

# **West River Head Start**

## **2008-2009 Community Assessment**

### **I. Introduction**

#### **A. Background Information**

HIT, Inc. is a private, non-profit agency located in Mandan, North Dakota and is the grantee for West River Head Start (WRHS). Established in 1979 by a group of parents who wanted better services for their children with disabilities, HIT, Inc. has become the 91<sup>st</sup> largest employer in North Dakota and the 23<sup>rd</sup> largest in Bismarck/Mandan. (Job Service North Dakota 2007)

All population demographic information is from the 2006 US Census Bureau unless otherwise noted. Mandan (17,449) is the largest town in Morton County and is located opposite the Missouri River from Bismarck (54,477) – the North Dakota state capital. This area is often referred to as “Bismarck/Mandan” and is the 2<sup>nd</sup> most densely populated area in North Dakota.

Morton County has the largest population base of 25,528 and is located in central North Dakota. The towns of Mandan, New Salem, Almont, Glen Ullin, Hebron and Flasher are located in Morton County. Current WRHS centers are located in Mandan, New Salem, and Hebron. According to [www.city-data.com](http://www.city-data.com), Mandan is a transportation and farm-trade center, with a large livestock market. Manufacturers include refined petroleum and construction materials.

All other parts of Morton County are rural and meet the ‘Medically Underserved Area’ criteria as established by Public Health Service Act. The remaining 8,079 residents live in approximately 1,900 square miles of Morton County, resulting in a population base of 4.25 people per square mile. WRHS provides services to all of Morton County.

Grant County is located south of Morton County and north of the Standing Rock Sioux Indian Reservation. Carson and Elgin are the towns located in Grant County and each town has a WRHS classroom. The total population of 2,615 is spread out over 1,659 square miles with a total of 1.6 people per square mile. All of Grant County

meets the 'Medically Underserved Area' criteria as established by Public Health Service Act. Agriculture, forestry, fishing, hunting and mining make up 33.5% of the employment. 20.1% of the employment is in education, health, and social services. The median age in Grant County is 49.7 years compared to ND's median age of 36.2 years.

Oliver County is located north of Morton County, south and east of Mercer County and is bordered on the east by the Missouri River. Center is the one town in Oliver County and there are no WRHS classrooms in Oliver County. Services are provided when parents transport their children to other centers in Mercer or Morton County. All of Oliver County meets the 'Medically Underserved Area' criteria as established by Public Health Service Act. Oliver County has a population of 1,813 spread out over 724 square miles with an average of 2.5 people per square mile.

Mercer County is located north of Oliver County and borders Lake Sakakawea and part of the Missouri River on its eastern-most boundary. Beulah, Hazen, Stanton, Zap, Riverdale and Pick City are located in Mercer County with one WRHS classroom each in Beulah and Hazen. The western one-third of Mercer County meets the 'Medically Underserved Area' criteria as established by Public Health Service Act. The highest median income per North Dakota county is Mercer County \$53,710 (2004) with the state median income of \$39,233. Mining, coal gasification, and energy production are the primary industries.

## **B. Agency History**

HIT, Inc. is a private, non-profit agency located in Mandan, North Dakota and is the grantee for West River Head Start (WRHS) and was established in 1979 by a group of parents who wanted better services for their children with disabilities to be located in Mandan. It was also at that time that the state of North Dakota was taken to court over the poor living and working conditions at the state developmental center. As a result of an innovative board of directors, HIT, Inc. has become North Dakota's 91<sup>st</sup> largest employer state-wide and ranks 23<sup>rd</sup> in Bismarck-Mandan. (Job Service North Dakota 2007)

HIT, Inc.'s mission statement is: "HIT supports people with disabilities through self-directed services that promote independence, dignity and respect". There are a total of seven programs administered by HIT, Inc. Three programs under HIT serve

individuals with brain injuries; two programs serve individuals with disabilities in residential settings – group homes and Independent Supported Living Arrangements which includes adult foster care for individuals with developmental disabilities; Day Supports serves adults with disabilities to provide personalized program achievement based on the individuals goals including employment services, and transitional programs for high school students utilizing an Individualized Education Plan (IEP) or a 504 plan. Additional program specific information is available on the World Wide Web at [www.hitinc.org](http://www.hitinc.org).

### **C. West River Head Start History**

1983 – 1986: Mandan Head Start was established as a home-based option through Community Action Partnership. They served 42 families in Morton County but only served families in Mandan and New Salem. CAP relinquished the Head Start grant to the Mandan Public Schools.

1986 – 1990: The grantee of Mandan Head Start was transferred to the Mandan Public School and they established 3 classrooms to serve the 42 children and families. Mandan Public School relinquished the grant due to a conflict of interest between Head Start senior administration and the Mandan Public School administration.

1990 – Present: HIT, Inc. became the grantee. Due to the increased need of services the Head Start program increased from three to five classrooms without additional dollars. From 1993 until 1997, Mandan Area Head Start remained at six classrooms, five in Mandan and one in New Salem. Five of the classrooms continue to hold a morning session only and one classroom in Mandan holds both a morning and afternoon class Monday - Friday. The program in New Salem started out in the City Auditorium and then moved to a new location on Main Ave. We were funded to serve 120 children and their families. In the middle of the year the number of children and families to be served was changed to 100. This change had no impact on our grant monies. The program employed 20 staff.

*My daughter loves Head Start. The other kids and the teachers have helped her social skills more than I expected. I am pleased. She has grown in so many ways and the teachers pass on anything we might need to know and are very good with her.*

– Carson parent

On March 26, 1998, HIT, Inc. Board of Directors approved the name change to West River Head Start which provided the program the opportunity to be more easily recognized as a “local” program in the rural areas. “West River” is a common name for services, agencies, and businesses on the west side of the Missouri River. On June 1, 1998, two new classrooms were opened-one in Elgin and one in Carson. Each classroom has 17 children, now serving 134 children and families.

In 2000, West River Head Start expanded in currently served areas to open the Hebron center to serve western Morton County with the classroom located in the Hebron Public School. Four staff were hired increasing services to 152 children and families with five centers and nine classrooms.

In 2003 West River Head Start expanded once again to Mercer County to serve 16 children. Two sites were opened due to the political climate of Beulah vs. Hazen which are the two main population sites in Mercer County. Five staff were hired and WRHS now serves 168 children and families, in 11 classrooms and 7 centers spread out over 5,354 square miles.

2006-2007 For the first time in West River Head Start’s history, funding was cut by 1%. A budget committee was formed that consisted of representatives of staff, Policy Council, HIT Board of Directors, HIT fiscal and executive directors, and the WRHS director. The impact on the program was the loss of all year-round Head Start classrooms.

Since 2002, West River Head Start has experienced a real budget cut of over 11% (\$148,451.27) when compared with the rate of inflation (based on the Consumer Price Index) to the actual increases (or cuts) in Head Start budgets. The following chart information was gathered from the US Department of Labor and the Office of Head Start:

	<b>Consumer Price Index</b>	<b>Cost of Living Adjustment</b>	<b>Difference</b>
2002	1.14	2.60	1.46
2003	2.6	1.50	-1.1
2004	1.93	1.60	-0.33
2005	2.97	1.00	-1.97
2006	3.99	-1.00	-4.99
2007	2.08	1.50	-0.58
2008	4.28	0.00	-4.28
<b>TOTALS</b>	<b>18.99</b>	<b>7.20</b>	<b>-11.79</b>

Medical insurance premium costs to the Head Start Continuation grant have been held constant while the increased cost has been passed onto staff while also increasing the insurance deductible.

To meet the required 1% budget cut in 2006, cuts in services were made by cutting the full day, year-round services and provided only 9-month services. Three teaching staff were hired to provide full-day (7:00 a.m. to 6:00 p.m.) with a teacher being in the classroom for 8 hours of the day while one teacher assistant came in the morning from 7:00 – 2:30, and then the second teaching staff came in from 11:00 a.m. to 6:30 p.m. Transportation was provided when staff were all present. The time when 3 staff were in the classroom was used to allow time for communication, limited paperwork, transition for the children to different staff, etc. Whenever a teaching staff resigned, the position was not filled with the result being that two staff did the work of three staff and yet maintained the same quality service, unfortunately not being able to meet the needs of the working parents. The money not used to re-hire staff is used to off-set the increased costs of rent (in New Salem), utilities, fuel, food, transportation, etc.

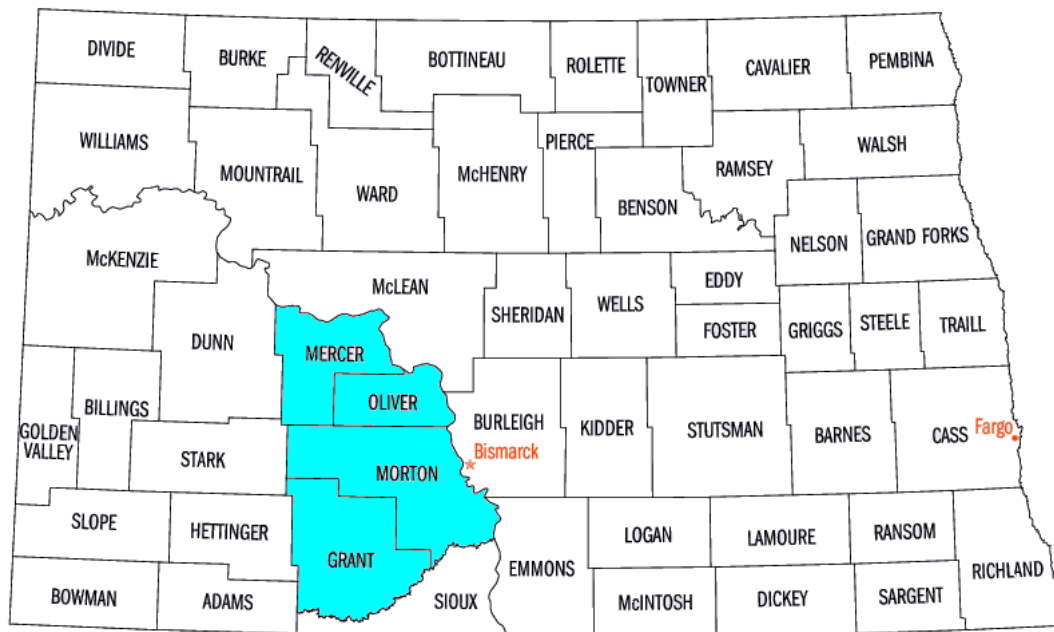
#### **D. Overview of Community Assessment Process**

In February 2008 Booz-Allen-Hamilton (Region VIII TAN) provided Community Assessment (CA) training. Three WRHS staff attended and the entire process and format for the CA was revised. This year, the three staff divided up areas of the CA into social services, education and health/nutrition. Then one staff person researched data about an additional area of demographics, other child development services, and disabilities services and information. Two weeks later, the data was reviewed with a focus on why are the statistics important and then what impact do the statistics have on WRHS. Gaps in statistics were reviewed and more research was completed. This process continued until a final product was presented to WRHS Policy Council and the HIT Board of Directors.

