

Children First Early Head Start
Annual Report
2024



604 Rose Avenue
Venice, CA 90291

(310) 664-7534

<http://www.venicefamilyclinic.org>

Welcome

My name is Elvia Lopez and I am Joel Martinez Lopez's mother. I have been in the Early Head Start program for 4 years and feel blessed for all the support and help that has been given to me and my children.

The program has helped my children a lot in the areas of development, especially with language and communicating with others - including children their age. As a mother, I feel I still need to continue learning through the program on how to support my family. For example, how to problem solve with my children.

We are grateful because the program has helped us to better our relationships as siblings, parents and the family as a whole. Thank you Marissa for your patience and the support you have given us!

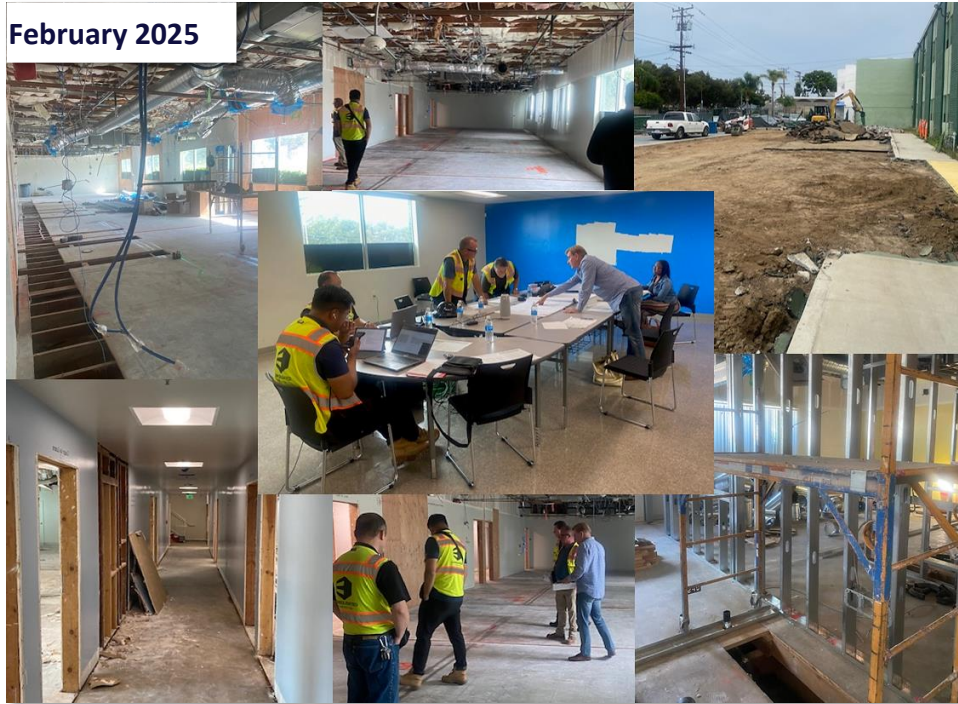


- Elvia Lopez
Early Head Start Parent

Exciting News for 2025!

Construction for our Crenshaw location is nearing completion and scheduled to open in 2026.

February 2025



August 2025



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



L.A. Care Community Resource Center
11173 West Pico Blvd.
Los Angeles, CA 90064
Phone: (310) 231-3854



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



Inglewood Crenshaw Children and Family Center
11161 Crenshaw Blvd.
Inglewood, CA 90303

***HomeLight: please direct inquires to our staff.**

Connect with us online at:

www.venicefamilyclinic.org



[The Power of Us](#)

[For Patients](#)

[Programs and Services](#)

[About the Clinic](#)

Venice Family Clinic's Children First Early Head Start is a comprehensive child development program for families with children from birth to 3-years-old and pregnant mothers.

Our goal is to promote the health, safety and well-being of young children and their families by

- strengthening the bond between parent and child
- helping parents learn about their child's needs at each stage of development
- providing access to free or affordable health care, including medical and dental care, nutrition education, immunizations, and more
- referring participants to community resources that can help them meet their basic needs, including assistance with housing, food, education, childcare and employment

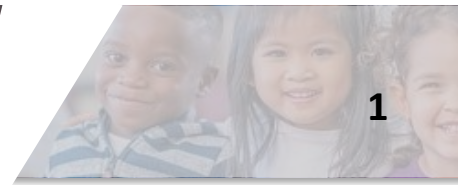


Children First Early Head Start is a federally funded program that currently serves 376 low-income families on the Westside of Los Angeles.

