Venice Family Clinic

Children First Early Head Start

Annual Report 2021

Venice Family Clinic
Children First Early Head Start
604 Rose Avenue
Venice, CA 90291
(310) 664-7534
http://www.venicefamilyclinic.org

Welcome!

First time I learned about the program was because my brother-in-law had enrolled his children in the program and their home visitor suggested I should enroll my daughter in the program. My daughter transitioned out of the program three years ago, we enrolled my youngest one when he was born.

One of the things I have learned from the program is that there are many services available in the community. My home visitor had linked me to mental health services, parenting classes; my home visitor had coached me to be a better parent.

Another thing that I really like about the program is that it is linked to Venice Family Clinic. Because I stay connected to my home visitor, I am aware of my child's development and stay current about my child's appointment with the pediatrician. The program has a big role in my child's development. My home visitor stays in communication with my child's pediatrician and reminds me about appointments. This is my second child, but it is difficult to stay current with all the appointments. It is very helpful to have those reminders.

Every time I have an opportunity, I tell my friends and family that they should enroll in the program because the services are very useful for the whole family.

- ***Carina Curiel***

Early Head Start Parent

An Exciting and Rewarding 2021

Despite the numerous challenges related to COVID-19, Early Head Start remained dedicated to its mission of promoting the health, safety, and well-being of young children and their families. Whether virtually or in-person, our staff strived to deliver medical, social, educational, and developmental services throughout the year. Among these valuable resources were vaccine clinics, remote music classes for speech language development, and food distribution during the holiday season.

Visit one of our locations:

Simms Mann Health & Wellness Center
2509 Pico Blvd.
Santa Monica, CA 90405
Phone: (310) 664-7536
Fax: (310) 664-7589

Lou Colen Children's & Wellness Center
Braddock Square Shopping Center
4700 Inglewood Boulevard, #101
Los Angeles, CA 90230
Phone: (310) 392-8636

Prairie Place
13018 Prairie Ave.
Inglewood, CA 90303
Phone: (310) 664-7536
Fax: (310) 664-7589

Hawlawn
4754 West 120th Street
Hawthorne, CA 90250
Phone: (310) 664-7536
Fax: (310) 664-7589

Crenshaw
11161 Crenshaw Blvd.
Inglewood, CA 90303

***Homelight**

Connect with us online at:

www.venicefamilyclinic.org

www.facebook.com/cfehs.vfc/

TABLE OF CONTENTS

HISTORY

Head Start began as an eight-week summer program in 1965. The project was funded by the Federal Government to provide services to preschool aged children ages 3 - 5. Head Start was designed to help break the poverty cycle by providing comprehensive health, educational, nutritional, social, and other services to economically disadvantaged children and their families. Since then, Head Start has served more than 15 million children and families.

In 1994, the Early Head Start program was created by the U.S. Congress as an extension of the Head Start Act. The Early Head Start program serves pregnant women and children up to age three. The goals of Early Head Start focus on the healthy cognitive, physical, social and emotional development of infants and toddlers. Research on brain development has demonstrated that, to thrive, children from birth to age three need a variety of positive learning experiences provided in a secure and loving environment. In recognition that parents are the primary educators of their children, Early Head Start programs are designed to work with families to ensure that the developmental needs of each child are met. Since 1994, Early Head Start has grown nationwide to over 600 community-based programs serving over 50,000 children.

Mission Statement

The mission of Children First Early Head Start is to optimize the quality of life for infants, toddlers, and pregnant women by enriching relationships among families, communities, and staff through child development education and parent empowerment. We promote a continuum of care including comprehensive health services, social services, and community referrals.

PHILOSOPHY

There are two key elements to the Early Head Start philosophy. First, every child can benefit from a comprehensive program to foster development. And second, the child's entire family, as well as the community, must be involved in the program for it to be a success. Children First Early Head Start is designed to meet the special strengths and needs of each child and family.