Some processes from previous years were kept in place including the completion of a Parent's Program Option Survey to gather information on options requested. A total of 168 survey forms were distributed to families and filled out during home visits, during Family Night (Parent Committee meeting), or returned to the classroom. 101 of

the 168 surveys were returned for a response rate of 60% which we consider excellent. Community partner specific information was gathered from Right Tracks (Child Find), Infant Development (Part B), Preschool Special Needs (Part C) and Morton County Housing Authority. Additional statistics were gathered from the US Census Bureau, Kids Count!, North Dakota Department of Public Instruction, Job Service North Dakota, and other sources as identified throughout this document. Statistics were gathered about individual towns (when available), counties (Grant, Morton, Mercer, Oliver), North Dakota and if needed, nation-wide.

### **E. Service Area Map**

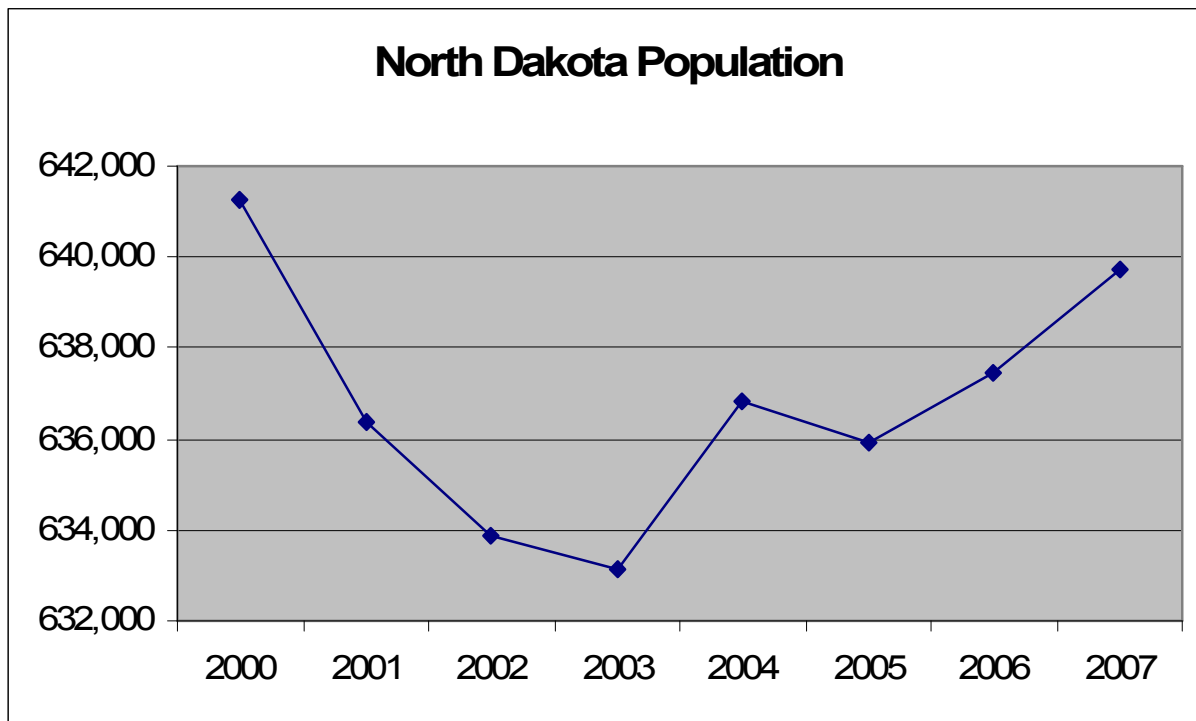


## **II. Data – External and Internal**

### **A. Demographics**

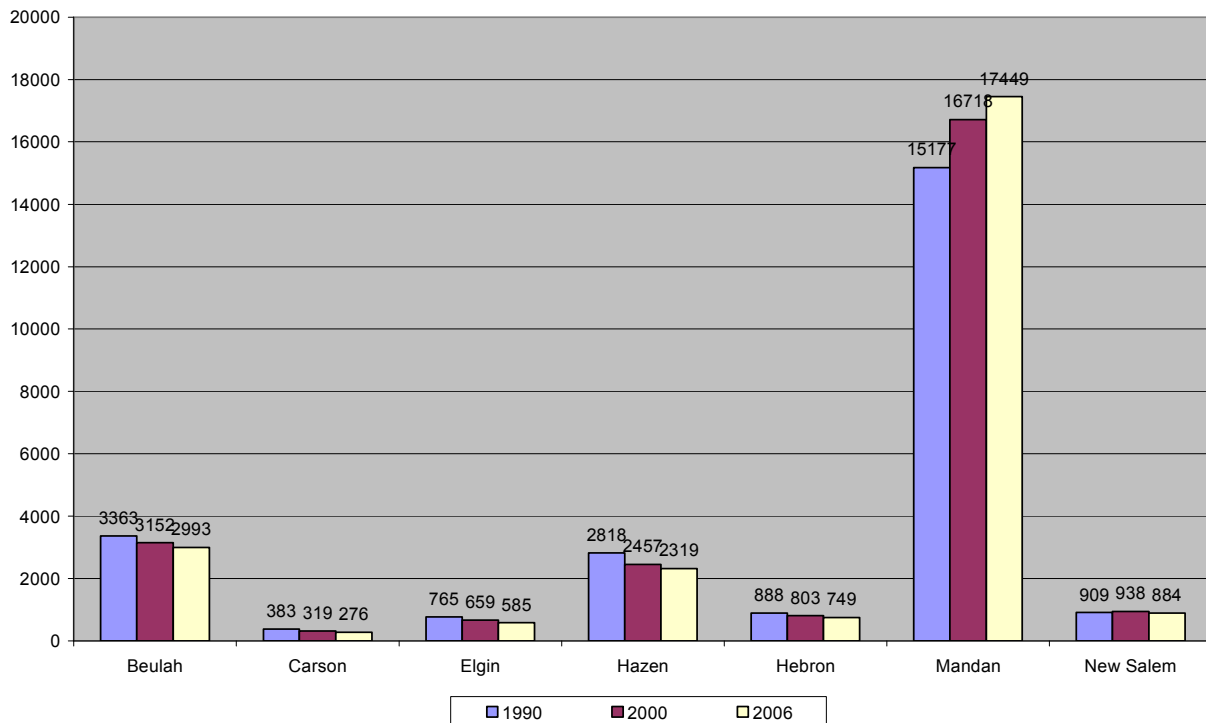
Population: To visualize the ruralness of the state and the population density in relation to land area, the whole state of North Dakota contains the population base (639,715) of a city about the size of Spokane, Washington and land area that encompasses 68,976 square miles. Using the 2006 US Census figures for a comparison to highly populous states, North Dakota had 68,976 square miles and a population of 639,715 for a ratio of 9 persons per square mile; California has 155,959 square miles and a population of 36,553,215 for a ratio of 234 persons per square mile, and lastly New York had 47,214 square miles and a population of 19,297,729 for a ratio of 408 persons per square mile.

North Dakota has had a population high in 2000 with 641,236 and a low in 2003 of 633,159. The increase in population since 2003 has been an increase in births on the Native American Reservations and economic development in the four major North Dakota cities of Bismarck, Fargo, Grand Forks and Minot. The United States has had an overall population increase of 7.2% while North Dakota had an overall decrease of minus 0.4% during that same time period.



While the state’s population has been declining since 1960, the proportion of children is decreasing and that of the elderly is increasing. According to the North Dakota Kids Count! 2005 statistics, the median age in the United States is 36.4; North Dakota - 38.3 years; Grant County – 49.7; Mercer County – 45.0; Morton County – 40.4; Oliver – 47.7. For children in rural areas this trend results in a reduction of already sparsely available services. The aging of North Dakota’s population is referred to as the “Graying of North Dakota”. One of North Dakota’s exports is the college-educated young people of child-bearing years. It is especially evident in Grant, Mercer and Oliver Counties. Though statistics are not available for Mandan’s median age, it is an observation that communities in rural Morton County are older than those in Mandan.

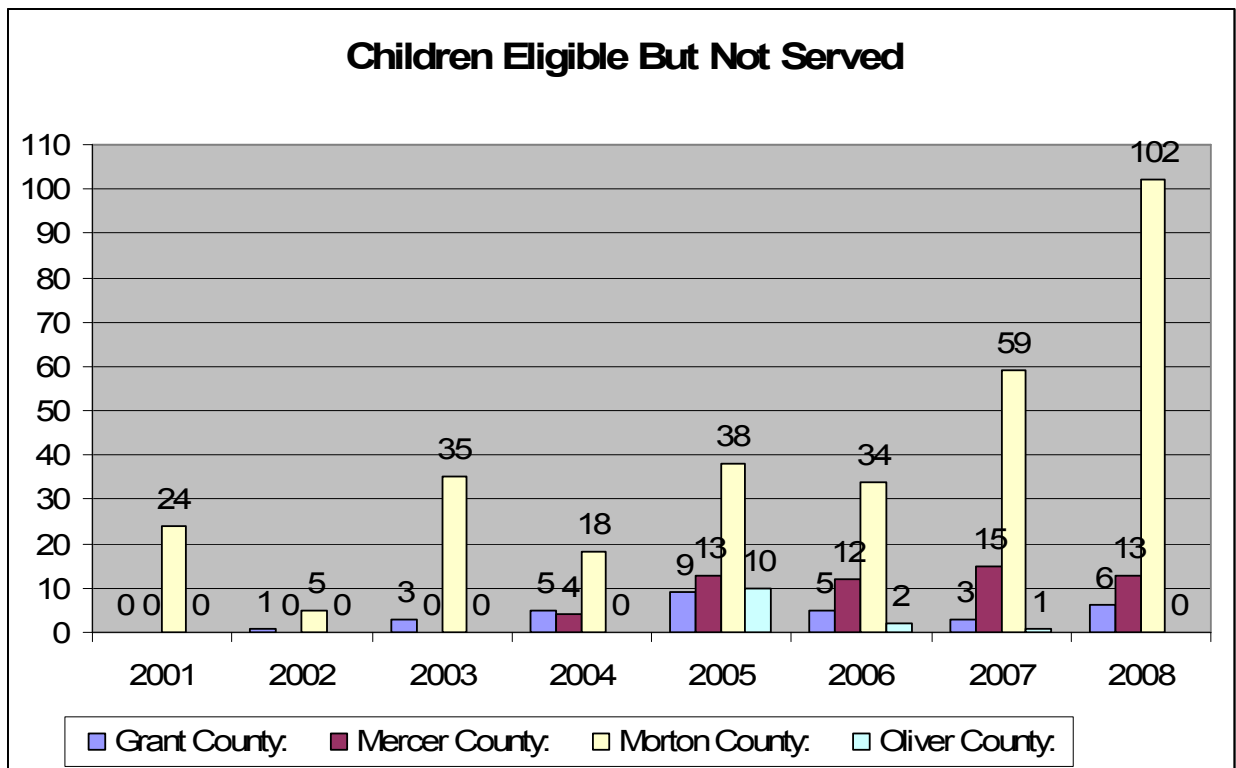
Population



Even through the population of Grant County is decreasing; there is a change in some cultural aspects. In January 2005 a family group working as farm laborers of Hutterite ethnicity moved into Grant County resulting in a temporary increase of 29 people in Grant County. Only one child is age-eligible for Head Start on the Hutterite Colony as of March 1, 2008.