www.facebook.com/cfehs.vfc/



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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

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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



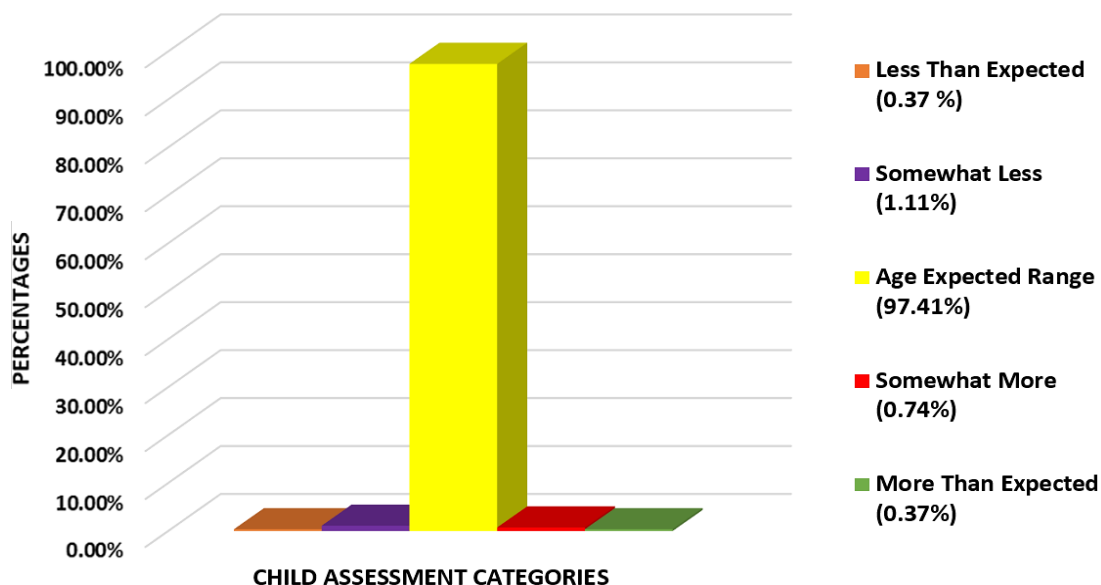
Children First Early Head Start believes the long-term goal of the program is healthy children and families, strong parent-child relationships, resourceful/self-sufficient families, and supportive communities.

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.

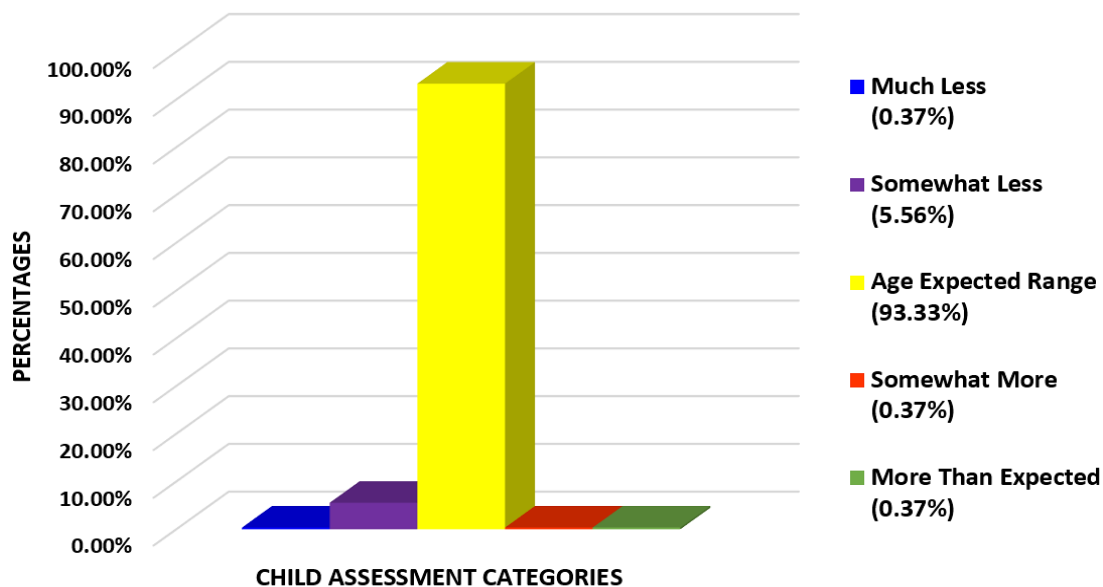
SCHOOL READINESS

During 2024, 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 2024 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 Communication: Infants and Toddlers will increase their language skills through early literacy learning activities.

