



# 2025-2026 EARLY HEAD START PROGRAM INFORMATION REPORT

## 01CH013521-200 United Children's Services, Inc. of Bennington County

### A. PROGRAM INFORMATION

#### GENERAL INFORMATION

|                                               |                                                                                       |
|-----------------------------------------------|---------------------------------------------------------------------------------------|
| Grant Number                                  | 01CH013521                                                                            |
| Program Number                                | 200                                                                                   |
| Program Type                                  | Early Head Start                                                                      |
| Program Name                                  | United Children's Services, Inc. of Bennington County                                 |
| Program Address                               | 2 Park St                                                                             |
| Program City, State, Zip Code (5+4)           | North Bennington, VT, 05257-9213                                                      |
| Program Phone Number                          | (802) 442 3686 - 185                                                                  |
| Head Start or Early Head Start Director Name  | Mrs. Rebecca Bishop Ware                                                              |
| Head Start or Early Head Start Director Email | rbishop@ucsvt.org                                                                     |
| Agency Email                                  | rbishop@ucsvt.org                                                                     |
| Agency Web Site Address                       | <a href="http://www.ucsvt.org/headstart.html">http://www.ucsvt.org/headstart.html</a> |
| Name and Title of Approving Official          | Mr. William Baldwin, UCH Board Chair                                                  |
| Unique Entity Identifier (UEI)                | ETJMUQ1YMKJ5                                                                          |
| Agency Type                                   | Private/Public Non-Profit (Non-CAA) (e.g., church or non-profit hospital)             |
| Agency Description                            | Grantee that directly operates program(s) and has no delegates                        |

#### FUNDED ENROLLMENT

##### Funded enrollment by funding source

|                                                                                                                                                            | # of children / pregnant women |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|
| A.1 Funded Enrollment:                                                                                                                                     | 54                             |
| a. Head Start Preschool/Early Head Start Funded Enrollment, as identified on the Notice of Award (NOA) that captures the greatest part of the program year | 54                             |
| b. Funded Enrollment from non-federal sources, i.e., state, local, private                                                                                 | 0                              |
| c. Funded Enrollment from the MIECHV Grant Program using the Early Head Start home visiting model                                                          | 0                              |

##### Funded enrollment by program option

|                                                                                                                                                                  | # of slots |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|
| A.2 Center-based option                                                                                                                                          |            |
| a. Number of slots equal to or greater than 1,020 annual hours for Head Start Preschool children or 1,380 annual hours for Early Head Start infants and toddlers | 34         |
| 1. Of these, the number that are available for the full-working-day                                                                                              | 0          |
| 2. Of these, the number that are available for the full-calendar-year                                                                                            | 0          |
| 3. Of these, the number that are available for the full-working-day and full-calendar-year                                                                       | 34         |
| b. Number of slots with fewer than 1,020 annual hours for Head Start Preschool children or 1,380 annual hours for Early Head Start infants and toddlers          | 0          |
| 1. Of these, the number that are available for 3.5 hours per day for 128 days                                                                                    | 0          |
| 2. Of these, the number that are available for a full working day                                                                                                | 0          |
| A.3 Home-based option                                                                                                                                            | 0          |
| A.4 Family child care option                                                                                                                                     | 0          |
| A.5 Locally designed option                                                                                                                                      | 20         |

|                          | # of pregnant women slots |
|--------------------------|---------------------------|
| A.6 Pregnant women slots | 0                         |

### Funded slots at child care partner

|                                                                                                                                     | # of slots |
|-------------------------------------------------------------------------------------------------------------------------------------|------------|
| A.7 Total number of slots in the center-based or locally designed option                                                            | 54         |
| a. Of these, the total number of slots at a child care partner                                                                      | 16         |
| A.8 Total funded enrollment at child care partners (includes center-based, locally designed, and family child care program options) | 16         |

### CLASSES IN CENTER-BASED

|                                                   | # of classes |
|---------------------------------------------------|--------------|
| A.9 Total number of center-based classes operated | 11           |
| a. Of these, the number of double session classes | 0            |

### CUMULATIVE ENROLLMENT

#### Children by age

|                                            | # of children |
|--------------------------------------------|---------------|
| A.10 Children by age:                      |               |
| a. Under 1 year                            | 30            |
| b. 1 year old                              | 33            |
| c. 2 years old                             | 20            |
| d. 3 years old                             | 0             |
| g. Total cumulative enrollment of children | 83            |

#### Pregnant women (EHS programs)

|                                              | # of pregnant women |
|----------------------------------------------|---------------------|
| A.11 Cumulative enrollment of pregnant women | 0                   |

#### Total cumulative enrollment

|                                  | # of children / pregnant women |
|----------------------------------|--------------------------------|
| A.12 Total cumulative enrollment | 83                             |