The program provides the following comprehensive services:

- Child Development and Early Childhood Education
- Parent education, advocacy and involvement
- Child health, safety and wellness
- Nutrition and dental services
- Networking families with community and social services and resources
- Disabilities, wellness, and mental health services available

Program Goals

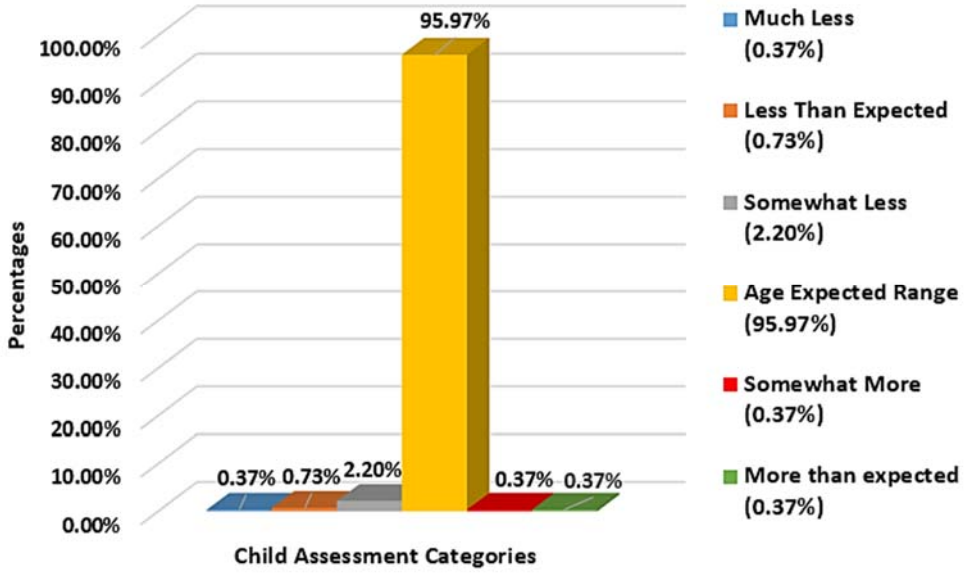
Children First Early Head Start believes the long-term goal of the program is healthy children and families, strong parent-child relationships, resourceful/self-sufficient families, and supportive communities.

To be eligible for the Children First Early Head Start program, families must live in our service area comprised of various cities on the west side of Los Angeles, including Venice, Santa Monica, Culver City, Mar Vista, the Cadillac/Robertson area, Palms, and parts of Inglewood.

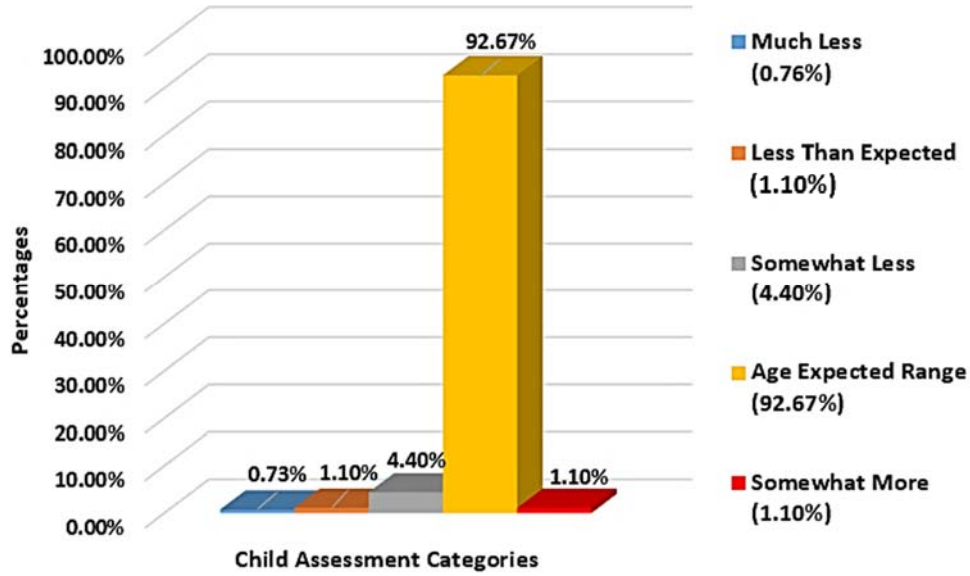
SCHOOL READINESS

During 2021, school readiness data was collected three times during the year to track progress for individual children and the program. Individual reports were shared with families and results were included in the newsletter. Data collection #3 for 2021 is displayed below. Results are depicted as percentages. ***0.37% = 1 child**

Social and Emotional Development: Infants and Toddlers will develop self-esteem through positive relationships with those around them.



Language and Literacy Skills: Infants and Toddlers will increase their language skills through early literacy learning activities.