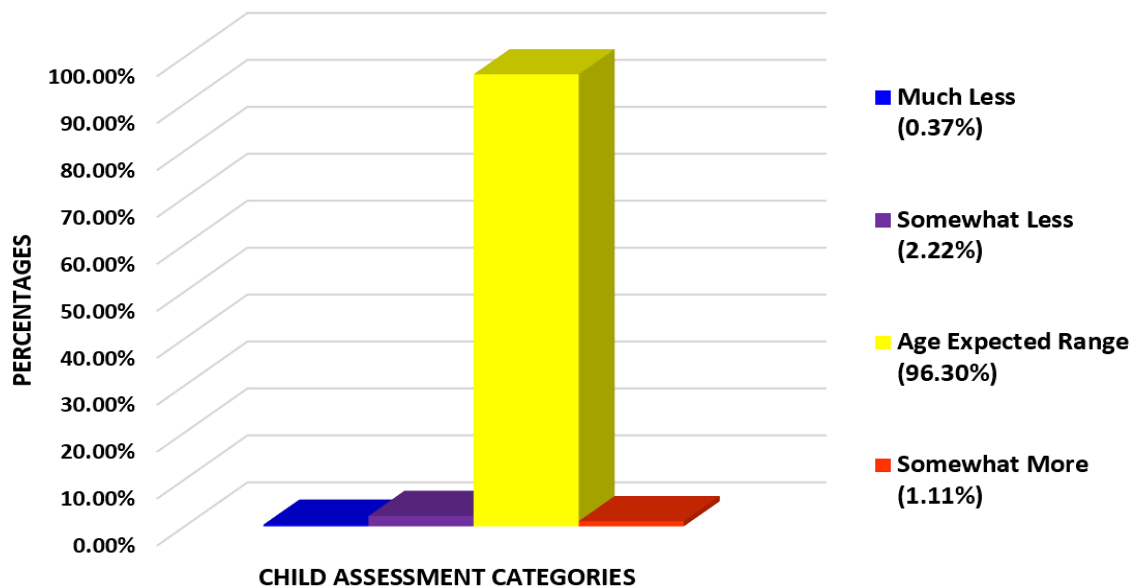


SCHOOL READINESS

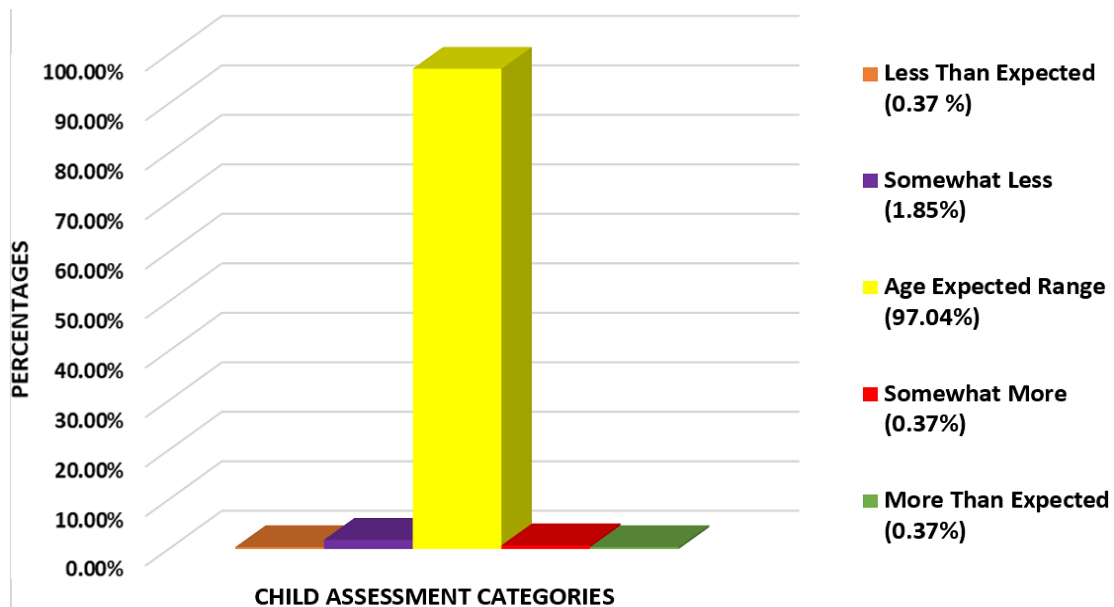
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Approaches To Learning: Infants and Toddlers will learn exploring their surroundings through repetition and experimenting.