#### Primary type of documentation used for determining eligibility

|                                                                     | # of children / pregnant women |
|---------------------------------------------------------------------|--------------------------------|
| A.13 Report each enrollee only once by primary type of eligibility: |                                |
| a. Income at or below 100% of federal poverty line                  | 16                             |
| b. Public assistance*                                               | 48                             |
| 1. TANF documentation                                               | 6                              |
| 2. SSI documentation                                                | 1                              |
| 3. SNAP documentation                                               | 31                             |
| c. Foster care                                                      | 9                              |
| d. Homeless                                                         | 3                              |

|                                                                                 | # of children /<br>pregnant women |
|---------------------------------------------------------------------------------|-----------------------------------|
| e. Eligibility based on other type of need, but not counted in A.13.a through d | 4                                 |

|                                                                                                   | # of children /<br>pregnant women |
|---------------------------------------------------------------------------------------------------|-----------------------------------|
| f. Incomes between 100% and 130% of the federal poverty line, but not counted in A.13.a through e | 3                                 |

|                                                                                                                                                                                                                                                                                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| A.14 If the program serves enrollees under A.13.f, specify how the program has demonstrated that all children in their area that would be eligible under A.13.a to A.13.d are being served.                                                                                              |
| The program has demonstrated that all eligible children are being served by fully exhausting our wait list of children with automatic eligibility, including those at or below 100% of the federal poverty level. No income eligible or categorically eligible children remain unserved. |

|                                                                                                             | # of children /<br>pregnant women |
|-------------------------------------------------------------------------------------------------------------|-----------------------------------|
| A.15. Of those counted in A.13.a. and A.13.f., number whose income was adjusted for excessive housing costs | 1                                 |

## Prior enrollment

|                                                                       | # of children |
|-----------------------------------------------------------------------|---------------|
| A.16 Enrolled in Head Start Preschool or Early Head Start for:        |               |
| a. Enrolled in Head Start or Early Head Start for the second year     | 20            |
| b. Enrolled in Head Start or Early Head Start for three or more years | 14            |

## Transition and turnover

|                                                                                                                                   | # of children |
|-----------------------------------------------------------------------------------------------------------------------------------|---------------|
| A.19 Total number of infants and toddlers who left the program any time after classes or home visits began and did not re-enroll  | 22            |
| a. Of the infants and toddlers who left the program above, the number of infants and toddlers who were enrolled less than 45 days | 6             |
| b. Of the infants and toddlers who left the program during the program year, the number who aged out of Early Head Start          | 8             |
| b.1. Of the infants and toddlers who aged out of Early Head Start, the number who entered a Head Start Preschool program          | 6             |
| b.2. Of the infants and toddlers who aged out of Early Head Start, the number who entered another early childhood program         | 1             |
| b.3. Of the infants and toddlers who aged out of Early Head Start, the number who did not enter another early childhood program   | 1             |

|                                                                                                                                                                | # of pregnant women |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|
| A.20 Total number of pregnant women who left the program after receiving Early Head Start services but before the birth of their infant, and did not re-enroll | 0                   |
| A.21 Number of pregnant women receiving Early Head Start services at the time their infant was born                                                            | 0                   |
| a. Of the pregnant women enrolled when their infant was born, the number whose infant was subsequently enrolled in the program                                 | 0                   |
| b. Of the pregnant women enrolled when their infant was born, the number whose infant was not subsequently enrolled in the program                             | 0                   |

## Attendance

|                                                                                                                                                                                                                                     | # of children |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|
| A.23 The total number of children cumulatively enrolled in the center-based or family child care program option                                                                                                                     | 83            |
| a. Of these children, the number of children that were chronically absent                                                                                                                                                           | 53            |
| a.1. Of the children chronically absent, the number that stayed enrolled until the end of enrollment                                                                                                                                | 31            |
| A.24 Comments on children that were chronically absent:                                                                                                                                                                             |               |
| The program continues to actively work to achieve 85% attendance rate by implementing positive attendance incentives, individual attendance plans, and educational initiatives that emphasize the importance of regular attendance. |               |

## Child care subsidy

|                                                                                                                                     | # of children |
|-------------------------------------------------------------------------------------------------------------------------------------|---------------|
| A.25 The number of enrolled children for whom the program and/or its partners received a child care subsidy during the program year | 81            |

## Race and/or ethnicity

|                                                                         | # of children |
|-------------------------------------------------------------------------|---------------|
| A.26 Race and/or ethnicity                                              |               |
| a. American Indian or Alaska Native alone                               | 0             |
| b. Asian alone                                                          | 1             |
| c. Black or African American alone                                      | 2             |
| d. Hispanic or Latino alone                                             | 0             |
| e. Middle Eastern or North African alone                                | 0             |
| f. Native Hawaiian or Pacific Islander alone                            | 0             |
| g. White alone                                                          | 72            |
| h. Multiracial and/or Multiethnic                                       | 7             |
| i. Unspecified ethnicity or race                                        | 1             |
|                                                                         |               |
|                                                                         | # of children |
| A.27 Of those who self-identify as more than one race and/or ethnicity: |               |
| a. American Indian or Alaska Native                                     | 0             |
| b. Asian                                                                | 0             |
| c. Black or African American                                            | 0             |
| d. Hispanic or Latino alone                                             | 0             |
| e. Middle Eastern or North African                                      | 0             |
| f. Native Hawaiian or Pacific Islander alone                            | 0             |
| g. White                                                                | 0             |