Farm families that in spring 2007 were making \$4.00 for a bushel of wheat compared to Spring 2008 a bushel of wheat is \$14 (had a high of \$20/bushel in January 2008.) The price of corn is \$5.00/bushel which is up from \$2.00/bushel two years ago. The increase in payment for crops has brought farm families income levels out of qualification for WRHS services. However, the increase in fuel-associated costs decreased the profits. The impact is that increased crop production cost off-sets the profitability for struggling farm families. When the income is high on paper their family no longer qualifies for assistance yet their profit margin is so low that they still live in poverty.

The following chart shows the number of children in each county that are eligible for Head Start but are not served as of ND Kids Count (2007)



Grant County (Carson & Elgin centers) was established in 1998 to serve 34 children. In 2001 31 children were served and the population had declined to the point where the lowest number served by Grant County was 20 in 2006. In 2007 the kindergarten classes in Grant County were 3 days a week and only part year; WRHS was able to serve kindergarten-aged children and the number served increased to 31. September 2007 both Elgin and Carson offered full-day, full-year (school year)

kindergarten so those children were no longer able to be served by WRHS. In 2008, there were 25 children served in Grant County.

While Grant, Mercer and Oliver County's population is declining, Mandan's population (represented in Morton County) is increasing due to job opportunities in the Bismarck/Mandan area. The number of children on the WRHS waiting list for the Mandan center is increasing while the number of children available to serve in the rural communities is decreasing. The price of gas is affecting the New Salem center (23 miles from Mandan) as it is considered to be a bedroom community but mostly based on the price of gas. When the cost of gas is lower, the population of New Salem increases because housing is less expensive in New Salem. When the price of gas is higher, the population decreases because the cost of gas off-sets the cost of housing that would be saved by living in New Salem.

Staffing Challenges: Low pay and maintaining an appealing benefit package is becoming more difficult as WRHS's cost of living adjustments are not keeping up with the rate of inflation. Family Support Coordinators with a Bachelor Degree start at an annual salary of \$23,837 (working 40 hours per week, 10 months per school year). Teachers with a Bachelor Degree start at an annual salary of \$20,900 (40 hours per week, 38 weeks per year). Paraprofessionals (teacher assistants with a Bachelor Degree) start at \$11.03/hour for a total annual salary of \$16,765.60. This same paraprofessional has the qualifications of a teacher and can start at the Mandan Public School at \$27,400. WRHS teacher assistants with a high school degree start at \$6.55 per hour and work 40 hours per week for 38 weeks per year for a total annual salary of \$9,956. The Personnel Costs in the Continuation Grant Budget is \$770,073 and Fringe Benefits are an additional \$259,158 for a combined total of \$1,029,231 of the total \$1,349,557 federal budget.

Staff turnover has been high the past 12 months due to WRHS not being able to provide Cost-of-Living increases that keep pace with inflation (see chart on page 6). In August 2007, WRHS lost one employee to a rural elementary school as a principal.

*Malisa and Barb  
are great  
teachers. They  
really care about  
the children and  
work hard for  
them to do their  
best. I'm  
thankful I got to  
know them.  
They are a  
blessing to my  
child.  
– Beulah parent*

Three teacher-qualified paraprofessionals were hired by the local public schools in December 2007. One Family Support Coordinator moved onto a 40-hours per week, 52 weeks per year with less driving to and from her new job. Two teacher assistants in Hazen started and left because the job wasn't what they expected. The two top interviewees for the Hazen teacher assistant position refused the job due to the low pay. Interviewees for starting positions as teacher assistants with only a high school degree ask for \$10.00 to \$11.00 per hour starting wage. They can get that pay equivalency at the local McDonalds.

Two of the positions that were vacated due to resignations had to be opened twice during the 2007-2008 school year due to no applicants applying for the positions the first time. Once the pay is discussed, people are no longer interested in the work due to not paying a living wage.

In April 2008 WRHS had three additional resignations. One Mentor/Coach is going to be a preschool special needs teacher for the Mandan Public Schools. One teacher is going to retire from teaching but has agreed to stay on part-time with WRHS as a substitute teacher. One teacher assistant is working in the Beulah Public School as a janitor with less paperwork, more pay, and more time available to spend with her family.

The population decrease impact on WRHS is the lack of early childhood educated teaching staff available in the outer lying centers due to the decreasing population of Grant, Mercer, and rural Morton County (not including Mandan.) In Mandan, WRHS competes with the Bismarck and Mandan Public School teachers salaries. In April 2008, a Mandan Public School teacher starting with a Bachelor Degree makes \$27,400 and as of August 2008 a new teacher will earn \$28,440. That same teacher with the same degree would earn \$20,596 at West River Head Start.

Race/Ethnicity: The racial/ethnic data collected in September 2007 for the North Dakota Department of Public Instruction – Child Nutrition and Food Distribution Programs is as follows:

**Estimate of racial/ethnic makeup of potential beneficiaries in area served:**

County:	% of Native American	% of African American	% of Native Hawaiian	% of Asian*	% of Hispanic	% of White	Bi-Racial Multi-Racial
Grant	3.1%	0.0%	1.0%	0.0%	1.5%	94.9%	1.0%
Oliver	4.3%	0.3%	0.5%	0.0%	0.6%	94.4%	0.5%
Mercer	3.8%	0.5%	1.9%	0.0%	0.4%	93.0%	1.4%
Morton	5.0%	0.5%	0.5%	0.0%	0.6%	91.5%	2.6%
	4.05%	0.30%	0.97%	0.00%	0.78%	93.45%	1.36%

**Report the racial/ethnic makeup of actual beneficiaries served in CACFP:**

WRHS	7.00%	1.00%	0.00%	0.00%	2.00%	87.00%	3.00%
------	-------	-------	-------	-------	-------	--------	-------

Asian and Hawaiian statistics are combined in the previous chart. WRHS serves a proportionate number of children according to race/ethnicity when compared to the percentage within the communities.

**B. Child Development Services and Child Care**

The lack of sufficient, quality child care is also an issue for all four counties. 85% of North Dakota children under age 6 live with working parents, compared to 66% nationally (Kids Count! 2007). Information for the following table was taken from North Dakota Kids Count! 2007 and CCR&R 2006 Annual Report on Child Care.

Child Care	Grant County	Mercer County	Morton County	Oliver County
% needing child care	79%	68%	84%	73%
# of Providers	2	11	55	1
# Capacity	25	163	592	18
# Children 0-5	94	413	1,735	99
# children needing child care	49	118	865	54

There is a significant need for services for infants and toddlers in the four county area. Even though Right Tracks is increasing identification of the children earlier, there are no high-quality services for infants and toddlers. According to the 2006 North Dakota Child Care Resource & Referral annual report, the quality of child care in North Dakota is consistent with the national data. 8% of infant toddler programs rated high

enough to protect health and safety and support children’s learning and development. 52% of infant-toddler programs were rated as mediocre with children’s basic health and safety needs met; a little warmth and support is provided by adults; there are few learning experiences. 40% of infant-toddler programs were judged inadequate with basic health and safety needs not met; no warmth or support from adults is observed; no learning is encouraged.

The average family spends between 10%-12% of their income on child care for one infant in North Dakota. According to a 2003 Urban Institute report, families in the U.S. with a child under 13 spend an average of 9% of their earnings on child care. This proportion increases significantly for U.S. low-income families (14%) and poor families (18%). According to the analysis, even with free help from a relative or participation in a subsidized program, child care is a significant burden for low-income working families, probably ranking third in their budgets after shelter and food.

The ruralness of North Dakota and sparse population provides for few job opportunities and even more difficulty in finding adequate child care (licensed or registered).

*Head Start and its parents would benefit a great deal if we had Early Head Start Program. We would need a larger center with the equipment needed to service ages 0-5.*

– WRHS staff comment

### **C. Children with Disabilities**

Despite the declining enrollments in North Dakota schools, special education enrollments increased numerically as well as proportionally. In 1996-1997, 12,985 children were enrolled in special education, representing 11% of total public school enrollment in the state. By 2002-2003, special education enrollment increased to 13,901 or 13.4% of total enrollment. During the 2006-2007 school year, 13,825 children were enrolled in special education services or 13.8% of total enrollment; an increase of 0.4%. An increase in numbers of children with identified disabilities impacts time teachers spend in meetings, doing additional preparation work to adapt lesson plans to meet the individual needs of children and the need to work with specialists

(occupational therapists, physical therapists, behavioral therapists, speech/language therapists, etc.).

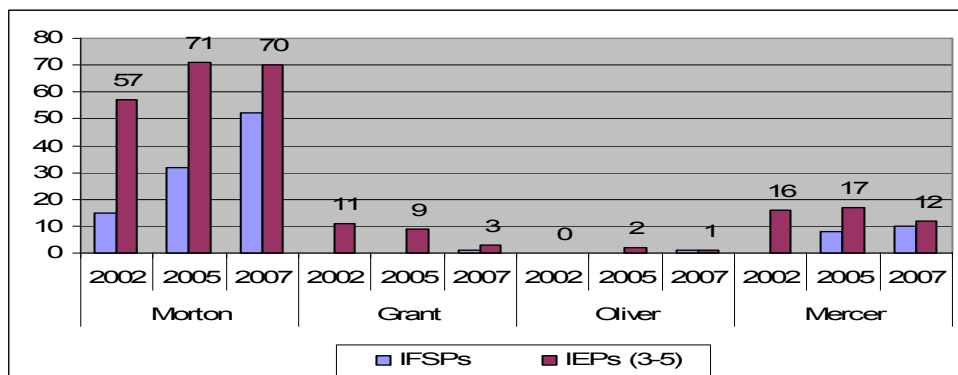
Children with identified disabilities are among the population of children at risk. Bismarck Early Childhood Education Program (BECEP) provides early intervention services for infants and toddlers with identified disabilities (Part C) and Right Tracks (ND Child Find for Infants and Toddlers) in all four counties served by WRHS. According to BECEP as of February 2008, Morton County has fifty-two (52) infants and toddlers with identified disabilities; Mercer County has ten (10); Grant County has one (1); Oliver County has one (1).