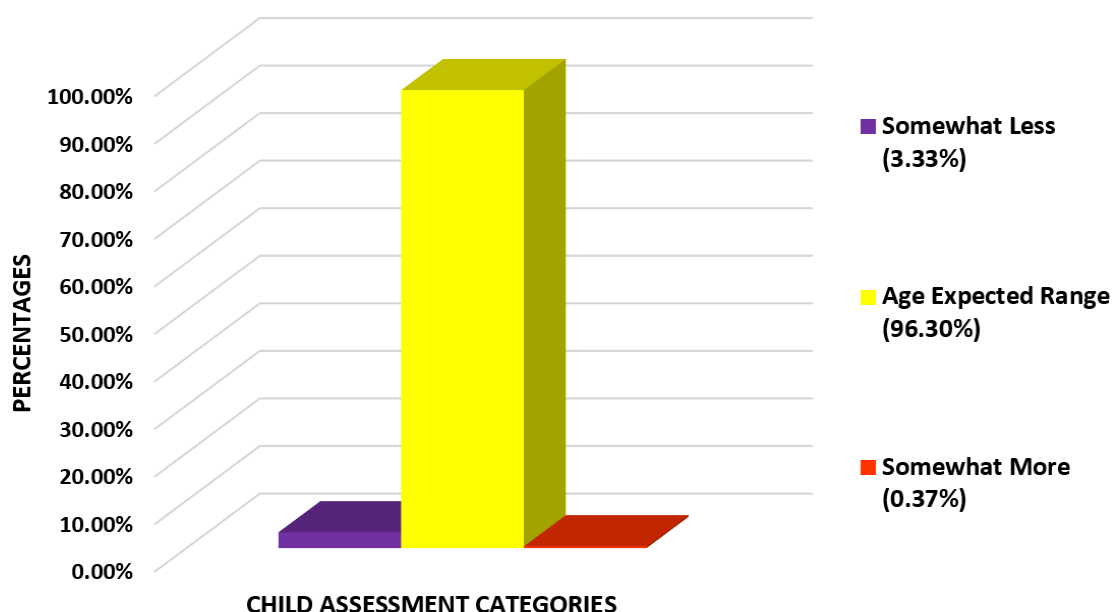
Cognition: Infants and Toddlers will learn to be independent and responsible in the way they demonstrate their experiences.



SCHOOL READINESS

During 2024, 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 2024 is displayed below. Results are depicted as percentages. ***0.37% = 1 child**

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

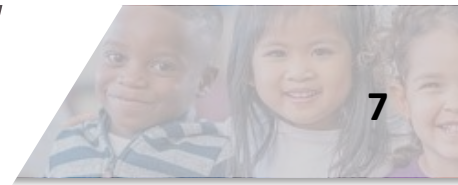


“As a first-time mom, I am still learning and am often unsure how to support my child’s development. But being part of this program since pregnancy has made a huge difference. I was referred by my doctor and, from the very beginning, I felt welcomed and at ease. The handouts and resources have helped me learn how to be my child’s first teacher. As my child is learning, I am too. The play groups have been amazing for my child’s social skills and the invitation to community events helped me feel less alone. This program has truly helped me grow my confidence as a first-time parent, and I am so thankful to be part of it.”

- Leslie Lopez
Early Head Start Parent

SCHOOL READINESS

DRDP Tech (Family Child Care)



Group Summary by Percent for:

Fall 2024 / **Winter 2024-25** / **Spring 2025**

DRDP (2015) Infant Toddler

Fall 2024

Total Children: **20**

Winter 2024-25

Total Children: **29**

Spring 2025

Total Children: **40**

Unable to

Rate: **0**

(ALT-REG) Approaches to Learning Self-Regulation	Responding Earlier	Responding Later	Exploring Earlier	Exploring Middle	Exploring Later	Building Earlier
	0% / 0% / 5%	0% / 4% / 5%	25% / 28% / 30%	N/A	40% / 49% / 30%	35% / 21% / 30%

(SED) Social and Emotional Development	Responding Earlier	Responding Later	Exploring Earlier	Exploring Middle	Exploring Later	Building Earlier
	0% / 0% / 5%	5% / 4% / 5%	15% / 32% / 28%	N/A	45% / 38% / 40%	35% / 28% / 23%

(LLD) Language and Literacy Development	Responding Earlier	Responding Later	Exploring Earlier	Exploring Middle	Exploring Later	Building Earlier
	0% / 0% / 3%	5% / 11% / 13%	15% / 25% / 20%	20% / 18% / 18%	30% / 25% / 28%	30% / 25% / 20%