## Primary language of family at home

|                                                                                                        | # of children |
|--------------------------------------------------------------------------------------------------------|---------------|
| A.28 Primary language of family at home:                                                               |               |
| a. English                                                                                             | 81            |
| a.1. Of these, the number of children acquiring/learning another language in addition to English       | 1             |
| b. Spanish                                                                                             | 0             |
| c. Native Central American, South American & Mexican Languages (e.g., Mixteco, Quichean.)              | 0             |
| d. Caribbean Languages (e.g., Haitian-Creole, Patois)                                                  | 0             |
| e. Middle Eastern & South Asian Languages (e.g., Arabic, Hebrew, Hindi, Urdu, Bengali)                 | 1             |
| f. East Asian Languages (e.g., Chinese, Vietnamese, Tagalog)                                           | 0             |
| g. Native North American/Alaska Native Languages                                                       | 0             |
| h. Pacific Island Languages (e.g., Palauan, Fijian)                                                    | 0             |
| i. European & Slavic Languages (e.g., German, French, Italian, Croatian, Yiddish, Portuguese, Russian) | 0             |
| j. African Languages (e.g., Swahili, Wolof)                                                            | 1             |
| k. American Sign Language                                                                              | 0             |
| l. Other (e.g., American Sign Language)                                                                | 0             |
| m. Unspecified (language is not known or parents declined identifying the home language)               | 0             |

## Dual language learners

|                                             | # of children |
|---------------------------------------------|---------------|
| A.29 Total number of Dual Language Learners | 3             |

## Transportation

|                                                                                 | # of children |
|---------------------------------------------------------------------------------|---------------|
| A.30 Number of children for whom transportation is provided to and from classes | 3             |

## RECORD KEEPING

### Management Information Systems

| A.31 List the management information system(s) your program uses to support tracking, maintaining, and using data on enrollees, program services, families, and program staff. |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Name/title                                                                                                                                                                     |
| GoEngage                                                                                                                                                                       |

## B. PROGRAM STAFF & QUALIFICATIONS

### TOTAL STAFF

#### Staff by type

|                                                                                                                | (1)<br># of Head Start<br>Preschool or<br>Early Head Start<br>staff | (2)<br># of contracted<br>staff |
|----------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|---------------------------------|
| B.1 Total number of staff members, regardless of the funding source for their salary or number of hours worked | 21                                                                  | 4                               |
| a. Of these, the number who are current or former Head Start Preschool or Early Head Start parents             | 6                                                                   | 1                               |

### TOTAL VOLUNTEERS

#### Volunteers by type

|                                                                                                    | # of volunteers |
|----------------------------------------------------------------------------------------------------|-----------------|
| B.2 Number of persons providing any volunteer services to the program during the program year      | 0               |
| a. Of these, the number who are current or former Head Start Preschool or Early Head Start parents | 0               |

### EDUCATION AND CHILD DEVELOPMENT STAFF

#### Infant and toddler classroom teachers (EHS and Migrant programs)

|                                                           | # of classroom<br>teachers |
|-----------------------------------------------------------|----------------------------|
| B.6 Total number of infant and toddler classroom teachers | 21                         |

|                                                                                                                                           | # of classroom<br>teachers |
|-------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|
| Of the number of infant and toddler classroom teachers, the number with the following:                                                    |                            |
| a. An advanced degree (e.g., master's, doctoral) in:                                                                                      |                            |
| 1. Early childhood education with a focus on infant and toddler development or                                                            |                            |
| 2. Any field and coursework equivalent to a major relating to early childhood education, with experience teaching infants and/or toddlers | 1                          |

|                                                                                                                                           | # of classroom<br>teachers |
|-------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|
| Of the number of infant and toddler classroom teachers, the number with the following:                                                    |                            |
| b. A bachelor's degree in:                                                                                                                |                            |
| 1. Early childhood education with a focus on infant and toddler development or                                                            |                            |
| 2. Any field and coursework equivalent to a major relating to early childhood education, with experience teaching infants and/or toddlers | 3                          |

|                                                                                                                                                                             | # of classroom teachers |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|
| Of the number of infant and toddler classroom teachers, the number with the following:                                                                                      |                         |
| c. An associate degree in:                                                                                                                                                  |                         |
| 1. Early childhood education with a focus on infant and toddler development or                                                                                              |                         |
| 2. A field related to early childhood education and coursework equivalent to a major relating to early childhood education with experience teaching infants and/or toddlers | 4                       |

|                                                                                                                                                                                               | # of classroom teachers |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|
| Of the number of infant and toddler classroom teachers, the number with the following:                                                                                                        |                         |
| d. A Child Development Associate (CDA) credential or state-awarded certification, credential, or licensure that meets or exceeds CDA requirements                                             | 12                      |
| 1. Of these, a CDA credential or state-awarded certification, credential, or licensure that meets or exceeds CDA requirements and that is appropriate to the option in which they are working | 1                       |

|                                                                                        | # of classroom teachers |
|----------------------------------------------------------------------------------------|-------------------------|
| Of the number of infant and toddler classroom teachers, the number with the following: |                         |
| e. None of the qualifications listed in B.6.a through B.6.d                            | 1                       |

|                                                                                                                                                                                                              | # of classroom teachers |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|
| B.7 Total number of infant and toddler classroom teachers that do not have any qualifications listed in B.6.a through B.6.d                                                                                  | 1                       |
| a. Of these infant and toddler classroom teachers, the number enrolled in a degree, certification, credential, or licensure program that would meet one of the qualifications listed in B.6.a through B.6.d. | 1                       |