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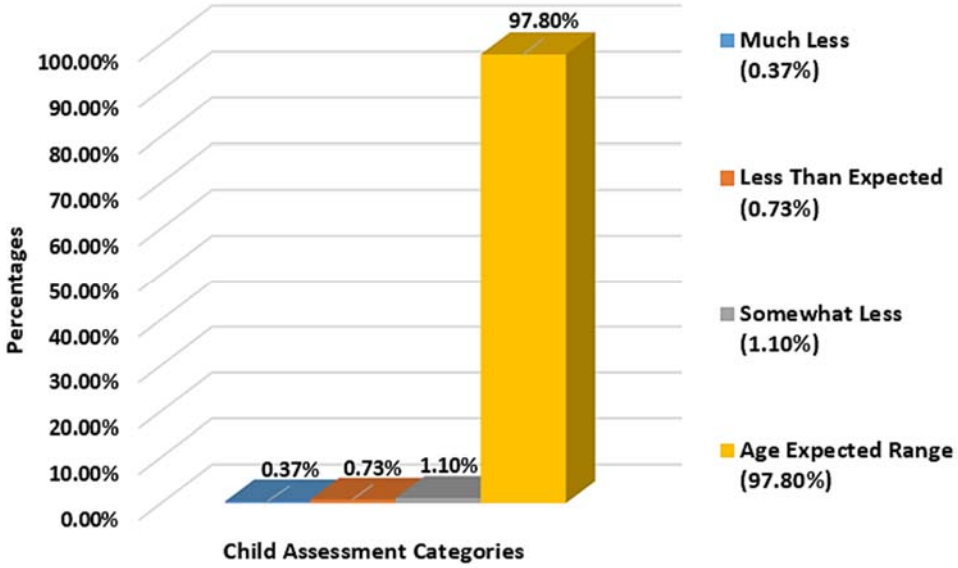
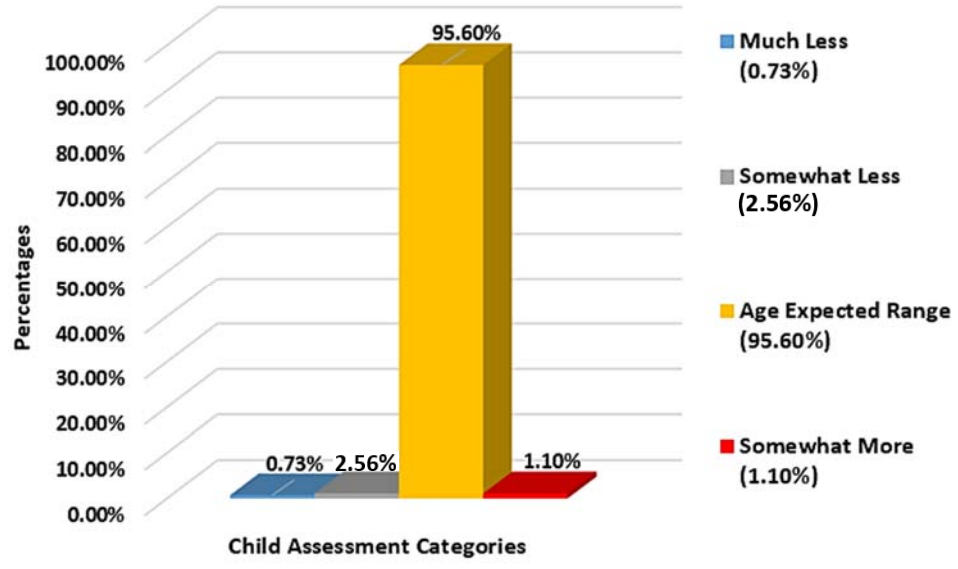
Approaches To Learning: Infants and Toddlers will learn exploring their surroundings through repetition and experimenting.



Cognitive and General Knowledge: Infants and Toddlers will learn to be independent and responsible in the way they demonstrate their experiences.