(COG) Cognition, Including Math and Science	Responding Earlier	Responding Later	Exploring Earlier	Exploring Middle	Exploring Later	Building Earlier
	0% / 0% / 5%	5% / 11% / 8%	25% / 28% / 33%	N/A	45% / 49% / 35%	25% / 14% / 20%

(PD-HLTH) Physical Development - Health	Responding Earlier	Responding Later	Exploring Earlier	Exploring Middle	Exploring Later	Building Earlier
	0% / 0% / 5%	0% / 4% / 5%	0% / 7% / 3%	10% / 11% / 23%	55% / 42% / 35%	35% / 38% / 30%

INDEPENDENT AUDITOR'S REPORT

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Green Hasson Janks &

To the Board of Directors
Venice Family Clinic

Report on the Consolidated Financial Statements

Opinion

We have audited the consolidated financial statements of Venice Family Clinic and affiliate (collectively, the Clinic), which comprise the consolidated statement of financial position as of June 30, 2024, 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.

In our opinion, the accompanying consolidated financial statements present fairly, in all material respects, the consolidated financial position of the Clinic as of June 30, 2024, 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 (U.S. GAAP).

Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (GAAS) and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Consolidated Financial Statements* section of our report. We are required to be independent of the Clinic and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Consolidated Financial Statements

Management is responsible for the preparation and fair presentation of the consolidated financial statements in accordance with U.S. GAAP, and for 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.

In preparing the consolidated financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Clinic's ability to continue as a going concern for one year after the date that the consolidated financial statements are issued.

INDEPENDENT AUDITOR'S REPORT

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Green Hasson Janks & Co.

Auditor's Responsibilities for the Audit of the Consolidated Financial Statements

Our objectives are to obtain reasonable assurance about whether the consolidated financial statements are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one due to error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the consolidated financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the consolidated financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the consolidated financial statements.
- Obtain an understanding of internal control relevant to the audit to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Clinic's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the consolidated financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Clinic's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Report on Summarized Comparative Information

We have previously audited the Clinic's 2023 consolidated financial statements, and we expressed an unmodified audit opinion on those audited consolidated financial statements in our report dated November 28, 2023. In our opinion, the summarized comparative information presented herein as of and for the year ended June 30, 2023, is consistent, in all material respects, with the audited consolidated financial statements from which it has been derived.

INDEPENDENT AUDITOR'S REPORT

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Green Hasson Janks &

Supplementary Information

Our audit was conducted for the purpose of forming an opinion on the consolidated financial statements as a whole. The accompanying supplementary information, including the 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) and the Supplementary Information - Child Development Program as required by the Audit Guide issued by the California Department of Education is presented for purposes of additional analysis and is not a required part of the consolidated financial statements. In addition, the consolidating statement of financial position as of June 30, 2023 and the consolidating statement of activities for the year then ended are not a required part of the basic consolidated financial statements. The supplementary information referred to above 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 GAAS. In our opinion, the information is fairly stated, in all material respects, in relation to the consolidated financial statements as a whole.

Other Reporting Required by *Government Auditing Standards*

In accordance with *Government Auditing Standards*, we have also issued our report dated December 14, 2024 on our consideration of the Clinic's internal control over financial reporting and on our tests of their compliance with certain provisions of laws, regulations, contracts, 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 14, 2024
Los Angeles, California

PROGRAM PERFORMANCE SUMMARY REPORT

Date: 08/05/2022

From July 18, 2022 to July 22, 2022, the Administration for Children and Families (ACF) conducted a Focus Area (FA2) monitoring review of the Venice Family Clinic Early Head Start program. This report contains information about the recipient's performance and compliance with the requirements of the Head Start Program Performance Standards (HSPPS) or Public Law 110-134. *Improving Head Start for School Readiness Act of 2007*.

The Office of Head Start (OSH) would like to thank your governing body, policy council, parents, and staff for their engagement in the review process. Based on the information gathered during this review, we have found your program meets the requirements of all applicable HSPPS, laws, regulations, and policy requirements.

From: Responsible HHS Official



Katie Hamm
Acting Director, Office of Head Start

A LETTER FROM THE DIRECTOR

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Dear Community Members,

During 2024, we continued to be busy implementing our program goals. After extensive effort and preparation, we received our license for children 0-2 years of age at the HomeLight site. Construction continued at our Crenshaw location and we signed an agreement with LASUSD for the Early Childhood Certificate program to be housed at this site. We are very excited about the model at Crenshaw and all of the opportunities it will provide to our Early Head Start families.