## Home visitors and family child care provider staff qualifications

|                                                                                                                                                                                                                        | # of home visitors |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|
| B.8 Total number of home visitors                                                                                                                                                                                      | 0                  |
| a. Of these, the number of home visitors that have a home-based CDA credential or comparable credential, or equivalent coursework as part of an associate's, bachelor's, or advanced (e.g., master's, doctoral) degree | 0                  |
| 1. Of these, the number of home visitors that hold a bachelor's or advanced (e.g., master's, doctoral) degree                                                                                                          | 0                  |
| b. Of these, the number of home visitors that do not meet one of the qualifications described in B.8.a.                                                                                                                | 0                  |
| 1. Of the home visitors in B.8.b, the number enrolled in a degree or credential program that would meet a qualification described in B.8.a.                                                                            | 0                  |

|                                                                                                                                                                                                                                                       | # of family child care providers |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| B.9 Total number of family child care providers                                                                                                                                                                                                       | 0                                |
| a. Of these, the number of family child care providers that have a Family Child Care CDA credential or state equivalent, or an associate, bachelor's, or advanced (e.g., master's, doctoral) degree in child development or early childhood education | 0                                |
| 1. Of these, the number of family child care providers that hold a bachelor's or advanced (e.g., master's, doctoral) degree in child development or early childhood education                                                                         | 0                                |
| b. Of these, the number of family child care providers that do not meet one of the qualifications described in B.9.a.                                                                                                                                 | 0                                |
| 1. Of the family child care providers in B.9.b, the number enrolled in a degree or credential program that would meet a qualification described in B.9.a.                                                                                             | 0                                |

|                                                                                                                                                               | # of child development specialists |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| B.10 Total number of child development specialists that support family child care providers                                                                   | 0                                  |
| a. Of these, the number of child development specialists that have a bachelor's degree in child development, early childhood education, or a related field    | 0                                  |
| b. Of these, the number of child development specialists that do not meet one of the qualifications described in B.10.a.                                      | 0                                  |
| 1. Of the child development specialists in B.10.b, the number enrolled in a degree or credential program that would meet a qualification described in B.10.a. | 0                                  |

## Race and/or ethnicity

|                                              | # of non-supervisory education and child development staff |
|----------------------------------------------|------------------------------------------------------------|
| B.13 Race and/or ethnicity                   |                                                            |
| a. American Indian or Alaska Native alone    | 0                                                          |
| b. Asian alone                               | 0                                                          |
| c. Black or African American alone           | 1                                                          |
| d. Hispanic or Latino alone                  | 0                                                          |
| e. Middle Eastern or North African alone     | 0                                                          |
| f. Native Hawaiian or Pacific Islander alone | 0                                                          |
| g. White alone                               | 20                                                         |
| h. Multiracial and/or Multiethnic            | 0                                                          |
| i. Unspecified race and/or ethnicity         | 0                                                          |

|                                                                         | # of non-supervisory education and child development staff |
|-------------------------------------------------------------------------|------------------------------------------------------------|
| B.14 Of those who self-identify as more than one race and/or ethnicity: |                                                            |
| a. American Indian or Alaska Native                                     | 0                                                          |
| b. Asian                                                                | 0                                                          |
| c. Black or African American                                            | 0                                                          |
| d. Hispanic or Latino                                                   | 0                                                          |
| e. Middle Eastern or North African                                      | 0                                                          |
| f. Native Hawaiian or Pacific Islander                                  | 0                                                          |
| g. White                                                                | 0                                                          |

## Language

|                                                                                         | # of non-supervisory education and child development staff |
|-----------------------------------------------------------------------------------------|------------------------------------------------------------|
| B.15 The number who are proficient in a language(s) other than English.                 | 0                                                          |
| a. Of these, the number who are proficient in more than one language other than English | 0                                                          |

| B.16 Language groups in which staff are proficient:                                                      | # of non-supervisory education and child development staff |
|----------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| a. Spanish                                                                                               | 0                                                          |
| b. Native Central American, South American, and Mexican Languages (e.g., Mixteco, Quichean.)             | 0                                                          |
| c. Caribbean Languages (e.g., Haitian-Creole, Patois)                                                    | 0                                                          |
| d. Middle Eastern and South Asian Languages (e.g., Arabic, Hebrew, Hindi, Urdu, Bengali)                 | 0                                                          |
| e. East Asian Languages (e.g., Chinese, Vietnamese, Tagalog)                                             | 0                                                          |
| f. Native North American/Alaska Native Languages                                                         | 0                                                          |
| g. Pacific Island Languages (e.g., Palauan, Fijian)                                                      | 0                                                          |
| h. European and Slavic Languages (e.g., German, French, Italian, Croatian, Yiddish, Portuguese, Russian) | 0                                                          |
| i. African Languages (e.g., Swahili, Wolof)                                                              | 0                                                          |
| j. American Sign Language                                                                                | 0                                                          |
| k. Other                                                                                                 | 0                                                          |
| l. Unspecified (language is not known or staff declined identifying the language)                        | 0                                                          |

## STAFF TURNOVER

### All staff turnover

|                                                                                                                                                          | (1)<br># of Head Start<br>Preschool<br>or Early Head<br>Start staff | (2)<br># of contracted<br>staff |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|---------------------------------|
| B.17 Total number of staff who left during the program year (including turnover that occurred while the program was not in session, e.g., summer months) | 5                                                                   | 1                               |
| a. Of these, the number who were replaced                                                                                                                | 0                                                                   | 0                               |