SCHOOL READINESS

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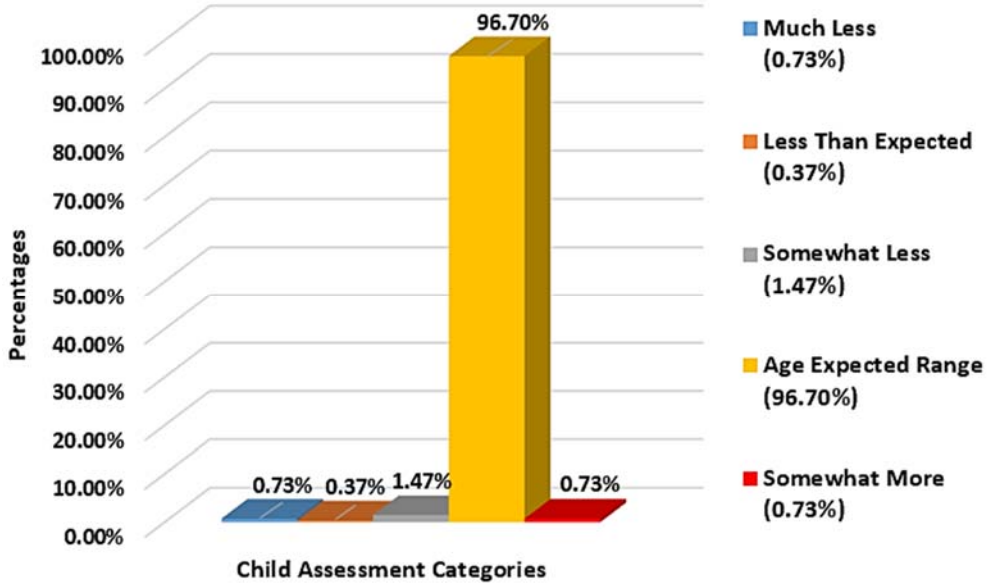
Physical Development and Health: Infants and Toddlers will increase their level of physical activity through home and program activities.



I learned about Early Head Start when I visited the pediatrician at VFC's Irma Colen Health Center in Mar Vista. My baby had an appointment and her pediatrician connected me with a rep from the program. The recruiter told me that the program offers many activities and services; she said that I should enroll and take advantage of those services. I love the opportunities that the program offers, such as parent groups, nutrition classes, health services, and other activities. I love the information provided during workshops such as financial literacy, child development, and the services they offer for my family like Covid-19 shots and regular check-ups for my child.

- ***Martha Miller***

Early Head Start Parent

SCHOOL READINESS

DRDP Tech (Family Child Care)

Group Summary by Percent for:

Winter 2020-2021 / Spring 2021 / Fall 2021

DRDP (2015) Infant Toddler

Winter 2020-21	Spring 2021	Fall 2021	Unable to
Total Children: **45**	Total Children: **48**	Total Children: **36**	Rate: **1**

(ALT-REG) Approaches to Learning Self-Regulation	Responding Earlier	Responding Later	Exploring Earlier	Exploring Middle	Exploring Later	Building Earlier
	5% / 5% / 0%	2% / 7% / 6%	1% / 11% / 9%	0% / 0% / 0%	27% / 33% / 43%	52% / 41% / 43%

(SED) Social and Emotional Development	Responding Earlier	Responding Later	Exploring Earlier	Exploring Middle	Exploring Later	Building Earlier
	5% / 6% / 0%	2% / 9% / 3%	7% / 13% / 8%	0% / 0% / 0%	39% / 34% / 36%	48% / 38% / 53%

(LLD) Language and Literacy Development	Responding Earlier	Responding Later	Exploring Earlier	Exploring Middle	Exploring Later	Building Earlier
	7% / 9% / 0%	0% / 9% / 3%	7% / 6% / 8%	11% / 13% / 14%	27% / 26% / 28%	48% / 38% / 47%

(COG) Cognition, Including Math and Science	Responding Earlier	Responding Later	Exploring Earlier	Exploring Middle	Exploring Later	Building Earlier
	5% / 6% / 0%	2% / 11% / 6%	9% / 13% / 11%	0% / 0% / 0%	55% / 43% / 44%	30% / 28% / 39%

(PD-HLTH) Physical Development - Health	Responding Earlier	Responding Later	Exploring Earlier	Exploring Middle	Exploring Later	Building Earlier
	0% / 2% / 0%	5% / 11% / 0%	2% / 4% / 6%	2% / 4% / 6%	41% / 32% / 6%	50% / 47% / 53%