In the Part B (Public School – age 3 through 21) Special Education Units have a total of 86 children enrolled in their 3-5 program which is down from 2005 when there were 99: Oliver - Mercer Special Education Counties – 13; Morton-Sioux Special Education – 70; Southwest Special Education (Grant County) – 3. Through the thorough developmental screening process

children with disabilities will be identified earlier. Sixty-four (64) children with developmental disabilities in the Early Intervention program (0 – 2) years) compared to eighty-six (86) in the Preschool age group (3 – 5) is a significant difference that is indicating that Right Tracks is working through earlier identification of children with disabilities. The following chart provides a trend and comparison of children on Individualized Family Support Plans (Part C) compared to Individualized Education Plans (Part B).

*I think this program (WRHS) and the teachers at the centers are wonderful. I would not change a thing. I have 2 kids in Head Start and I have seen a lot of improvements in my children. All my children have been in Head Start. I have 4 kids.*

– Elgin parent



Child Find is interrelated with Head Start services to children and families in the communities. North Dakota's Right Tracks program is designed to provide the Child Find services for children from birth to age 3. According to Jody Huber, Right Track Coordinator, from January 1, 2004 to March 31, 2005, Morton County has visited 268 children with a total of 1163 home visits; Oliver County has 7 children with 14 home visits; Grant County has 3 children with 7 home visits; and Mercer County has 66 children with 141 home visits. During 2007, the following number of home visits made by Right Tracks is as follows: Grant County – 7 of 37; Mercer County – 78 of 202; Morton County 292 of 1024; Oliver County – 10 of 36. There was an increase of children located in the counties due to the program having been around for three or more years and also an increase in visits made in each county.

Right Track home visits are the primary referral source for infants and toddlers that identify children with disabilities earlier to prevent more severe disabilities. According to the Right Track coordinator, the numbers of children identified increased and then ND Department of Human Services cut funding to Region VII due to the large numbers of children found and tracked. More monies were given to North Dakota Regions with lower numbers in order to locate and identify more children in those regions.

According to the enrollment data for 2007-2008 West River Head Start began the school year on September 10<sup>th</sup> with 22 of 168 (13%) children enrolled with identified disabilities. By March 24, 2008, 44 (26%) children were identified with disabilities. Two of the 168 children "tested out" of special education services and no longer qualify for services. At some point during the school year, six (6) children with identified disabilities were dismissed from WRHS. The ability to find and identify children with disabilities is an enormous tribute to the collaboration between WRHS and the three special education units in the four counties and it also is an indicator of the expert skills and knowledge of the WRHS teaching staff.

The implication for children and their families is that high-risk families with children are in need of supports that can enhance their capacity to function in the context of their community networks. These programs must begin when the children are young and when parents are significantly involved. West River Head Start has a

proven track record of assisting agencies and organizations to identify children in poverty, children with disabilities, and to help families get out of poverty.

#### **D. Education**

90% (269) of the parents with children enrolled in WRHS have at least a high school degree. 28% (83) have at least an Associate of Arts degree or higher education. 30% (91) are either in college or have some college courses. Parents in the Mandan center tended to have lower rates of high school completion than those in the rural areas.

College opportunities are available in North Dakota but the tuition has increased over the past year by 7%. As more on-line classes are available, time management tends to be the issue for those attempting to maintain a full-time job (and sometimes also a part-time additional job), managing a household and family, and attending college classes. This has an even greater impact on WRHS staff as the Head Start Act of 2007 has mandated increased educational requirements for all teaching staff.

North Dakota's high school graduation rate is 98% as of 2005-2006. Grant County had 0 (zero) dropouts resulting in 100% high school graduation rates; Mercer County had 8 (eight) dropouts for a 98.61% graduation rate; Morton County had 43 (forty-three) dropouts for a 97.09% graduation rate; and Oliver County had 0 (zero) dropouts resulting in a 100% graduation rate. West River Head Start has 30 parents without a high school degree resulting in 11.15% not having a degree. Even Start is a community partner that is located in Bismarck and serves all of Morton County. WRHS staff refer parents to Even Start, the Even Start staff provide information during Parent Orientation at the Mandan center, and the WRHS Director is on the Even Start Board. The Even Start program has also experienced funding cuts and has had to limit their outreach to assist people without high school degrees.

*I think the Head Start program is an essential program for our community. Our children need this to help them develop strong skills early in life.*

– Mandan parent

The 2007 North Dakota legislators approved state funding for full-day, full-year (school year) kindergarten to school districts starting in the 2008-2009 school year. The implementation of full-day kindergarten has affected WRHS in several ways. The

biggest impact was the hiring of three (3) qualified Early Childhood Education teachers who were working as paraprofessionals at WRHS. The pay is significantly higher and the paperwork is significantly lower. Another impact is that both Elgin/New Leipzig and Carson Public Schools went from every-other-day kindergarten and began full-day/full-year kindergarten starting in August 2007. The children that were Head Start eligible were no longer attending Head Start which dropped Grant County. North Dakota is one of the few states that do not have mandatory kindergarten.

### **E. Health and Nutrition**

All of Grant and Oliver Counties, all of Morton county except Mandan, and the western half of Mercer County are Medically Underserved Areas. All of the four county areas except Mandan, are both Primary Care Health Professional Shortage Areas; and Health Professional Shortage Areas Rural Hospitals, Clinics, CHCs and RHCs. Mercer, Oliver and Grant County are Mental Health Professional Shortage Areas. Grant County is a Dental Health Professional Shortage Area. (Refer to maps in Appendix \_\_\_)

1 in 5 children nation wide are obese. According to Trust for America's Health, North Dakota is the 18<sup>th</sup> heaviest in the country. However, WRHS statistics show that 1 in 15 enrolled children are overweight (11 of 168) and 1 in 15 children are underweight (11 of 168). Due to the epidemic problem across North Dakota, WRHS will address the need for nutrition education and enhance experiences for children and families. In March 2008, WRHS sent four staff to "I Am Moving, I Am Learning" train-the-trainer institute and the staff will work with the rest of the staff, parents, and children to promote movement in their day-to-day activities. Behavior patterns such as being physically active, eating a well-balanced diet, maintaining a healthy weight and abstaining from tobacco use are developed during the adolescent years and have lifelong significance.

MedCenter One Health Systems, a major healthcare provider in western North Dakota, announced that it was pulling out of its rural clinics in seven communities. Center, New Salem, Hebron, and Elgin are the four communities within the currently defined area that WRHS serves where this major healthcare provider has stopped providing services. The towns have worked together to become part of the North Dakota Rural Health Coalition, which includes clinics in western and southwestern North Dakota and makes it more affordable for them to keep running.

Jacobson Memorial Hospital in Elgin took over the Elgin and Hebron clinics in September 2003. The two clinics share a nurse practitioner, family doctor, internal medicine physician and physician assistant. New Salem's clinic was shut down in 2006 due to a combination of lack of funding and staffing capabilities. On July 1, 2008 the Hebron Clinic will be closing due to losing money in their operating budget. There are clinics located in Richardton (15 miles west of Hebron) and also in Glen Ullin (10 miles east of Hebron).

Hazen, Beulah, and Mandan have eye doctors that provide services five days a week. Glen Ullin and Elgin have satellite clinics that are open two days per week. New Salem, Hebron, and Carson have no eye clinics.

TANF recipients are not able to obtain dental care because many dentists will no longer accept new patients on Medical Assistance. They must also wait for mental health services, unless the situation is perceived as a crisis. Medical, dental, mental health and preventive health services are difficult to access in the rural areas. "Bridging the Dental Gap" is a newly established facility to assist people with limited income in the Bismarck/Mandan area. At this time, no services are provided to the people outside of a 50-mile radius of Bismarck. It is anticipated that once the dentists and hygienists are able to reduce their workload, the distance will be increased.

Beulah had a dentist until 2006 when one morning the clinic was shut down and the dentist had left town. Hazen, Hebron and Elgin each have a dentist while Mandan has three dentists. The challenge is that the dentists do not take patients on Medicaid. During the North Dakota Oral Health Symposium in

October 2007, Dr. Mike Goebel, Pediatric DDS from Bismarck, stated that his missionary work is not done in third world countries, but rather right here in North Dakota. He further added that the children in North Dakota are going too long without proper dental care, parents can't afford the cost, and the long term implications are overwhelming for our children's future. Dr. Lana Schleicht, president of the North Dakota Dental Association, stated that dentists are reluctant to take additional patients with Medicaid due to the low reimbursement rates, limits on procedures that can be

*102.84% of WRHS children completed dental exams and 79.07% needing dental treatment received it.*  
– 2007 Head Start PIR data

performed and that often times these limits are not considered to be best practice. One example she provided was that a patient came in and needed a root canal and crown for a tooth. Because the patient was covered by Medicaid, only extraction of the tooth was covered. Instead, she did the root canal and provided a crown for the patient. Dr. Schleicht stated that she couldn't pay her employees, pay the rent, or other costs associated with operating a dental office if she continued to cover the costs of patient's dental needs.

Registered Nurses and Licensed Practical Nurses are now allowed to apply Fluoride Varnish to children's teeth. The North Dakota Department of Health is working with nurses state-wide to provide training on the appropriate application processes. Data will be maintained to be compiled at the Dept. of Health in order to show if applying fluoride varnish is a cost-effective means to prevent tooth decay.

North Dakota's Healthy Steps (State Children's Health Insurance Plan SCHIP) covers children up to 140% of the federal poverty level (2008 - family of four income of \$29,680). The 2007 Biennium Legislators denied covering families earning up to 200% of the federal poverty level (\$42,400) due to not wanting to commit the North Dakota General Funds to insurance. On Thursday, March 20, 2008 The Bismarck Tribune headlines reads: "N.D. surplus persists: Expected to be \$600 million or more in midst of national downturn." The article goes on to explain that \$600 million is the conservative surplus and some expect that the surplus will be up to \$800 million based on the price of oil revenue.