### Education and child development staff turnover

|                                                                                                                                                                                                                                                                       | # of staff |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|
| B.18 The number of classroom teachers, preschool assistant teachers, family child care providers, and home visitors who left during the program year (including turnover that occurred while classes and home visits were not in session, e.g., during summer months) | 6          |
| a. Of these, the number who were replaced                                                                                                                                                                                                                             | 4          |
| b. Of these, the number who left while classes and home visits were in session                                                                                                                                                                                        | 6          |
| c. Of these, the number that were classroom teachers who left the program                                                                                                                                                                                             | 6          |

|                                                                                                                               | # of staff |
|-------------------------------------------------------------------------------------------------------------------------------|------------|
| B.19 Of the number of education and child development staff that left, the number that left for the following primary reason: |            |
| a. Higher compensation                                                                                                        | 2          |
| 1. Of these, the number that moved to state pre-k or other early childhood program                                            | 1          |
| b. Retirement or relocation                                                                                                   | 0          |
| c. Involuntary separation                                                                                                     | 0          |
| d. Other (e.g., change in job field, reason not provided)                                                                     | 4          |

|                                                                                                            |                                             |   |
|------------------------------------------------------------------------------------------------------------|---------------------------------------------|---|
| 1. Specify:                                                                                                | 2 change in job field; 2 no reason provided |   |
| B.20 Number of vacancies during the program year that remained unfilled for a period of 3 months or longer |                                             | 0 |

## C. CHILD AND HEALTH SERVICES

### HEALTH SERVICES

#### Health insurance – children

|                                                                                                                                                    | (1)<br># of children at<br>enrollment | (2)<br># of children at<br>end of enrollment |
|----------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|----------------------------------------------|
| C.1 Number of all children with health insurance                                                                                                   | 83                                    | 83                                           |
| a. Of these, the number enrolled in Medicaid and/or CHIP                                                                                           | 82                                    | 82                                           |
| b. Of these, the number enrolled in state-only funded insurance (e.g., medically indigent insurance), private insurance, or other health insurance | 1                                     | 1                                            |
| C.2 Number of children with no health insurance                                                                                                    | 0                                     | 0                                            |

#### Health insurance - pregnant women (EHS programs)

|                                                                                                                                                    | (1)<br># of pregnant<br>women at<br>enrollment | (2)<br># of pregnant<br>women at end of<br>enrollment |
|----------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-------------------------------------------------------|
| C.3 Number of pregnant women with at least one type of health insurance                                                                            | 0                                              | 0                                                     |
| a. Of these, the number enrolled in Medicaid                                                                                                       | 0                                              | 0                                                     |
| b. Of these, the number enrolled in state-only funded insurance (e.g., medically indigent insurance), private insurance, or other health insurance | 0                                              | 0                                                     |
| C.4 Number of pregnant women with no health insurance                                                                                              | 0                                              | 0                                                     |

#### Accessible health care - children

|                                                                                                                                                                                                                                       | (1)<br># of children at<br>enrollment | (2)<br># of children at<br>end of enrollment |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|----------------------------------------------|
| C.5 Number of children with an ongoing source of continuous, accessible health care provided by a health care professional that maintains the child's ongoing health record and is not primarily a source of emergency or urgent care | 83                                    | 83                                           |
| a. Of these, the number of children that have accessible health care through a federally qualified Health Center, Indian Health Service, Tribal and/or Urban Indian Health Program facility                                           | 0                                     | 0                                            |

#### Accessible health care - pregnant women (EHS Programs)

|                                                                                                                                                                                                                                       | (1)<br># of pregnant<br>women at<br>enrollment | (2)<br># of pregnant<br>women at end of<br>enrollment |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-------------------------------------------------------|
| C.6 Number of pregnant women with an ongoing source of continuous, accessible health care provided by a health care professional that maintains their ongoing health record and is not primarily a source of emergency or urgent care | 0                                              | 0                                                     |

## Medical services – children

|                                                                                                                                                                                     | (1)<br># of children at<br>enrollment | (2)<br># of children at<br>end of enrollment |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|----------------------------------------------|
| C.7 Number of children who are up-to-date on a schedule of age-appropriate preventive and primary health care, according to the relevant state's EPSDT schedule for well child care | 83                                    | 71                                           |
|                                                                                                                                                                                     |                                       | # of children                                |
| C.8. Number of children diagnosed with any chronic condition by a health care professional, regardless of when the condition was first diagnosed                                    |                                       | 30                                           |
| a. Of these, the number who received medical treatment for their diagnosed chronic health condition                                                                                 |                                       | 23                                           |
| b. Specify the primary reason that children with any chronic condition diagnosed by a health care professional did not receive medical treatment:                                   |                                       | # of children                                |
| 1. No medical treatment needed                                                                                                                                                      |                                       | 3                                            |
| 2. No health insurance                                                                                                                                                              |                                       | 0                                            |
| 3. Parents did not keep/make appointment                                                                                                                                            |                                       | 4                                            |
| 4. Children left the program before their appointment date                                                                                                                          |                                       | 0                                            |
| 5. Appointment is scheduled for future date                                                                                                                                         |                                       | 0                                            |
| 6. Other                                                                                                                                                                            |                                       | 0                                            |
| C.9 Number of children diagnosed by a health care professional with the following chronic condition, regardless of when the condition was first diagnosed:                          |                                       | # of children                                |
| a. Autism spectrum disorder (ASD)                                                                                                                                                   |                                       | 7                                            |
| b. Attention deficit hyperactivity disorder (ADHD)                                                                                                                                  |                                       | 0                                            |
| c. Asthma                                                                                                                                                                           |                                       | 10                                           |
| d. Seizures                                                                                                                                                                         |                                       | 1                                            |
| e. Life-threatening allergies (e.g., food allergies, bee stings, and medication allergies that may result in systemic anaphylaxis)                                                  |                                       | 1                                            |
| f. Hearing Problems                                                                                                                                                                 |                                       | 2                                            |
| g. Vision Problems                                                                                                                                                                  |                                       | 7                                            |
| h. Blood lead level test with elevated lead levels >3.5 µg/dL                                                                                                                       |                                       | 9                                            |
| i. Diabetes                                                                                                                                                                         |                                       | 0                                            |