INDEPENDENT AUDITOR'S REPORT

Green Hasson Janks

To the Board of Directors
Venice Family Clinic

Report on the Consolidated Financial Statements

We have audited the accompanying consolidated financial statements of Venice Family Clinic and affiliate (collectively the "Clinic"), which comprise the consolidated statement of financial position as of June 30, 2021, and the related consolidated statements of activities, functional expenses, and cash flows for the year then ended and the related notes to the consolidated financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these consolidated financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation and maintenance of internal control relevant to the preparation and fair presentation of consolidated financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these consolidated financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the consolidated financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the consolidated financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the consolidated financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the consolidated financial statements in order to design audit procedures that are appropriate in the circumstance, but not for the purpose of expressing an opinion on the effectives of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the consolidated financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

INDEPENDENT AUDITOR'S REPORT

Green Hasson Janks

Opinion

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the consolidated financial position of the of the Clinic as of June 30, 2021, and the changes in their consolidated net assets and their consolidated cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Report on Summarized Comparative Information

We have previously audited the Clinic's 2020 consolidated financial statements, and we expressed an unmodified audit opinion on those audited consolidated financial statements in our report dated January 13, 2020. In our opinion, the summarized comparative consolidated information presented herein as of and for the year ended June 30, 2020, is consistent, in all material respects, with the audited consolidated financial statements from which it has been derived, except as outlined in Note 16 to these consolidated financial statements.

Other Matters - Supplementary Schedules

Our audit was conducted for the purpose of forming an opinion on the consolidated financial statements as a whole. The accompanying consolidating statements of financial position and activities, consolidated Schedule of Expenditures of Federal and Nonfederal Awards, as required by the audit requirements of Title 2 U.S. Code of Federal Regulations (CFR) Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance) are presented for purposes of additional analysis and are not a required part of the consolidated financial statements. The child development program supplementary information is presented for purposes of additional analysis in conformity with the *CDE Audit Guide* issued by the California Department of Education and is not a required part of the basic consolidated financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the consolidated financial statements. The information has been subjected to the auditing procedures applied in the audit of the consolidated financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the consolidated financial statements or to the consolidated financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the supplementary schedules are fairly stated in all material respects in relation to the consolidated financial statements as a whole.

INDEPENDENT AUDITOR'S REPORT

Green Hasson Janks

Other Reporting Required by *Government Auditing Standards*

In accordance with *Government Auditing Standards,* we have also issued our report dated December 11, 2021 on our consideration of the Clinic's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Clinic's internal control over financial reporting and compliance.

Green Hasson & Janks LLP

December 11, 2021
Los Angeles, California

ANNUAL FINANCIAL AUDIT

During the audit of fiscal year ended June 30, 2021, the auditors identified a weakness in the internal controls of the pharmacy billing processes that resulted in excess billing charges to Medi-Cal. Venice Family Clinic took immediate actions to rectify the overpayments and created a plan to reduce the risk of similar instances occurring in the future. This plan, outlined on page 53 of the audit, is being closely monitored by VFC's Audit Committee.

INDEPENDENT AUDITOR'S REPORT

Green Hasson Janks

REPORT ON COMPLIANCE FOR EACH MAJOR FEDERAL PROGRAM AND REPORT ON INTERNAL CONTROL OVER COMPLIANCE IN ACCORDANCE WITH THE UNIFORM GUIDANCE

INDEPENDENT AUDITOR'S REPORT

To the Board of Directors
Venice Family Clinic

Report on Compliance for Each Major Federal Program

We have audited Venice Family Clinic and affiliate's (collectively the Clinic's) compliance with the types of compliance requirements described in the 0MB Compliance Supplement that could have a direct and material effect on each of the Clinic's major federal programs for the year ended June 30, 2021. The Clinic's major federal programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

Management's Responsibility

Management is responsible for compliance with federal statutes, regulations, and the terms and conditions of its federal awards applicable to its federal programs.

Auditor's Responsibility

Our responsibility is to express an opinion on compliance for each of the Clinic's major federal programs based on our audit of the types of compliance requirements referred to above. We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and the audit requirements of Title 2 U.S. Code of Federal Regulations (CFR) Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Those standards and the Uniform Guidance require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about the Clinic's compliance with those requirements and performing such other procedures, as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our opinion on compliance for each major federal program. However, our audit does not provide a legal determination of the Clinic's compliance.

Opinion on Each Major Federal Program

In our opinion, the Clinic complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended June 30, 2021.

