: Perceptual, Motor, and Physical Development

Sub-Domain: Gross Motor Skills

IT-PMP 3 – Child demonstrates effective and efficient use of large muscles for movement and position.

Head Start Goal: All children will increase their daily activity level.

Domain: Perceptual, Motor, and Physical Development

Sub-Domain: Gross Motor Skills

P-PMP 1 – Child demonstrates control, strength, and coordination of large muscles.

Program Strategies: Provide families with information/hand-outs on "I'm Moving I'm Learning" and My Plate during monthly parent meetings, socialization, and home visits.

Provide children with IMIL activities daily, reflected on lesson plans. Provide weekly lessons on nutrition and discuss daily making healthy food choices.

Provide each Early Head Start family with the Zero to Three booklet, "The Power of Movement in Your Child's First Three

Years on the Move”. Review information during monthly parent meetings and home visits.

Provide copies of the CACFP newsletter “Nutrition Nuggets” to all families during monthly parent meetings and home visits.

Family Outcome: Family Well-Being, Families as Lifelong Educators, Positive Parent-Child Relationships

Domain: ***Social & Emotional Development***

Domain Elements: Social Relationships, Self-Concepts & Self Efficacy

Program Goal: Program will establish meaningful, quality relationships with Head Start families.

EHS Goal: All one and two-year-old EHS children will learn to take care of their own needs as is developmentally appropriate.

Domain: Social and Emotional Development

Sub-Domain: Sense of Identity and Belonging

IT-SE 12 – Child shows confidence in own abilities through relationships with others.

Head Start Goal: All children will establish and sustain positive relationships with adults.

Domain: Social and Emotional Development

Sub-Domain: Relationships with Adults

P-SE 1 – Child engages in and maintains positive relationships and interactions with adults.

Program Strategies: Become familiar with the individual needs of families and track them using the Scaled Family Assessment Tool.

Provide families with information about social emotional development of children through parent meetings, mental health consultations and educational handouts to all families. Teachers will provide weekly social/emotional lessons to all children.

Assure that all teachers are consistently providing high quality care and education using the CLASS observation, ITERS, ECERS, meal observations, family needs assessment and curriculum observations as required by area service plans.

Provide an environment of acceptance and respect for all teachers, staff and families.

Family Outcome:

Family Connections to Peers and Community

Positive Parent-Child Relationships

Domain:

Cognitive & General Knowledge

Domain Elements:

Mathematics Knowledge & Skills

Program Goal:

All children will meet their developmental milestones in math concepts.

EHS Goal:

All one to three-year-old EHS children will be provided a solid foundation in math concepts such as counting, quantifying, spatial relationships, shapes, measuring and patterns.

Domain: Cognition

Sub-Domain: Emergent Mathematical Thinking

IT-C 8 – Child develops sense of number and quantity.

Head Start Goal:

All children will develop and use number concepts and operations.

Domain: Mathematics Development

Sub-Domain: Operations and Algebraic Thinking

P-Math 6 – Child understands addition as adding to and understands subtraction as taking away from.

All children will demonstrate knowledge of patterns.

P-Math 7 – Child understands simple patterns.

Program Strategies:

Provide information and trainings at parent meetings on budgeting and money management. Provide educational

handouts to families on early learning activities that can be done with children throughout their daily routines that enhance mathematical concepts.

Assure that all teachers are providing a high quality foundation for math concept development throughout daily routines and activities by using classroom observations, CLASS, ITERS, ECERS, and meal observations.

Family Outcome:

Family Well-being

Families as Learners

Domain:

Language & Literacy

Domain Elements:

Language Development

Program Goal:

All children will meet their developmental milestones in language development.

EHS Goal:

All one and two-year-old EHs children will use an expanding expressive vocabulary, speak clearly, and engage in conversation using social rules of language as is developmentally appropriate.

Domain: Language and Communication

Sub-Domain: Communication and Speaking

IT-LC 5 – Child uses increasingly complex language in conversation with others.

Head Start Goal:

All children will use language to express thoughts and needs.

(All 3 year olds will use an expanding expressive vocabulary-All 4 year olds will be able to tell about another time or place)

Domain: Language and Communication

Sub-Domain: Communicating and Speaking

P-LC 5 – Child expresses self in increasingly long, detailed and sophisticated ways.

Program Strategies: Assure that all teachers are providing a high quality foundation for language development by completing CLASS, ITERS, ECERS, classroom observation, aggregating checkpoints, and tracking developmental screenings.

Provide information at parent meetings, education advisory, home visits and through educational handouts that stress the importance of parent child interaction as it is related to a child's speech and language development. Provide prenatal clients with training that stress the importance of babies being exposed to a rich language environment.

Provide children with a well-defined library area that promotes language development. Provide daily opportunities for children to create and dictate their own stories.

Family Outcome: Families as Lifelong Educators

Domain: ***Approaches to Learning***

Domain Elements: Reasoning & Problem Solving

Program Goal: For children to develop and use their problem-solving abilities across every aspect of the curriculum and in all their daily interactions.

EHS Goal: All children will be given opportunities to play and explore freely in their environment to encourage independent problem solving.

Domain: Approaches to Learning

Sub-Domain: Cognitive Self-Regulation

IT-ATL 5 – Child demonstrates the ability to be flexible in actions and behavior.

Head Start Goal: All children will develop the ability to find more than one solution to a question, task, or problem.

Domain: Approaches to Learning

Sub-Domain: Cognitive Self-Regulation

P-ATL 9 – Child demonstrates flexibility in thinking and behavior.

Program Strategies:

Assure that all staff is providing an environment that helps children verbalize their reasoning, thinking out loud about how to solve a problem or answer a question. Staff will encourage children to discuss a variety of solutions to problems or questions throughout daily activities. Staff will self-talk during activities to model that there are more than one way to complete task or solve problems.

Provide children with an environment that promotes problem solving through social experiences, reading aloud, experimenting with science or math activities.

Provide information to families/parents at parent meetings, education advisory, home visits and parent conferences about the importance of children developing reasoning and problem solving skills. Encourage parents to ask children “What happens next”, “What will happen”, and “What could we do”, “What else could we do”.

Family Outcome: Family as Lifelong Educators

Positive Parent-Child Relationships