## Immunization services - children

|                                                                                                                                                                                                               | (1)<br># of children at<br>enrollment | (2)<br># of children at<br>end of enrollment |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|----------------------------------------------|
| C.11 Number of children who have been determined by a health care professional to be up-to-date on all immunizations appropriate for their age                                                                | 39                                    | 32                                           |
| C.12 Number of children who have been determined by a health care professional to have received all immunizations possible at this time but who have not received all immunizations appropriate for their age | 32                                    | 41                                           |
| C.13 Number of children who meet their state's guidelines for an exemption from immunizations                                                                                                                 | 8                                     | 8                                            |

## Medical and wellbeing services – pregnant women (EHS programs)

|                                                                                                       | # of pregnant women |
|-------------------------------------------------------------------------------------------------------|---------------------|
| C.14 Indicate the number of pregnant women who received the following services while enrolled in EHS: |                     |
| a. Prenatal health care                                                                               | 0                   |
| b. Postpartum health care                                                                             | 0                   |
| c. Scheduled a newborn visit within two weeks after the infant's birth                                | 0                   |
| d. A professional oral health assessment, examination, and/or treatment                               | 0                   |
| e. Mental health interventions and follow up                                                          | 0                   |
| f. Education on fetal development                                                                     | 0                   |
| g. Education on the benefits of breastfeeding                                                         | 0                   |
| h. Education on the importance of nutrition                                                           | 0                   |
| i. Education on infant care and safe sleep practices                                                  | 0                   |
| j. Education on the risks of alcohol, drugs, and/or smoking                                           | 0                   |
| k. Facilitating access to substance abuse treatment (i.e., alcohol, drugs, and/or smoking)            | 0                   |

## Prenatal health – pregnant women (EHS programs)

|                                                                                                                                      | # of pregnant women |
|--------------------------------------------------------------------------------------------------------------------------------------|---------------------|
| C.15 Trimester of pregnancy in which the pregnant women served were enrolled:                                                        |                     |
| a. 1st trimester (0-3 months)                                                                                                        | 0                   |
| b. 2nd trimester (3-6 months)                                                                                                        | 0                   |
| c. 3rd trimester (6-9 months)                                                                                                        | 0                   |
| C.16 Of the total served, the number whose pregnancies were identified as medically high risk by a physician or health care provider | 0                   |

## Newborn visit - pregnant women(EHS programs)

|                                                                          | # of pregnant women |
|--------------------------------------------------------------------------|---------------------|
| C.17 Indicate the number of pregnant women that received a newborn visit |                     |
| a. Within two weeks after the infant's birth                             | 0                   |
| b. Between two to six weeks after the infant's birth                     | 0                   |
| c. After six weeks following the infant's birth                          | 0                   |

## ORAL HEALTH

### Accessible dental care - children

|                                                                                                                                                                                    | (1)<br># of children at<br>enrollment | (2)<br># of children at<br>end of enrollment |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|----------------------------------------------|
| C.18 Number of children with continuous, accessible oral care provided by an oral health care professional which includes access to oral health preventive care and oral treatment | 16                                    | 26                                           |

|                                                                                                        | # of children |
|--------------------------------------------------------------------------------------------------------|---------------|
| C.19 Number of children who received oral health preventive care during the program year               | 36            |
| C.20 Number of all children who have completed a professional oral examination during the program year | 57            |
| a. Of these, the number of children diagnosed as needing oral treatment during the program year        | 0             |
| 1. Of these, the number of children who received oral treatment during the program year                | 0             |
| b. Specify the primary reason that children who needed dental treatment did not receive it:            | # of children |
| 1. Health insurance doesn't cover oral treatment                                                       | 0             |
| 2. No oral care available in local area                                                                | 0             |
| 3. Medicaid not accepted by dentist                                                                    | 0             |
| 4. Dentists in the area do not treat 3- to 5-year-old children                                         | 0             |
| 5. Dentists in the area do not treat children below age 3                                              | 0             |
| 6. Parents did not keep/make appointment                                                               | 0             |
| 7. Children left the program before their appointment date                                             | 0             |
| 8. Appointment is scheduled for future date                                                            | 0             |
| 9. No transportation                                                                                   | 0             |
| 10. Other                                                                                              | 0             |

## Mental health consultation

|                                                                                                                                                                                           | # of staff |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|
| C.21 Total number of classroom teachers, home visitors, and family child care providers                                                                                                   | 21         |
| a. Indicate the number of classroom teachers, home visitors, and family child care providers who received assistance from a mental health consultant through observation and consultation | 21         |