Report on Internal Control over Compliance

Management of the Clinic is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered the Clinic's internal control over compliance with the types of requirements that could have a direct and material effect on each major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for each major federal program and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an op inion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of the Clinic's internal control over compliance.

A *deficiency in internal control over compliance* exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct noncompliance with a type of compliance requirement of a federal program on a timely basis. A *material weakness in internal control* over compliance is a deficiency, or combination of deficiencies in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected on a timely basis. A *significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

INDEPENDENT AUDITOR'S REPORT

Green Hasson Janks

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies. We did not identify any deficiencies in internal control over compliance that we consider material weaknesses. However, material weaknesses may exist that have not been identified.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirement s of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

Green Hasson & Janks LLP

December 11, 2021
Los Angeles, California

A LETTER FROM THE DIRECTOR

Dear community members,

Venice Family Clinic is proud to share our 2021 accomplishments with you. We moved into year two of the pandemic. Our center and family child care homes remained open throughout the year to provide comprehensive services and care to our families. Our home based program reached 50% in-person visits in June and steadily climbed to full in-person services. Seventy-seven percent of our families are working or enrolled in school. We embraced the Head Start Forward campaign and kept moving forward with our masks on. We provided additional services such as online music classes, online exercise classes, numerous additional parent committee classes, food drives at our Hawlawn child care center, and four vaccine clinics at our Prairie location.

"We did excellent work in ensuring that our children received medical care. Eighty-four percent of our children were up-to-date on their well-child exams and ninety-eight percent were current for immunizations."

We were also busy pursuing facility projects. We worked with the City of Inglewood to get the necessary permits to start construction for the Homelight center. We looked tirelessly for a new facility in the Inglewood community and found a perfect home on Crenshaw Blvd. We successfully closed escrow and began to bid out the design for six classrooms and an adult education classroom.

We did excellent work in ensuring that our children received medical care. Eighty-four percent of our children were up-to-date on their well-child exams and ninety-eight percent were current for immunizations.

Attendance fluctuated this year as COVID rates recurrently surged. Despite the pandemic, we persisted in reaching out, working on school readiness goals, and finding new ways to safely engage with our families.

We continued our important work toward the following program goals:

1. Serving Homeless Infants and Toddlers and Families - we served 44 Homeless families.
2. Supporting Parents to Obtain Education and Job Training - 34% of our parents received support in this area with referrals and parent trainings.
3. Providing Child Care to vulnerable populations - we are in the process of building 2 center programs in Inglewood.

It has been a busy 2021 and we appreciate your support and involvement!

Stacey Scarborough, Children First Early Head Start Director
SScarborough@mednet.ucla.edu

BUDGET & EXPENDITURES

STATEMENT OF FUNCTIONAL EXPENSES FOR YEAR ENDED JUNE 30, 2021: ORIGINAL & EXPANSION GRANTS	
Salaries	**$3,525,961**
Employee Benefits	**$1,601,706**
Building – maintenance	**$107,184**
Building – other	**$33,060**
Building – rent	**$256,099**
Child Care	**$121,589**
Equipment	**$13,266**
Technology Expenses	**$27,734**
Telephone	**$32,473**
Professional and contractual fees	**$259,394**
Postage, printing and subscriptions	**$30,767**
Office Supplies	**$183,293**
Travel, training and workshops	**$79,624**
Repairs and maintenance	**$14,302**
Insurance	**$37,588**
Licenses, fees and dues	**$6,236**
Transportation of patients/clients	**$509**
Participant supplies/activities/incentives	**$117,700**
Miscellaneous	**$8,854**
Total before depreciation and expenses	**$6,457,309**
Depreciation and Amortization	**$67,121**
Total functional expenses	**$6,524,430**

CALIFORNIA DEPARTMENT OF EDUCATION SCHEDULE OF EXPENDITURES FEDERAL & STATE AWARDS JUNE 30, 2021		
Program Title		**Contract Amount**
Child Development Services General Center Child Care	July 1st 2020 June 30th 2021	**$346,450**
	July 1st 2019 June 30th 2020	

EARLY HEAD START 2022 PROPOSED BUDGET: ORIGINAL & EXPANSION GRANTS	
Personnel	**$4,193,016**
Fringe	**$1,914,507**
Contractual	**$209,207**
Supplies	**$218,900**
Travel	**$30,000**
Construction	**$5,602,839**
Other Costs	**$386,821**
Direct	**$12,525,290**
Indirect Cost	**$304,875**
TTA	**$204,995**
Approved Budget	**$13,035,157**
Non Federal Share	**$1,812,527**