Our program also committed to prioritizing children's health. We reported 95% of our children as up-to-date on their well child exams and 96% current for immunizations. This took a huge effort from our staff in conveying the importance of preventative health. Furthermore, we administered lab days for hemoglobin and lead screens, and mobile dental clinics out our Inglewood location.



Our staff and families participated in the Santa Monica Arts and Literacy Festival. This is an annual free event hosted by the City of Santa Monica promoting social and emotional development, self-care, physical well-being and motor skills, language development, and early learning for children. The theme for this year was Robots – a perfect theme to support STEM education!



A LETTER FROM THE DIRECTOR

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We also traveled to Sacramento with Policy Council members to share benefits of the program and help the California Legislature understand our contribution to the California education system.



We continue to work toward the following new program goals:

- 1.) To create better access to pediatric care for Early Head Start families.
- 2.) To create a wellness culture for families and staff in the Early Head Start families.
- 3.) To create two-generation education opportunities for Early Head Start families.

Once again, it has been a productive 2024 and we appreciate your support and involvement!

Stacey Scarborough

Children First Early Head Start Director

Venice Family Clinic

sscarborough@mednet.ucla.edu

COMMUNITY ASSESSMENT

Estimated number of eligible children under 3 years of age in VFC service area

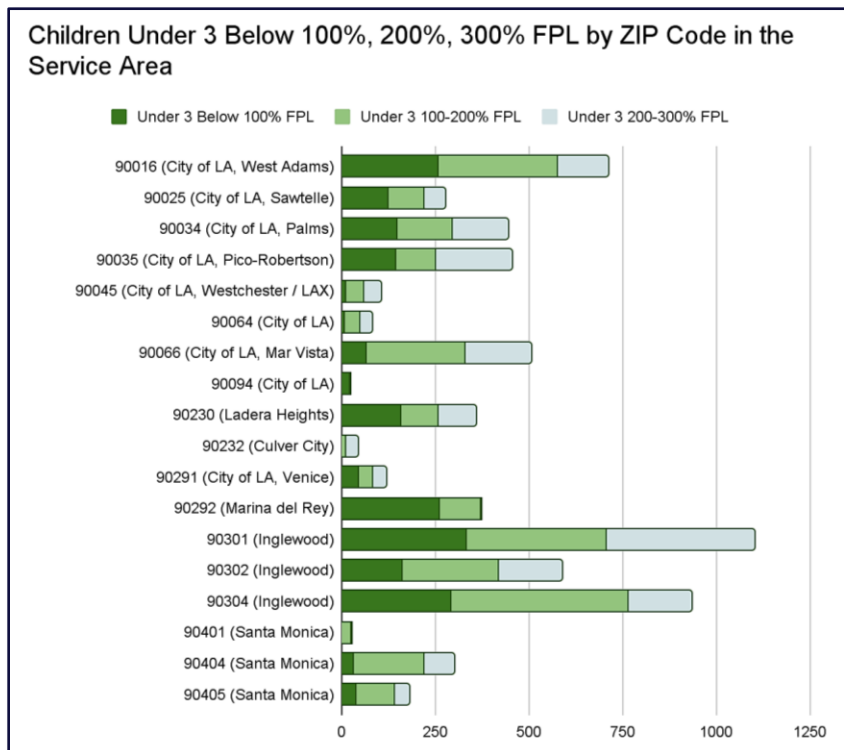
Overall within the service area there are an estimated 18,953 children under age 3. Of these, 2,123 are in families with incomes below 100% FPL (the primary income eligibility threshold for Head Start). An additional 2,704 are in families with incomes between 100-200% FPL (who may not be income-eligible for Head Start but could qualify through Cal Fresh eligibility). There are 1,805 additional children under age 3 in the service area in families with incomes between 200-300% FPL. While these children are less likely to be Head Start eligible, they are income-eligible for state subsidized early childhood programs and will be important to include in analyzing the availability of subsidized childcare in relation to the need/eligibility (see [Section 5](#)).