## DISABILITIES SERVICES

### IDEA eligibility determination

|                                                                                                                                                                                                                                       | # of children |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|
| C.22 The total number of children referred for an evaluation to determine eligibility under the Individuals with Disabilities Education Act (IDEA) during the program year                                                            | 8             |
| a. Of these, the number who received an evaluation to determine IDEA eligibility                                                                                                                                                      | 7             |
| 1. Of the children that received an evaluation, the number that were diagnosed with a disability under IDEA                                                                                                                           | 1             |
| 2. Of the children that received an evaluation, the number that were not diagnosed with a disability under IDEA                                                                                                                       | 6             |
| 1. Of these children, the number for which the program is still providing or facilitating individualized services and supports such as an individual learning plan or supports described under Section 504 of the Rehabilitation Act. | 0             |
| b. Of these, the number who did not receive an evaluation to determine IDEA eligibility                                                                                                                                               | 1             |

|                                                                                                                            | # of children |
|----------------------------------------------------------------------------------------------------------------------------|---------------|
| C.23 Specify the primary reason that children referred for an evaluation to determine IDEA eligibility did not receive it: |               |
| a. The responsible agency assigned child to Response to Intervention (RTI)                                                 | 0             |
| b. Parent(s) refused evaluation                                                                                            | 0             |
| c. Evaluation is pending and not yet completed by responsible agency                                                       | 0             |
| d. Other                                                                                                                   | 0             |

## Infant and toddler Part C early intervention services (EHS and Migrant programs)

|                                                                                                                                            | # of children |
|--------------------------------------------------------------------------------------------------------------------------------------------|---------------|
| C.25 Number of children enrolled in the program who had an Individualized Family Service Plan (IFSP), at any time during the program year. | 44            |
| a. Of these, the number who were determined eligible to receive early intervention services:                                               | # of children |
| 1. Prior to this program year                                                                                                              | 29            |
| 2. During this enrollment year                                                                                                             | 15            |
| b. Of these, the number who have not received early intervention services under IDEA                                                       | 0             |

## EDUCATION AND DEVELOPMENT TOOLS/APPROACHES

### Screening

|                                                                                                                                                                                    | # of children |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|
| C.27 Number of all newly enrolled children since last year's PIR was reported                                                                                                      | 19            |
| C.28 Number of all newly enrolled children who completed required screenings within 45 days for developmental, sensory, and behavioral concerns since last year's PIR was reported | 45            |
| a. Of these, the number identified as needing follow-up assessment or formal evaluation to determine if the child has a disability                                                 | 0             |
| C.29 The instrument(s) used by the program for developmental screening                                                                                                             |               |
| <i>Name/title</i>                                                                                                                                                                  |               |
| Agess and Stages Questionnaire (ASQ; all editions)                                                                                                                                 |               |

### Assessment

|                                                                                  |
|----------------------------------------------------------------------------------|
| C.30 Approach or tool(s) used by the program to support ongoing child assessment |
| <i>Name/title</i>                                                                |
| Creative Curriculum (all editions)                                               |

### Curriculum

|                                                                                  |
|----------------------------------------------------------------------------------|
| C.31 Curriculum used by the program:                                             |
| a. For center-based services                                                     |
| <i>Name/title</i>                                                                |
| Creative Curriculum for Infants, Toddlers, and Twos                              |
| e. For building on the parents' knowledge and skill (i.e., parenting curriculum) |
| <i>Name/title</i>                                                                |
| Ready Rosie                                                                      |

### Classroom and home visit observation tools

|                                                                                                  | Yes (Y) / No (N) |
|--------------------------------------------------------------------------------------------------|------------------|
| C.32 Does the program routinely use classroom or home visit observation tools to assess quality? | Yes              |

|                                                                                |
|--------------------------------------------------------------------------------|
| C.33 If yes, classroom and home visit observation tool(s) used by the program: |
| a. Center-based settings                                                       |
| <i>Name/title</i>                                                              |
| Teaching Pyramid Observation Tool (TPOT)                                       |

## FAMILY AND COMMUNITY PARTNERSHIPS

### Number of families

|                                                                                                              | # of families at enrollment |
|--------------------------------------------------------------------------------------------------------------|-----------------------------|
| C.34 Total number of families:                                                                               | 76                          |
| a. Of these, the number of two-parent families                                                               | 37                          |
| b. Of these, the number of single-parent families                                                            | 39                          |
| C.35 Of the total number of families, the number in which the parent/guardian figures are best described as: |                             |
| a. Parent(s) (e.g., biological, adoptive, stepparents)                                                       | 73                          |
| 1. Of these, the number of families with a mother only (biological, adoptive, stepmother)                    | 34                          |
| 2. Of these, the number of families with a father only (biological, adoptive, stepfather)                    | 4                           |
| b. Grandparents                                                                                              | 1                           |
| c. Relative(s) other than grandparents                                                                       | 0                           |
| d. Foster parent(s) not including relatives                                                                  | 2                           |
| e. Other                                                                                                     | 0                           |

### Parent/guardian education

|                                                                                                                       | # of families at enrollment |
|-----------------------------------------------------------------------------------------------------------------------|-----------------------------|
| C.36 Of the total number of families, the highest level of education obtained by the child's parent(s) / guardian(s): |                             |
| a. An advanced (e.g., master's, doctoral) degree or bachelor's degree                                                 | 2                           |
| b. An associate degree, vocational school, or some college                                                            | 19                          |
| c. A high school graduate or GED                                                                                      | 42                          |
| d. Less than high school graduate                                                                                     | 14                          |