2021 IN-KIND DONATIONS - ORIGINAL GRANT	
January 1, 2021 – March 31, 2021	**$79,288.78**
April 1, 2021 – June 30, 2021	**$81,142.00**
July 1, 2021 – September 30, 2021	**$72,016.00**
October 1, 2021 – December 31, 2021	**$77,673.00**
Total Donations	**$310,119.78**

2021 IN-KIND DONATIONS – EXPANSION GRANT	
January 1, 2021 – March 31, 2021	**$2,789.00**
April 1, 2021 – June 30, 2021	**$1,760.00**
July 1, 2021 – September 30, 2021	**$1,655.00**
October 1, 2021 – December 31, 2021	**$4,485.00**
Total Donations	**$10,689.00**

HEALTH SERVICES

Physical Health

1. Number of children up-to-date at the end of enrollment:
   Original Grant: **225 (85%)** New Grant: **219 (82%)**
2. Children diagnosed with a chronic condition and referred for medical treatment:
   Original Grant: **27** New Grant: **32**
3. Of the children diagnosed number of children who received/are receiving medical treatment:
   Original Grant: **4** New Grant: **12**
4. Number of children who received treatment for the following conditions:

	Original Grant	New Grant		Original Grant	New Grant
▪ Autism	**2**	**2**	▪ Vision Problems	**7**	**12**
▪ Asthma	**4**	**4**	▪ High Lead	**7**	**6**
▪ Hearing Difficulties	**4**	**8**	▪ Diabetes	**0**	**0**

Preventive Dental Services/Dental Services for Pregnant Women

5. Number of children who received dental screenings and professional dental examinations:
   Original Grant: **182** New Grant: **219**

   Number of children with continuous, accessible dental care provided by a dentist:
   Original Grant: **203** New Grant: **175**

   Number of all children who are up-to-date on a schedule of age-appropriate preventive & primary oral health care according to your state's EPSDT schedule:
   Original Grant: **182** New Grant: **219**
6. Cumulative enrollment of pregnant women in Early Head Start: Original Grant: **25** New Grant: **13**

Disability Services

1. The total number of children referred for an evaluation to determine eligibility under the Individuals with Disabilities Education Act (IDEA) during the program year:
   Original Grant: **37** New Grant: **23**
2. Of the children that received an evaluation, the number that were diagnosed with a disability:
   Original Grant: **18** New Grant: **12**
3. Number of enrolled children who have an Individualized Family Service Plan (IFSP), at any time during the program year, indicating they were determined eligible by the Part C agency to receive early intervention services under the IDEA:
   Original Grant: **53** New Grant: **47**

   Of these, the number determined eligible for early intervention services prior to this program year:
   Original Grant: **33** New Grant: **27**

   Of these, the number determined eligible for early intervention services during this program year:
   Original Grant: **20** New Grant: **20**

EARLY HEAD START ENROLLMENT

FUNDED AND ACTUAL ENROLLMENT

Original Grant	Family Child Care	20
	Home Based	263
	Program Attendance	77%
New Grant	Center Based	32
	Home Based	262
	Program Attendance	79%

Funded Enrollment

Original Grant	January – December 2021	180
New Grant	June – May 2021	196

Actual Enrollment

Original Grant		288
New Grant		275

Eligible Population Served..... 2%

2021 Monthly Enrollment

Original Grant	January – December 2021	97%
New Grant	September – December 2021	88%

ELIGIBILITY

Number of children and pregnant women who were enrolled based on receipt of public assistance..... 39
Number of children and pregnant women enrolled based on income eligibility..... 345
Number of children and pregnant women who were enrolled although their families were over income..... 98
Number who were enrolled due to status as foster child..... 14
Number who were enrolled due to status as homeless..... 37

PREGNANT WOMEN SERVED

Total number of enrolled pregnant women..... 38

Enrollment by Ethnicity

Hispanic or Latino Origin..... 469
Non-Hispanic/Non-Latino Origin..... 94

Enrollment by Race

White..... 18
American Indian/Alaskan Native..... 22
Native Hawaiian/Pacific Islander..... 1
Biracial/Multi-racial..... 8
Asian..... 6
Black/African American 70