The chart on the following page presents these figures by ZIP code. The following ZIP codes stand out as having high numbers of children under age 3:

- 90016 (City of LA, West Adams) - 579 children under 3 below 200% FPL, 54% of all children under 3
- 90066 (City of LA, Mar Vista) — 332 children under 3 below 200% FPL, 18% of all children under 3
- 90292 (Marina del Rey) - 372 children under 3 below 200% FPL, 30% of all children under 3
- 90301 (Inglewood) - 709 children under 3 below 200% FPL, 44% of all children under 3
- 90302 (Inglewood) - 419 children under 3 below 200% FPL, 44% of all children under 3
- 90304 (Inglewood) - 767 children under 3 below 200% FPL, 69% of all children under 3

In addition, a data table showing the number and percent of children under age 3 below 100%, 200%, and 300% of the FPL is provided as [Appendix 1](#).

[Appendix 2](#) includes maps of the distribution of young children below 100% FPL and below 200% FPL in the service area. These maps may be useful for further understanding the distribution of young children in poverty within each of the ZIP codes identified above.



BUDGET & EXPENDITURES

STATEMENT OF FUNCTIONAL EXPENSES FOR YEAR ENDED JUNE 30, 2024

Salaries	\$3,554,776
Employee Benefits	\$1,592,301
Building – Utilities, Maintenance & Property tax	\$561,050
Building – Other	-
Building – Rent	\$235,481
Community Outreach Events	\$16,282
Equipment	\$77,436
Technology Expenses	\$14,444
Telephone	\$54,629
Professional and Contractual Fees	\$158,595
Memberships, Dues and Subscriptions	\$54,760
Office Supplies	\$46,034
Travel, Training and Workshops	\$122,618
Medical Supplies and Medical Waste Removal	\$848
Insurance	\$44,998
Licenses, Fees and Dues	\$9,557
Transportation of Patients/Clients	-
Participant Supplies/Activities/Incentives	\$244,207
Miscellaneous	\$47,533
Total Before Depreciation and Expenses	\$6,835,549
Depreciation and Amortization	\$150,801
Total Functional Expenses	\$6,986,350

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES SCHEDULE OF EXPENDITURES FEDERAL & STATE AWARDS

Program Title	Contract Amount
Child Development Services General Center Child Care	2024 *Child Care Grant temporarily on hold due to Crenshaw site renovation

EARLY HEAD START 2025 PROPOSED BUDGET

Personnel	\$4,857,887
Fringe	\$1,797,419
Contractual	\$200,604
Supplies	\$174,487
Travel	\$53,034
Other Costs	\$630,095
Direct	\$7,660,492
Indirect Cost	\$450,000
TTA	\$142,362
Approved Budget	\$8,110,492
Non Federal Share	\$2,063,213

2024 IN-KIND DONATIONS

January 1, 2024 – March 31, 2024	\$61,452.94
April 1, 2024 – June 30, 2024	\$56,417.53
July 1, 2024 – September 30, 2024	\$77,502.11
October 1, 2024 – December 31, 2024	\$64,295.53
Total Donations	\$259,668.11

HEALTH SERVICES

Physical Health

1. Number of children up-to-date at the end of enrollment..... **535 (95%)**
2. Children diagnosed with a chronic condition and referred for medical treatment..... **48**
3. Number of children diagnosed who received/are receiving medical treatment..... **21**
4. Number of children who received treatment for the following conditions:

▪ Autism	9	▪ Vision Problems	10	▪ Seizures	3
▪ Asthma	1	▪ High Lead	12		
▪ Hearing Difficulties	7	▪ Diabetes	0		

Preventive Dental Services/Dental Services for Pregnant Women

5. Number of children who received professional dental screenings and examinations..... **483 (83%)**
 - Number of children with continuous, accessible dental care provided by a dentist..... **334**
 - Number of all children who are up-to-date on a schedule of age-appropriate preventive and primary oral health care according to your state's EPSDT schedule..... **(83%)**
6. Cumulative enrollment of pregnant women in Early Head Start..... **43**

Disability Services

1. Total number of children referred for an evaluation to determine eligibility under the Individuals with Disabilities Education Act (IDEA) during the program year..... **62**
2. Of the children that received an evaluation, the number that were diagnosed with a disability..... **45**
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..... **141**
 - Of these, the number determined eligible for early intervention services prior to this program year..... **84**
 - Of these, the number determined eligible for early intervention services during this program year..... **57**

EARLY HEAD START ENROLLMENT

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FUNDED AND ACTUAL ENROLLMENT

Funded Enrollment.....	376
Actual Enrollment.....	628
2024 Monthly Enrollment.....	97%

PROGRAM ATTENDANCE

Home Based.....	66%
Center Based.....	75%

ELIGIBILITY

Number of children and pregnant women who were enrolled based on receipt of public assistance.....	307
Number of children and pregnant women enrolled based on income eligibility.....	112
Number of children and pregnant women who were enrolled although their families were over income.....	34
Number who were enrolled due to status as foster child.....	15
Number who were enrolled due to status as homeless.....	134