### Employment, Job Training, and School

|                                                                                                                                                                                          | # of families at enrollment |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|
| C.37 Total number of families in which:                                                                                                                                                  |                             |
| a. At least one parent/guardian is employed, in job training, or in school at enrollment                                                                                                 | 60                          |
| 1. Of these families, the number in which one or more parent/guardian is employed                                                                                                        | 59                          |
| 2. Of these families, the number in which one or more parent/guardian is in job training (e.g., job training program, professional certificate, apprenticeship, or occupational license) | 0                           |
| 3. Of these families, the number in which one or more parent/guardian is in school (e.g., GED, associate degree, bachelor's, or advanced (e.g., master's, doctoral) degree)              | 1                           |
| b. Neither/No parent/guardian is employed, in job training, or in school at enrollment (e.g., unemployed, retired, or disabled)                                                          | 16                          |

|                                                                                                                                                          | # of families at end of enrollment |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| C.38 Total number of families in which:                                                                                                                  |                                    |
| a. At least one parent/guardian is employed, in job training, or in school at end of enrollment                                                          | 64                                 |
| 1. Of these families, the number of families that were also counted in C.37.a (as having been employed, in job training, or in school at enrollment)     | 60                                 |
| 2. Of these families, the number of families that were also counted in C.37.b (as having not been employed, in job training, or in school at enrollment) | 4                                  |
| b. Neither/No parent/guardian is employed, in job training, or in school at end of enrollment (e.g., unemployed, retired, or disabled)                   | 12                                 |
| 1. Of these families, the number of families that were also counted in C.37.a                                                                            | 0                                  |
| 2. Of these families, the number of families that were also counted in C.37.b                                                                            | 12                                 |

|                                                                                          | # of families at enrollment |
|------------------------------------------------------------------------------------------|-----------------------------|
| C.39 Total number of families in which:                                                  |                             |
| a. At least one parent/guardian is a member of the United States military on active duty | 0                           |
| b. At least one parent/guardian is a veteran of the United States military               | 1                           |

### Federal or other assistance

|                                                                                                                                                     | # of families at enrollment | # of families at end of enrollment |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|------------------------------------|
| C.40 Total number of families receiving any cash benefits or other services under the Federal Temporary Assistance to Needy Families (TANF) Program | 18                          | 21                                 |
| C.41 Total number of families receiving Supplemental Security Income (SSI)                                                                          | 8                           | 7                                  |
| C.42 Total number of families receiving services under the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)            | 21                          | 18                                 |
| C.43 Total number of families receiving benefits under the Supplemental Nutrition Assistance Program (SNAP), formerly referred to as Food Stamps    | 38                          | 36                                 |

## Family services

|                                                                                                        | # of families |
|--------------------------------------------------------------------------------------------------------|---------------|
| C.44 The number of families that received the following program service to promote family outcomes:    |               |
| a. Emergency/crisis intervention (e.g., meeting immediate needs for food, clothing, or shelter)        | 11            |
| b. Housing assistance (e.g., subsidies, utilities, repairs)                                            | 6             |
| c. Asset building services (e.g., financial education, debt counseling)                                | 12            |
| d. Mental health services                                                                              | 9             |
| e. Substance misuse prevention                                                                         | 1             |
| f. Substance misuse treatment                                                                          | 0             |
| g. English as a Second Language (ESL) training                                                         | 0             |
| h. Assistance in enrolling into an education or job training program                                   | 3             |
| i. Research-based parenting curriculum                                                                 | 14            |
| j. Involvement in discussing their child's screening and assessment results and their child's progress | 9             |
| k. Supporting transitions between programs (i.e., EHS to HS Preschool, HS Preschool to kindergarten)   | 6             |
| l. Education on preventive medical and oral health                                                     | 4             |
| m. Education on health and developmental consequences of tobacco product use                           | 0             |
| n. Education on nutrition                                                                              | 15            |
| o. Education on postpartum care (e.g., breastfeeding support)                                          | 0             |
| p. Education on relationship/marriage                                                                  | 0             |
| q. Assistance to families of incarcerated individuals                                                  | 0             |
| C.45 Of these, the number of families who were counted in at least one of the services listed above    | 50            |

## Father engagement

|                                                                                                                          | # of father/ father figures |
|--------------------------------------------------------------------------------------------------------------------------|-----------------------------|
| C.46 Number of fathers/father figures who were engaged in the following activities during this program year:             |                             |
| a. Family assessment                                                                                                     | 1                           |
| b. Family goal setting                                                                                                   | 0                           |
| c. Involvement in child's Head Start child development experiences (e.g., home visits, parent-teacher conferences, etc.) | 14                          |
| d. Head Start program governance, such as participation in the Policy Council or policy committees                       | 1                           |
| e. Parenting education workshops                                                                                         | 0                           |

## Homelessness services

|                                                                                                     | # of families |
|-----------------------------------------------------------------------------------------------------|---------------|
| C.47 Total number of families experiencing homelessness that were served during the enrollment year | 7             |
|                                                                                                     | # of children |
| C.48 Total number of children experiencing homelessness that were served during the enrollment year | 7             |

|                                                                                                          | # of families |
|----------------------------------------------------------------------------------------------------------|---------------|
| C.49 Total number of families experiencing homelessness that acquired housing during the enrollment year | 3             |

### Foster care and child welfare

|                                                                                                                                      | # of children |
|--------------------------------------------------------------------------------------------------------------------------------------|---------------|
| C.50 Total number of enrolled children who were in foster care at any point during the program year                                  | 9             |
| C.51 Total number of enrolled children who were referred to Head Start Preschool/Early Head Start services by a child welfare agency | 4             |

### REPORTING INFORMATION

|                     |             |
|---------------------|-------------|
| PIR Report Status   | Completed   |
| Confirmation Number | 26082871042 |
| Last Update Date    | 08/28/2026  |