Primary Language

English..... 209
Spanish..... 317
African..... 2
East Asian Languages..... 5
Middle Eastern & South Asian..... 4
European & Slavic Languages..... 3
Native Central/ South America... 23
/Mexican

TRANSITION

Children First Early Head Start works to ensure a smooth transition between program options (Home Based and Family Child Care) at each stage of the child's development (crawling to cruising to walking, etc.), and ultimately to preschool. We also strive to create as seamless a transition to preschool as possible. The child's transition from CFEHS to a pre-school program begins no later than six months prior to the child's third birthday. This is a collaborative process between parents, staff, relevant agency members, and others who have cared for and nurtured the child.

On-going communication with Head Start and other preschool programs has been critical in connecting families with staff and receiving updates on service delivery (classroom, virtual, etc.). This year we have transitioned children to preschool programs that have provided in-person, remote and hybrid learning experiences. Some of this year's activities included:

- Parent participation in virtual and 1:1 preschool orientation sessions.

- Our research-based parenting curriculum, "Abriendo Puertas", offered 10-week sessions on the importance of preschool and parent advocacy. The session is titled "Let's Get Ready for School: Knowledge is Power".

- Reviewing a Transition Packet with family that is given at the beginning of their 6-month transition process. The packet includes ideas and tools to prepare the child and parent for preschool; a list of local preschool programs; information on quality preschools; importance of reading to young children; a list of fun activities that can be made with household materials; and a 211 flyer, which outlines their 24-hour resource services.

> *"I have had a good experience with Early Head Start and my son has learned a lot. I am very grateful to the program for having advanced his knowledge of the alphabet, numbers, colors, and many more things."*
>
> - ***Anayeli Lazaro***
> **Early Head Start Parent**

- Providing parents with two copies of their child's health and developmental assessment records; one for them to keep and one to pass on to the next educational setting.

- Home Visitors attending Transition Meetings with local school districts and/or our Part C partners (Regional Centers) whenever possible. These meetings assist in preparing the next educational setting to support the individual needs of the transitioning child.

PARENT INVOLVEMENT

PLAY GROUPS 2021

	Inglewood	Prairie Place	Well Baby Center
0 - 16 Months:	**7**	**7**	**8**
17 - 36 Months:	**7**	**7**	**8**
HV Play Groups:	**62**	**30**	**51**

2021 PARENT TRAININGS (VIA ZOOM VIDEO CONFERENCING)

	Grants Combined
• Newsletters	**Monthly**
• Financial Literacy: "How Money Works"	**2 Trainings**
• Early Childhood Oral Health: "Importance of Oral Hygiene"	**2 Trainings**
• Child Abuse & Neglect Prevention: "Keeping Kids Safe"	**2 Trainings**
• Advocacy 101	**1 Trainings** **1 Canceled**
• Substance Abuse: "The Effects on Children and Families"	**2 Training**
• First Aid & Safety Basics	**2 Trainings**
• Venice Skills Center: "Adult Education & Programming"	**2 Trainings**
• VFC California is Reopening After COVID-19 (Presenter: Despina Kayichian)	**1 Training**
• Housing: "Keeping Families Housed" (Presenter: Cherrise Payne)	**1 Training**
• Language Development (Presenter: Everyday Communication)	**2 Trainings**
• Domestic Violence: "How Our Relationships Affect Our Children"	**2 Trainings**
• Mental Health: "Understanding Mental Health"	**2 Trainings**
• Health Insurance: "Keep Health Insurance for Your Child and Family"	**1 Training**
• Immigration Workshop: "Knowing Your Rights"	**2 Trainings**
• Financial Literacy Series (Presenter: Monica Seda *Operation Hope*)	**3 Trainings**
• Nutrition with a focus on Healthy Snacks	**2 Trainings**
• Health & Nutrition for the Whole Family (Presenter: Luba Rosenblum)	**1 Training**
• Eat the My Plate Way for the Holidays (Presenter: VFC Health Education Dept.)	**1 Training**
• School Readiness (Presenter: Yolaina Urbina)	**2 Trainings**
• Rights of Children with IEP's (Presenter: Edith Madrid)	**1 Training**
• Abriendo Puertas/Opening Doors	**Trainings: 10 English 10 Spanish**

Early Head Start and COVID-19

YEAR 2