The lack of willingness to support the neediest of the needy North Dakota citizens impacts our children directly. WRHS has seven children who are uninsured due to the parents holding jobs where insurance is not provided as a benefit, yet they make "too much" for SCHIP. WRHS Family Support Coordinators work with parents to enroll their children in Healthy Steps, The Caring Program, etc.

Even though Mental Health Professional Shortage areas are designated in Mercer, Oliver, and Grant Counties, Morton County, too, has a shortage of Mental Health Professionals. WRHS contracts with a mental health consultant from Dickinson (Stark County) to provide three classroom visits per year. Bismarck (Burleigh County) has mental health consultants in the Human Service Center and also at both of the

hospitals (MedCenter One and St. Alexius). However, they often have openings for the mental health consultant positions and when they do have staff, they are backlogged with patients. The mental health consultant from Dickinson will no longer be contracting with WRHS as of September 2008 due to health problems. WRHS is currently looking to contract with a new provider for the 2008-2009 school year.

In addition to already being a designated as a Medically Underserved Area, the reduction in medical services only made access to services more challenging and difficult for our children and families.

## **F. Social Services**

Poverty is a significant environmental problem. Grant County, Oliver County, and Morton County have a disproportionately large number of young children from low-income families. The economy of the region is tied to agriculture and many farm families have near-poor incomes. Many non-farm jobs in Morton, Grant, Mercer and Oliver Counties are service related, part-time, and pay minimum wage. Minimum wages in North Dakota are increasing in the following increments and timeframes: \$5.15 until July 2007 – then increased to \$5.85; \$6.55 by July 2008; and \$7.25 by July 2009.

The concept of “living wage” is the amount it takes for a family to meet minimum monthly costs – including housing, food, and transportation but not costs like entertainment or gifts. According to the North Dakota State University Extension the 2000 estimated cost of living for a family of three is \$33,660 per year. This translates into a take-home wage of \$16.18 an hour or \$647/week. Minimum wage at \$6.55 per hour would allow a family of four (two children/two parents working – 40 hours per week, 52 weeks per year) an annual income of \$24,336; using the same scenario of \$7.25/hour - \$30,160. This is still not a living wage.

The average wage per job in North Dakota was \$27,393 in 2003; however the average wage was \$25,317 in non-metropolitan parts of the state and \$29,133 in

*North Dakota children younger than 6 have the highest poverty rates of all age groups, including the highest percentage of persons experiencing extreme poverty. – North Dakota Kids Count 2007*

metropolitan parts. North Dakota's average wage was 26% behind the national average of \$37,130 in 2003 and was the fourth lowest of all states. (North Dakota State Data Center 2003)

North Dakota's unemployment rate was low at 3.4% in 2004 according to North Dakota Job Service. However, this masks the problem of needing to work multiple jobs to make ends meet. In 2003, North Dakota had the highest proportion of multiple job holders at 9.7% (national average was 5.3% according to the North Dakota State Data Center). For many families, dual incomes are also a financial necessity.

The impact of approximately 21,000 people in North Dakota living on minimum wage jobs increases the number of working poor in our communities thereby increasing the waiting list of children to get into WRHS. For the Mandan center, there are 18 eligible children waiting, 13 pending (waiting for proof of income), and 16 over-income. However, knowing that "over income" includes the working poor, there is a need for quality preschool services for families who earn too much for Head Start eligibility, but whose families do not earn a living wage.

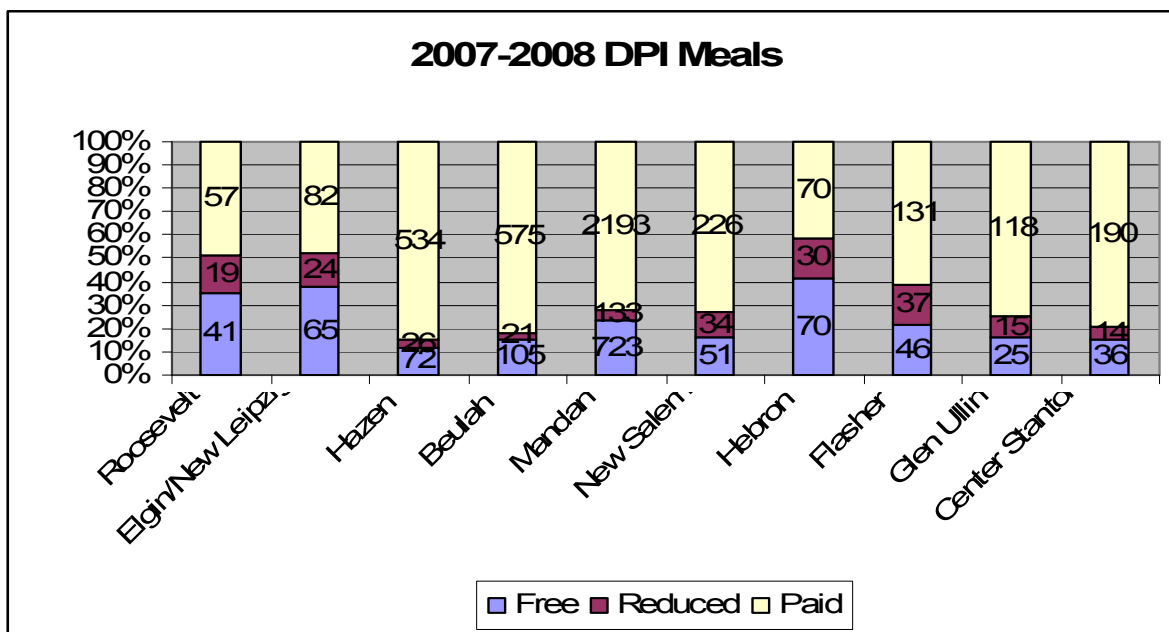
According to the Temporary Assistance for Needy Families (TANF) list on April 1, 2008, there were 50 Early Head Start age-eligible children from 40 families through out the 4 counties. There were no EHS age-eligible children from Oliver and Grant Counties, nine (9) children are from Mercer County and the remaining 41 children are from Morton County. Of the 41 children from Morton County, 38 are from Mandan, one is from New Salem, one is from Hebron, and one is from Flasher. These statistics show the need for a quality Early Head Start program – especially in Morton and Mercer Counties.

Poverty in North Dakota falls disproportionately on the backs of the children. They are the poorest of all groups. The poverty rate for children under five in Grant County is 25.98% (33); Morton 11.25% (181); Mercer 12.07% (46) and Oliver 19.61% (20); the state rate is 17.56% (6,784) (Kids Count! 2007).

One in four children was still poor or near poor at the end of the decade in North Dakota. In addition, these positive statewide trends are not reflective of all populations within the state. Certain segments in North Dakota's population are harder hit by poverty than others. According to Census 2000, 38.7% of non-white children in North

Dakota lived in poverty (7,345 children). 44% of children living with single mothers lived in poverty (10,737 children). In addition, 40.3% of children living on American Indian reservations in North Dakota lived in poverty (5,426 children). Morton, Grant and Mercer counties border American Indian reservations. WRHS serves children who are enrolled members of the Standing Rock Sioux Tribe and the children are eligible for Indian Health Services (IHS). Some families choose to use IHS, but most receive health services in Bismarck/Mandan.

The following chart equates the numbers to percentage of free, reduced and paid meals according to the North Dakota Department of Public Instruction Child and Adult Care Food Program 2007-2008 statistics.



The actual numbers are provided as values for the 10 public school district served by WRHS. Three (3) schools have more than or equal to 50% free and reduced meals for the children. In 2005, there were only two (2) schools that had at or above 50% qualifying for free or reduced meals. Three (3) schools – Hazen, Center, and Beulah have the lowest percentages of free and reduced meals at 15.5%, 20.8%, and 18.0% respectively. The remaining schools have between 25.3% and 38.8% of the students qualifying for free and reduced priced meals. One (1) out of three (3) of school aged children (32%) qualify for free or reduced meals. The accuracy of these numbers may not be accurate due to pride and not wanting the local schools to know their

family's income level. Because proof of income is not necessary, some families may put more income on the forms than they actually make just so they aren't embarrassed.

Crime: While the overall number of children in North Dakota has declined over the past several years, reports of child victims have risen. According to ND Kids Count! 2007, the number of children directly impacted by incidents of domestic violence reported to crisis intervention centers in North Dakota is 3,799. However, the number of suspected victims of child abuse and neglect is 6,743.

The 2005-2006 Children and Family Services Statistical Bulletin – Child Abuse and Neglect report for Region VII indicates that the number of child abuse and neglect full assessments that were completed has steadily declined since 2001 when there were 252. In 2002 – 231; 2003 – 228; 2004 – 210; 2005 – 193; and 2006- 189 full assessments were completed. Though the number of reports is up and the full assessments are decreasing it is probable that people are more aware of child abuse and neglect and the community is being more responsible to report. According to the Centers for Disease Control and Prevention study conducted from Oct. 1, 2005 to Sept. 30, 2006 about 1 in 50 infants in the United States are victims of nonfatal child neglect or abuse. The study indicates that most of the cases involved neglect defined as a failure to meet a child's basic needs, including housing, clothing, feeding and access to medical care.

Knowing that many times child abuse and neglect often times goes unreported, WRHS provides training to parents on preventing child abuse at Parent Orientation and again at Family Nights (Parent Committee meetings). Staff will be receiving an intensive training from Prevent Child Abuse North Dakota at a pre-school in-service in August 2008.

According to the North Dakota Law Enforcement Agency Uniform Crime Report in 2005 the number of violent crimes reported by Mercer County, Hazen Police, Beulah Police, and Grant County has remained statistically low. The Morton County and Mandan Police reports show an increase in total violent crime which could be contributed to the increase in population in Morton County and specifically Mandan. In 2005, Morton County and Mandan Police had a total of 46 violent crimes while the other four law enforcement agencies reported a total of six (6) during that same time frame.

Additional comparisons are in 2004, Morton County and Mandan Police reported a total of 34 crimes compared to a combined total of seven (7).

WRHS has developed partnerships with agencies such as the Kiwanis where uniformed officers come into the WRHS classrooms and read to the children; ambulance, fire, and police officers set up equipment for the children and families to explore during the Fall Safety Family Nights (Parent Committees as per Head Start Performance Standards); and to purposefully make available other non-threatening law-enforcement opportunities for families and children. It is WRHS's intent to provide positive interactive experiences between law enforcement officials and families.

WRHS's Mandan center experienced bus vandalism twice during the 2007-2008 school year. Observation cameras were installed on the exterior of the building and there have been no incidents of vandalism since.