PREGNANT WOMEN SERVED

Total number of enrolled pregnant women.....	43
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Enrollment by Ethnicity

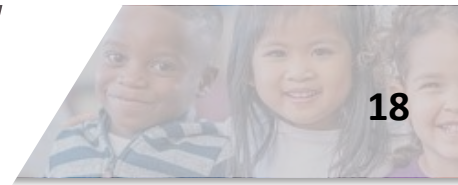
Hispanic or Latino Origin.....	468
Non-Hispanic/Non-Latino Origin.....	102
Unspecified.....	2

Primary Language

English.....	316
Spanish.....	292
Middle Eastern & South Asian.....	5
East Asian Languages.....	3

Enrollment by Race

White.....	468	Biracial/Multi-racial.....	20
American Indian/Alaskan Native.....	21	Asian.....	8
Other.....	11	Black/African American	68
European/Slavic Languages.....	3		
African Languages.....	2		
Native Central American.....	7		



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.
- 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.

"I have learned so much over the last two and a half years about child development, family relationships, and community. My daughter has had a great transition from the Early Head Start home-based option to a center-based preschool in my community."

*- Reyna Santiago
Early Head Start Parent*

PARENT INVOLVEMENT

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PLAY GROUPS 2024

	Prairie Place	Well Baby Center/L.A. Care
0 - 16 Months:	20	10
17 - 36 Months:	20	10
HV Play Groups:	106	48

2024 PARENT TRAININGS (IN-PERSON AND ONLINE)

	Monthly
• Newsletters	3 Trainings
• Financial Literacy: "How Money Works" (Primerica)	1 Training
• Financial Literacy 3-Day Series (Alex Alvarez of CIELO Community)	3 Trainings
• Family Preparedness Training (Mabel Alavez Fentanes)	3 Trainings
• Early Childhood Oral Health: "Importance of Oral Hygiene"	2 Trainings
• Child Abuse & Neglect Prevention (LA County Promotoras)	1 Training
• Child Abuse & Neglect: "Simple Strategies to Keeping Kids Safe" (Marisa Faynsod)	1 Training
• Substance Abuse: "The Effects on Children & Families" (LA County Promotoras)	2 Trainings
• CPR/First Aid/Safety Basics (Linda Radell)	3 Trainings
• Mental Health: "Understanding Infant and Toddler Mental Health" (Wendy Sun)	2 Training
• Bullying Prevention (LA County Promotoras)	1 Trainings
• Adult Education (Venice Skills Center)	3 Trainings
• Nutrition: "Sugar and Sleep" (Saint Margaret's Center)	2 Trainings
• Domestic Violence: "How Our Relationships Affect Our Children"	2 Training
• Immigration Updates for Early Head Start Families (Mabel Alavez Fentanes)	2 Training
• Health Insurance (Venice Family Clinic Health Insurance Department)	2 Trainings
• School Readiness: Language Development (Yolaina Urbina)	2 Trainings
• School Readiness: Physical Development & Health (Yolaina Urbina)	2 Trainings
• School Readiness: Cognition (Yolaina Urbina)	2 Training
• School Readiness: Social Emotional (Yolaina Urbina)	2 Training
• School Readiness: Approaches to Learning (Yolaina Urbina)	1 Training
• Poison Prevention (CA Poison Control Center)	1 Training
• Burn Prevention (Debbie Karaman of Grossman Burn Center)	1 Training
• Basics of Renting (Housing Rights Center)	1 Training
• Transition Information (Crystal Stairs)	1 Training
• Everyday Communication Speech and Language Development - English	1 Trainings
• Everyday Communication Speech and Language Development - Spanish	2 Trainings
• What to Know About "Due Process"/Rights of Children with IEP/IFSP's (Edith Madrid)	1 Training
• Advocacy (Stacey Scarborough)	

A Special Thank You

L.A. Care



Venice Family Clinic Early Head Start would like to thank our new partner L.A. Care Resource Center in West L.A. They welcomed us in and graciously provided us with space for play groups for our enrolled families. This partnership has also included backpacks for children transitioning to preschool, and adults returning to school for further education. They have supplied outreach items at our community events, along with diapers, food pantry and food gift cards to our participating families. They have also made resources available for SNAP, Medi-Cal and housing information.

We are beyond grateful for the support you have provided to our program and families. We love being part of your network!