Housing: Morton County Housing Authority (MCHA) provides services to all four counties served by WRHS. There are no specific low income housing units in Morton, Grant Oliver and Mercer County. MCHA provides vouchers to those who apply and qualify for housing assistance. Those individuals seeking assistance are responsible for locating a home/apartment to live. People are allowed to choose to live where their housing voucher goes further. For example if a family has a housing voucher for \$275 per month they may choose to live in a trailer/home/apartment where the rent is \$350 verses \$600 a month.

*The average  
homeless child  
in North Dakota  
is 6.6 years old.*

– Report on  
Homelessness in  
ND 2007

According to the January 25, 2007 Point-in-Time Survey of Homeless People for the State of North Dakota, there are 163 homeless people in the Bismarck/Mandan Region VII (comprised of 10 counties including Grant, Mercer, Morton and Oliver) compared to 124 in February 2005. This is a 76% increase in the number of homeless people in Region VII. The state-wide total of 655 in 2005 compared to 636 in 2007 indicates that while homelessness statewide has decreased, there is a significant increase in Region VII. Economic strife, substance abuse and mental illness are the biggest issues facing the homeless in North Dakota. More than half (56%) are unable to afford rent and nearly as many have a history of substance abuse (47%). Half (48%)

of the homeless in North Dakota have a job, which is the most common source of income among them.

The Salvation Army Shelter in Mandan closed down due to a lack of funding in June 2003. This was the only shelter that served females and their children. The Salvation Army now sends females with families to local hotel/motels for their shelter needs. Homeless shelter for males is available through the Ruth Meiers Hospitality House in Bismarck.

Affordable housing is not readily available in Mandan as is indicated by the increased number of homeless in the region. Affordable and adequate housing may be available in the rural areas but the cost of gas to drive 120 or more miles daily to and from work is not affordable so people must make the difficult choice of housing or employment.

*Spending more than 30% of household income on housing is considered unaffordable.*

– US Department of Housing & Urban Development

The Family Support Coordinators (FSC) within the WRHS system work directly with parents to help move out of poverty and housing is one indicator of financial stability. Four WRHS families have obtained housing this school year. Five families were doubled up thereby meeting the McKinney-Vento Act definition of being homeless. Financing for the families home were through a variety of means including contract for deed and bank loans.

The most recently completed Missouri Slope Area Wide United Way 2000 Community Needs Assessment Survey (includes Morton, Grant, and Oliver County information) indicates that 89% of households felt their community was a good or excellent place to live; 93% of Bismarck-Mandan residents considered the community to be a good or excellent place to live; and 81% of rural households considered their community to be a good or excellent place to live. The Community Leaders identified the top 8 problems: #1 - Public Transportation (70%); #2 - Affordable childcare (70%); #3 - Gambling intervention programs (67%); #4 - Smoking intervention for teens (67%); #5 - Youth programs in values, character, and self-esteem (67%); #6 - Services to help the uninsured (65%); #7 - After school childcare (63%); #8 - Assistance to elderly who want to stay in their homes (60%). 75% of community leaders felt the cost of services

and lack of childcare were the two most serious barriers to receiving services. 38% said there was a very serious need for services for the poor. Service Providers identified 7 top problems as: #1 – Public Transportation (53%); #2 – Affordable childcare (42%); #3 – Services to help the uninsured (41%); #4 – Ability to obtain dental care (39%); #5 – Financial Assistance; #6 – After school childcare (36%); #7 Transportation for refugees and others who cannot drive (36%). 86% of service providers felt lack of transportation was considered to be the most significant barrier to services. The second most serious barrier to services was the cost of the services (81%).

Even though the information is from 2000, the information is still relatively reflective of the communities served. WRHS will work with the United Way for their next anticipated study in 2010.

## **G. Community Resources**

West River Head Start provides the most comprehensive services available to low income families in the targeted service area. The Even Start program offers some services, but only to those living in Morton County. In addition, there are no state funded preschool programs for the working poor or for the income eligible that cannot get off the Head Start waiting lists. Optimal Pregnancy Outcome Program (OPOP), Right Tracks, Infant Development and WIC are the only programs in the community specifically designed to assist pregnant women, infants and toddlers.

Custer Health (CH) is the public health agency that serves all four counties also served by WRHS. Custer Health works with WRHS to provide physicals for all children who enter the program without a medical home. They also provide smoking cessation classes free of charge to the public. WRHS & CH work together to provide quality services to the children and families in the four counties.

The three special education units provide services to children ages 3 to 5 years. In New Salem, Carson & Elgin, the WRHS classrooms are the preschool special needs classrooms.

*My daughter absolutely loves Head Start. I am so glad she has learned so much in a small amount of time. I am also glad the Head Start people informed me of other places I could receive assistance.*

– Hebron parent

The Hebron classroom's preschool special needs case manager is the WRHS Mentor/Coach. Beulah, Hazen, and Mandan have separate preschool special needs classrooms but share speech therapy which is provided by the local special education unit.

Housing financing is available through Morton County Housing Authority, Habitat for Humanity, and housing loans through the Veterans Administration and First Time Home Owners.

Bismarck/Mandan has had public transportation since 2004. The challenge with this is that the stops are not heated and during the extreme cold winters, it's challenging to use. The cities of Beulah and Hazen have city transportation available for purchase. There is no public transportation available in the other rural areas. Each county has some transportation available to the elderly population to get to medical appointments in Bismarck/Mandan.

West River Head Start has 16 community partners who have "adopted" a family or center to provide gifts during the holiday season. Nelson Family Dentistry adopts a family each year to provide needed household items such as blankets, sheets, pillows, kitchenware, clothing, etc. The North Dakota Department of Human Services also "adopts" a family. Several agencies will put up trees with age and size information for our children to provide needed winter outerwear such as snow pants, winter coats, boots, hats, mittens, etc. Our community partners are good to our children and families – especially during the holiday season.

Parenting classes are available to the general public through the North Dakota State University Extension agency. WRHS will distribute and encourage families to attend these classes. One staff has attended the class alongside the parent when the parent was reluctant to go by herself. This is an example of the dedication of WRHS staff to the success of families.

West River Head Start Family Support Coordinators each have a partner or two where they are the point-of-contact between WRHS and that agency or program. Examples of the partners are Right Tracks, Coats for Kids, Lions Club, Kiwanis Club, Shriners, Autism Society, Barnes & Nobel, Custer Health, etc. To take this idea to the next level is to have senior management be a part of a business group or organization

that isn't necessarily dedicated to working with low-income families. One such example would be to become a member of the Area Chamber of Commerce. This would be an opportunity to bring the philosophy of West River Head Start to the business community so that they have a connection to the service realm in their communities. This in turn will develop relationships with clubs and organizations that can help shape the future of children and families in all four counties.

Parent relationships have an impact on the development of children. WRHS serves as a conduit of information for families by providing information on services within the community – such as Al-Anon, AA, car seat safety checkups, free concerts in the park, smoking cessation classes, library availability, infant massage, parenting classes, etc. Family Support Coordinators inform parents verbally an/or in writing, based on parental request or as general information through weekly, one-page WRHS “newsletter” *Tuesday Note Home*.

Each year, HIT, Inc. collects food to donate to a local food pantry. This is called “Pat’s Pantry” after a community-minded former employee who started the tradition then passed away in 2000. Each year at Thanksgiving, food is collected then distributed to places such as the Salvation Army, Grant County Food Pantry, AID, etc. There has been a reduction in food availability throughout the state and has especially impacted the smaller, more rural food pantries. The difficult choices that are affecting food pantries include elderly people struggling to pay for medication, infants who need diapers, and working people paying for gas to get to work. The Director of the Great Plains Food Bank supplies 235 agencies around the state including AID in Bismarck/Mandan.

*12.57% of WRHS families received emergency/crisis assistance and/or educational services during the 2006-2007 school year.*  
– 2007 Head Start PIR data

In order to serve more children and their families, WRHS applies for qualification to serve up to 50% over-income children in the areas that meet the Gravel Amendment of the Head Start Act. The following information is taken from the *Improving Head Start for School Readiness Act of 2007*.

The Head Start Act as amended by Public Law 110-134 (12/12/2007) describes the participation of persons in Head Start programs. Section 645 [42 USC 9840] (a) (2) of the Head Start Act (also referred to as the Gravel Amendment) states:

2. Whenever a Head Start program is operated in a community with a population of 1,000 or less individuals and –

- A. There is no other preschool program in the community;
- B. The community is located in a medically underserved area (MUA), as designated by the Secretary pursuant to section 330 (b) (3) of the Public Health Service Act and is located in a health professional shortage area, as designated by the Secretary pursuant to section 332 (a) (1) of such Act;
- C. The community is in a location which, by reason of remoteness, does not permit reasonable access to the types of services described in clauses (A) and (B); and
- D. Not less than 50% of the families to be served in the community are eligible under the eligibility criteria established by the Secretary under paragraph (1); The Head Start program in such locality shall establish the criteria for eligibility, except that no child residing in such community whose family is eligible under such eligibility criteria shall, by virtue of such project's eligibility is denied an opportunity to participate in such program. During the period beginning on the date of the enactment of the Human Services Reauthorization Act and ending on October 1, 1994, and unless specifically authorized in any statute of the United States enacted after such date of enactment, the Secretary may not make any change in the method, as in effect on April 25, 1984, of calculating income used to prescribe eligibility for the participation of persons in the Head Start programs assisted under this subchapter if such change would result in any reduction in, or exclusion from, participation of persons in any of such programs.

Pages 2 through 5 in the appendix are official maps from Public Health Service of current medically unserved areas. All families in these designated areas shall be considered meeting the eligibility guidelines.

The following table is used for determining medically underserved designation:

CITY OR TOWN	COUNTY	2000 CENSUS	MUA	PROF. SHORTAGE AREA	PRE-SCHOOL	<u>GRAVEL AMMEN CRITERIA</u>
<b>New Salem</b>	<b>Morton</b>	<b>938</b>	<b>Yes</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>
<b>Carson</b>	<b>Grant</b>	<b>383</b>	<b>Yes</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>
Mandan	Morton	16,718	No	No	Yes	No
<b>Hebron</b>	<b>Morton</b>	<b>803</b>	<b>Yes</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>
Beulah	Mercer	3,152	No	Yes	Yes	No
Hazen	Mercer	2,457	No	Yes	Yes	No
<b>Elgin</b>	<b>Grant</b>	<b>659</b>	<b>Yes</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>

Documentation of no other preschool in each of the community is on file in the Head Start director's office. The Special Education Directors and telephone directory are the two main sources of information for lack of preschools. Informally, the staff and parents are aware of any changes in the community including the addition of preschools, licensed childcare providers, etc.

The lack of services for children in our rural service area encourages WRHS to reach out to the neediest of needy families. Because so many of our rural families live on minimum wage jobs, they are often times over-income by an annual amount of \$50. WRHS will serve children and families by providing a total of 11 over-income slots to be shared by the four communities that do not meet the Gravel Amendment criteria in Mandan, Beulah and Hazen. The centers of Carson, Elgin, Hebron and New Salem may have up to 50% of the funded slots shared in order to provide exceptional services in a holistic environment to families and their children.

### **III. Trends and Implications**

While the state's population has been declining since 1960, the proportion of children is decreasing and that of the elderly is increasing. For children in rural areas this trend results in a reduction of already sparsely available services.

The population decrease impact on WRHS is the lack of early childhood educated teaching staff available in the outer lying centers due to the decreasing population of Grant, Mercer, and rural Morton County (not including Mandan.) However, the disparity of pay between the Mandan Public School teacher's pay and the WRHS teachers pay is over \$7,000 per year and the difference will raise for the 2008-2009 school year.

An increase in numbers of children with identified disabilities impacts time teachers spend in meetings, doing additional preparation work to adapt lesson plans to meet the individual needs of children and the need to work with specialists (occupational therapists, physical therapists, behavioral therapists, speech/language therapists, etc.).

Although more jobs are available in the "urban" area of Bismarck/Mandan, families in the four counties, like those throughout the state, are contending with decreased real wage and increases in poverty, the scattering of extended families, the weakening of important community bonds including the closing of churches and schools due to decreases in population in rural areas, the need for both parents to work full- or part- time to make financial ends meet, and the struggle to find quality and affordable child care.

The implication for children and their families is that high-risk families with children are in need of supports, which enhance their capacity to function in the context of their community networks. These programs must begin when the children are young and when parents are significantly involved. West River Head Start has a proven track record of assisting agencies and organizations to identify children in poverty, children with disabilities, and to help families get out of poverty.

In addition to already being a designated as a Medically Underserved Area, the reduction in medical services only made access to services more challenging and difficult for our children and families. WRHS has seven children who are uninsured due

to the lack of parents holding jobs where insurance is provided as a benefit, yet they make “too much” for SCHIP. WRHS Family Support Coordinators work with parents to enroll their children in Healthy Steps, The Caring Program, etc.

Behavior patterns such as being physically active, eating a well-balanced diet, maintaining a healthy weight and abstaining from tobacco use are developed during the adolescent years and have lifelong significance.

West River Head Start will provide quality Head Start services to 168 children in Morton, Mercer, Oliver, and Grant Counties in central North Dakota. One center with five classrooms will be in Mandan, one center with one classroom each will be in Carson, Elgin, Hebron, Beulah, Hazen and New Salem. Children will be recruited from Morton, Mercer, Oliver, and Grant Counties with limited transportation provided. All classrooms will meet Monday through Thursday in order to allow Friday as planning, training, and paperwork for staff.

*WRHS has been a great opportunity for my child to interact with other children. The teachers have been fabulous in developing the needs of my child and working with him to grow and become an avid learner.*

– Beulah parent

## **IV. Long Range Goals and Short Term Objectives**

### **2005-2008 Long Range Goals and Short Term Objectives:**

HIT, Inc., West River Head Start Grantee's mission statement is as follows: *HIT supports people with disabilities through self-directed services that promote independence, dignity and respect.* As a result of the Grantee's mission statement, the following philosophy statement was developed: *West River Head Start is dedicated to the empowerment of children, families, and staff through community partnerships in order to provide exceptional services in a holistic environment. One child and family at a time.*

As a result of the annual strategic plan, the following goals have been reviewed and slightly revised:

1. HIT will continually strive to meet customer's needs;
2. HIT will connect/bridge our customers and the community;
3. HIT will attract, retain, and motivate competent employees;
4. HIT will effectively use resources in consumer driven activities.

### **Administrative**

1. According to the 2005 Community Assessment, North Dakota's population trend is moving out of the rural areas and into the more urban areas. West River Head Start will closely monitor the population migration trends for the rural areas into the "urban" areas.
  - A. Annual population statistics will be monitored for each of the rural areas of Morton, Grant, Mercer, and Oliver Counties.
  - B. School Census information will be obtained every two years (it's updated every other June) to monitor the number of children who are Head Start age-eligible.
  - C. The maximum number of children age and income eligible will be enrolled in the rural centers of WRHS each year. The remainder of the children will be enrolled in the Mandan center.
  - D. When the population has maintained the maximum number of students in the Mandan Center, a sixth classroom will be opened and a home-based option will be explored in order to continue with services for children in the rural area.

2006-2007: *The population in each of the four counties has declined from 1990-2000 according to the 2000 Census Percent Change-Children by Center for Rural Health – UND School of Medicine and Health Sciences. Decreases are: Morton - -4.72%; Mercer -20.95%; Oliver -29.25%; Grant -29.30%. Grant County has had the biggest impact for recruiting children as the actual number of children has declined but the number of children with identified disabilities has significantly increased. Grant County*

currently has 11 of the 26 enrolled identified with a disability. Two of those 11 children are in wheelchairs. Discussion with Policy Council is in process to open recruitment and enrollment to children in kindergarten in Grant County, as only part-time kindergarten is available in each community. Compulsory school age in North Dakota is seven (7) until sixteen (16) years of age. **Kindergarten children:** Due to the population decline, lack of services and part-time kindergarten in Grant County, West River Head Start has developed a selection criterion that places kindergarten-enrolled children last. Children must be enrolled in kindergarten in order to be eligible to attend WRHS on non-kindergarten days. If children are kindergarten age-eligible and parents choose not to send their child to kindergarten, that child will not be eligible to attend Head Start on kindergarten's off days. It is West River Head Start's practice that children are enrolled in programs with their peers and not to supplant kindergarten.

**2007-2008:** In addition to declining populations in Grant County, the very western-most part of Morton County (Hebron's recruitment area) population has also declined. Young families are moving to the "oil country" which is western and northwestern North Dakota. After interviews with parents of children who attended kindergarten and also Head Start on non-kindergarten days, the request was to continue to provide the "best of both worlds" for the children in rural Grant County. Five families in Grant County have utilized the dual placement. It's a success and it works for the children, families, WRHS, and public school systems. 14 of the 32 children enrolled have been identified with a disability. It is proposed that WRHS will continue to make this option available to kindergarten-age eligible children in Grant County and also to make it an option in the Hebron center.

2. The 2004-2005 West River Head Start Policy Council requested that Governance Training continue to be held along with the HIT Board of Directors training.
  - A. After the seating of Policy Council members for West River Head Start, coordinating with the President of HIT, Inc., schedule a training time with the HIT Board of Directors that works for both entities for Fall 2005.
  - B. Transportation and childcare will be arranged for the training.
  - C. A meal will be included for Policy Council, HIT Board of Directors, Staff, and those in childcare during the training.
  - D. The participants will complete a Training Evaluation of training. This will determine the training request for 2006-2007 and 2007-2008 school years.

**2006 – 2007:** Policy Council was surveyed after the November 2005 Governance Training and it was requested to continue to provide joint training in the Fall of 2006. This is in the training plan for 2006-2007.

**2007 – 2008:** Policy Council & the HIT Board of Directors were surveyed after the October 2006 training and it was requested that WRHS continue on with providing the joint Program Governance training.

3. Investigate any opportunity for an expansion grant for Early Head Start service for Mercer, Grant, Oliver and Morton Counties, as opportunities are made available regardless of the funding source as indicated as a need in the Community Assessment.
  - A. Research funding opportunities through foundations and the state by December 31 of each year.
  - B. Meet with Public School Administrators, the Right Tracks Coordinator, Child Care Providers, Early Intervention providers and Policy Council members to discuss opportunities for expansion by March 1 of each year.
  - C. Complete a Community Assessment for unserved populations in counties by March 31 of each year.
  - D. With the assistance of those groups in B above, write the expansion grant. Continue with steps A through D through the 2005-2006, 2006-2007, and 2007-2008 school years.

*2006-2007; 2007-2008: No Early Head Start expansion dollars were available during the past year. It will remain a viable option due to the reported increase in infants and toddlers identified with disabilities and even larger increase in Head Start children identified with disabilities.*

4. Based on the 2004-2005 self-assessment recommendations, staff has requested more independence in purchasing items needed for centers and classrooms.
  - A. By September 30<sup>th</sup> of each grant year, the Director and Chief Fiscal Officer will develop an annual center budget.
  - B. By October 15<sup>th</sup>, the Director will have reviewed the center budgets with each Assistant Director.
  - C. The budgets will be reviewed monthly at the Management Team Meeting and/or Assistant Director's meeting to ensure monies are spent according to the budgets established.
  - D. Requests for budget changes will be made on an as-needed basis and annually based on grants received.

*2006 – 2007: Program supply budget line items were split evenly among classrooms for spending in order to not over spend the budget.*

*2007 – 2008: The WRHS staff have refined budgeting and planning for purchases. We will continue to provide purchasing independence for staff – along with training on allowable expenses.*

### **Child and Health Services**

1. According to the Community Assessment, 1 in 5 children nation wide, are obese. However, WRHS statistics show that 1 in 56 enrolled children are overweight (3 of 168) but 1 in 21 children are underweight (8 of 168).
  - A. The Health Coordinator will meet annually with the Menu Planning Committee to review the nutritional value of meals provided to the children.

- B. By October 31 of each year, this committee will present planning and preparing snacks training to the teaching staff to promote nutrition with the children according to USDA/CACFP guidelines.
- C. Sue Isbel, Grant County NDSU Extension Coordinator, will write a monthly nutrition newsletter to be sent home to parents as of September 2005.
- D. The Family Support Coordinators will review Growth Charts based on the assessed children's heights and weights in September, January and April then submits them to the Health Coordinator for review for further nutrition assessment.

2006-2007; 2007-2008: *The menu planning committee has been working to improve the quality of meals and snacks. Minutes from the committee meeting are on file in the Director's office.*

2. According to the self-assessment, it was recommended that The Creative Curriculum Developmental Continuum Assessment Toolkit be researched and determined what current assessment tool would be replaced.
  - A. Through the Education Specialists/Mentor/Coaches Creative Curriculum training, research the feasibility of implementing the tool. This will be completed by September 2005.
  - B. By October 2005 the information will be summarized with pros and cons then presented to the management team as to the purpose and method of implementation.
  - C. At the November 2005 Teacher's meeting, present the information to the teachers for input on the proposal. If consensus is to continue with researching the implementation plan, go on to D & E. If not, stop.
  - D. By December 2005 research what it would take to train on the tool.
  - E. By January 2006 begin a pilot project with one or two teaching staff teams to practice the computer input pieces of the CC-PORT.

2006 – 2007: *When reviewing the options that tie the current curriculum with all aspects of the classrooms educational continuum, it was decided that CC-PORT was not what staff was needing to tie into the curriculum. West River Head Start will begin implementing the CreativeCurriculum.net to replace the North Dakota Showcase Outcome document currently in use. T/TA money will be used to send the Education Specialist/Mentor/Coaches to training in June 2006. As of August 1, 2006 we will be able to begin using the CreativeCurriculum.net for lesson planning, Outcomes monitoring, etc.*

2007 – 2008: *WRHS will continue to utilize the CreativeCurriculum.net as the Outcomes tool. Education Specialists appreciate the simplicity of obtaining current data for the children; can monitor the progress that each teacher has made with the children and data input; and they can easily adapt charts based on any type of data field. All managers have access to the data for the children in their classroom. The data is provided to parents and is explained to parents at each opportunity – Home Visits, Parent Teacher Conferences, and anytime for each parent at the child's center's parent room computer. However, only 6 of the 164 families looked at cc.net. There is a charge for parents and due to the low usage, WRHS will not make this option available*

*for parents. If parents are interested in looking at the website, they will be encouraged by the teaching staff to come into the classroom and look at the teacher's information.*

## **Family and Community Partnerships**

1. As per HIT's mission statement and WRHS's philosophy statement, continue to develop Community Partnerships that support families and staff in a holistic environment.
  - A. Lowe's is opening a home-improvement store in the Fall 2005 in Bismarck, ND. Working with Lowe's, WRHS shall provide Lowe's home-improvement class schedule to parents on a quarterly basis.
  - B. Each Family Support Coordinator will develop an informal partnership with a community agency and will act as the point of contact between the two programs at management team meetings. Agencies could include but are not limited to: Family-to-Family Network, Circle of Parents, Family Focus Program, etc.

*2006 – 2007: Each Family Support Coordinator has established a partnership or is the point of contact for staff and families: DB – House of Manna; CJ – Family-to-Family Network; KK – Lowes and Home Depot; WG – Barnes & Noble and NDSU Extension; SG – Mental Health Association; MSB – Right Tracks and CAP; MH – State Health & Shriners; SS – Lions; CM – Kiwana's. Updated reports are provided monthly at management team meetings.*

*2007 – 2008: The partnerships will be updated as follows: KK will add Conlin's furniture; MH will add Custer Health; CJ will delete Family-to-Family as all staff receive the information directly and will add Village Family Services; CM will add Autism Society; SG will delete the Mental Health Association as all are receiving the information and will change to Discretionary; DB will add Coats for Kids;*

*2008: LH – Brighten's Aid, Inc.; MP – House of Manna; MSB – Village Family Services, Right Tracks, First Books, and CAP; CM Autism Society & Kiwana's; SG – Discretionary; KK – Conlin's Furniture, Lowes and Home Depot; WG – Barnes & Noble & NDSU Extension; MH – Custer Health, Shriner's and Children's Health Services; LZ – Coats for Kids; SS – Lions.*

2. In reference to WRHS's 2002-2005 Long-Term Goals and the identified continued need for services to homeless families, WRHS will work with the Salvation Army; AID, Inc.; Diocese of Bismarck (Catholic), Policy Council Representative, and any other interested partners, develop a plan to address homeless shelter needs for females and children.
  - A. By September 2005, a meeting will have taken place to review funding opportunities through various sources.
  - B. By October 2005, the group identified above will continue to research funding to assist the Salvation Army in establishing an emergency shelter for homeless.

- C. By November 2005, the group will continue to research funding to assist the Salvation Army in establishing a transitional shelter for homeless women and children in order to assist them out of poverty.
- D. As ideas, information, and opportunities arise through this group, WRHS will remain a partner in providing services to homeless women and children.

*2006-2007: A member from the Salvation Army is on Policy Council as a Community Representative. The director is a member of the Bismarck-Mandan Homeless Coalition and is on the fiscal subcommittee. At this time, no additional funding has been accessed to address shelter for homeless women and children. The director will remain on this committee in 2006-2007.*

*2007 – 2008: The Salvation Army PC member is no longer eligible as she has been on Policy Council for 3 years. Community Partnerships will continue to be developed. The director attends the Bismarck/Mandan Homeless Coalition meetings.*

## **2008-2011 Long Range Goals and Short Term Objectives:**

HIT, Inc., West River Head Start Grantee's mission statement is as follows: *HIT supports people with disabilities through self-directed services that promote independence, dignity and respect.* As a result of the Grantee's mission statement, the following philosophy statement was developed: *West River Head Start is dedicated to the empowerment of children, families, and staff through community partnerships in order to provide exceptional services in a holistic environment. One child and family at a time.*

As a result of the annual strategic plan, the following goals have been reviewed and maintained:

1. HIT will continually strive to meet customer's needs;
2. HIT will connect/bridge our customers and the community;
3. HIT will attract, retain, and motivate competent employees;
4. HIT will effectively use resources in consumer driven activities.

### **Administrative**

1. According to the 2005 and 2008 Community Assessment, North Dakota's population trend is moving out of the rural areas and into the more urban areas. West River Head Start will closely monitor the population migration trends for the rural areas into the "urban" areas.
  - A. Annual population statistics will be monitored for each of the rural areas of Morton, Grant, Mercer, and Oliver Counties.
  - B. School Census information will be obtained every two years (it's updated every other June) to monitor the number of children who are Head Start age-eligible.
  - C. The maximum number of children age and income eligible will be enrolled in the rural centers of WRHS each year. The remainder of the children will be enrolled in the Mandan center.
  - D. Options for shutting down a center will be explored during the 2008-2009 school year with a final plan to be implemented on September 1, 2009.
2. Children and their families is that high-risk families with children are in need of supports, which enhance their capacity to function in the context of their community networks. These programs must begin when the children are young and when parents are significantly involved. West River Head Start has a proven track record of assisting agencies and organizations to identify children in poverty, children with disabilities, and to help families get out of poverty.
  - A. Research Early Head Start funding opportunities through foundations and the state by December 31 of each year.
  - B. Meet with Public School Administrators, the Right Tracks Coordinator, Child Care Providers, Early Intervention providers and Policy Council members to discuss opportunities for expansion by March 1 of each year.

- C. With the assistance of those groups in B above, write the expansion grant. Continue with steps A through D through the 2008-2009; 2009-2010; and 2010-2011 school years.
- D. Explore options of converting Head Start slots into 0-5 slots.

### **Child and Health Services**

1. According to the Community Assessment, 1 in 5 children nation wide, are obese. Behavior patterns such as being physically active, eating a well-balanced diet, maintaining a healthy weight and abstaining from tobacco use are developed during the adolescent years and have lifelong significance.
  - A. The Health Coordinator will meet annually with the Nutrition Committee to review the nutritional value of meals provided to the children.
  - B. By October 31 of each year, this committee will present planning and preparing snacks training to the teaching staff to promote nutrition with the children according to USDA/CACFP guidelines.
  - C. The Family Support Coordinators will review Growth Charts based on the assessed children's heights and weights in September, January and April then submits them to the Health Coordinator for review for further nutrition assessment.
  - D. The lead FSCs for the Nutrition Committee will invite the area public school head cooks in order to assess menus.
2. Continuing with the physical activity goal above, the "*I Am Moving, I Am Learning*" (IMIL) team will focus on implementing a program to benefit children, parents, staff, and community members.
  - A. The IMIL team will present at state-wide conferences as appropriate – some examples are but not limited to ND State Kindergarten Conference, NDAEYC/NDHSA Institute, NDEA Conference, etc.
  - B. Provide CDs with IMIL songs for each classroom at WRHS, to parents, and community partners as opportunities present.
  - C. Use current systems to encourage "IMIL" concepts to families and staff – such as providing activity ideas on the WRHS Annual Calendar.
  - D. Contact local community partners such as MedCenter One College of Nursing to continue to promote IMIL in the classrooms and other community events.
  - E. Provide activities within the WRHS context – such as with Parent Activity Days, Zoo Picnic, Family Nights, etc.
3. During the 2007 North Dakota Legislative Session, legislation was passed to allow Registered Nurses and Licensed Practical Nurses, once trained, to participate in fluoride varnish applications.
  - A. West River Head Start RNs and LPNs will attend initial training and any subsequent follow-up training to apply fluoride varnish for all WRHS children.

- B. WRHS staff will participate in the development of the North Dakota Oral Health study to be conducted on the effectiveness of having passed and incorporated this law.
  - C. WRHS will inform and invite all area interested parties to become involved with fluoride varnish training – such as the MedCenter One School of Nursing, Custer Health, etc.
  - D. A minimum of twice a year, trained WRHS staff will provide fluoride varnish as needed during the 2008-2009; 2009-2010; and 2010-2011 school years.
4. According to the staff self-evaluations and monthly mentor notes, it was requested that Conscious Discipline be researched and used as a behavioral management technique. As per the Community Assessment, an increase in numbers of children with identified disabilities impacts time teachers spend in meetings, doing additional preparation work to adapt lesson plans to meet the individual needs of children, and the time and expertise to work with specialists.
- A. By August 2008, the Education Specialist/Mentor Coaches, Conscious Discipline will be researched as to the feasibility for a behavioral management technique for use in the classroom.
  - B. If the consensus is to continue with researching the implementation plan, then the Trainer will arrange for a qualified Conscious Discipline trainer to train all WRHS staff in 2008.
  - C. Training and one-on-one consultation with staff will be made available as determined by the Mentor Coaches and/or as requested by the teaching staff.
  - D. Continue with this process during the 2009-2010 and 2010-2011 school year.

### **Family and Community Partnerships**

1. As per HIT's mission statement and WRHS's philosophy statement, continue to develop Community Partnerships that support families and staff in a holistic environment.
  - A. Each Family Support Coordinator will develop an informal partnership with a community agency and will act as the point of contact between the two programs at management team meetings.
  - B. Some programs have begun to use electronic newsletters as a routine correspondence. Each FSC will be part of the listserv in order to provide quality services for families.
  - C. Senior managers will be active in non-human service related organizations to develop positive relationships that can impact WRHS children and families.
  - D. The Head Start director from Bismarck Early Childhood Education Program (BECEP) is on the Homeless Coalition and has agreed to represent WRHS on that committee.
  - E. The Head Start director from WRHS is on the North Dakota Oral Health Coalition and has agreed to represent BECEP on that committee.