

**Early Childhood Iowa Area**

**for Boone County and Story County**

**Needs Assessment and Community Plan**

**2018 - 2022**

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**Section I**

**General Information**

**BooSt ECI Area Vision and Mission**

**Vision:** Every child in the BooSt Together for Children Early Childhood Iowa Area will be healthy and successful.

**Mission:** The mission of the BooSt Together for Children Early Childhood Iowa Area is to improve the well-being of children birth through age five and their families by improving the quality and affordability of early care and education and family support services**.**

**Location:** The BooSt Together for Children ECI Area serves Boone and Story Counties in central Iowa. BooSt will use funds allocated to support to programs and services that meet the needs of children from birth through age five and their families throughout the ECI Area. Early Care and Education programs and services will be supported as allowable through the requirements outlined by the legislature and through other funding sources that may be secured for local programming purposes.

It is the practice of the BooSt ECI Area Board to work toward ensuring access to programs and services for all eligible children and families. The Board will address on a case by case basis when instances arise where children or families, or services for children or families, cross the ECI Area boundaries. The ECI Area Director participates in statewide and regional ECI Directors Meetings to ensure cooperation and collaboration across ECI Area boundaries.

**Use of the Community Plan:** The *BooSt Together for Children Community Plan* reflects state and local goals that affect children from birth through five years of age. This plan will guide the decisions of the ECI Area Board. At a minimum, the BooSt ECI Area Board will review the Community Plan on an annual basis to make sure the needs in the community are being met and to identify if the community needs have changed. Local ECI Area indicators will be updated annually for the ECI Area Board review, along with progress reports from funded programs and services.

Updates to the Community Plan will be shared with existing community stakeholder groups in the ECI Area, as well as being posted on the ECI Area’s website for access by the public and community partners. Through working collaboratively with community partners, the ECI Area will work to improve the health and wellbeing of young children and their families.

The most recent version of the Community Plan document will be posted on the ECI Area website to ensure members of the public have access to the information. In addition, the Community Plan and all updates made to the plan will be shared with representatives of community stakeholder groups.

**ECI Area Description:** Located in central Iowa, the BooSt ECI Area covers all of Boone and Story Counties. The ECI Area encompasses 1,144 square miles, connected by US Highway 30 which runs through both counties. Boone County is divided by the Des Moines River, and is home to several transportation systems including the Union Pacific Railway. Story County is home to Iowa State University. There are three hospitals located in the ECI Area, including Boone County Hospital (Boone), Mary Greeley Medical Center (Ames), and Story County Medical Center (Nevada).

Communities include: *Boone County*: Beaver, Berkley, Boone, Boxholm, Fraser, Luther, Madrid, Ogden, Pilot Mound, Sheldahl, Jordan, Logansport, Mackey, Moingona, and Zenorsville

*Story County*: Ames, Cambridge, Collins, Colo, Gilbert, Huxley, Kelley, Maxwell, McCallsburg, Nevada, Roland, Sheldahl, Slater, Story City, and Zearing

There are eleven public school districts located within the ECI Area, including Ames, Boone, Collins-Maxwell, Colo-Nesco, Ballard-Huxley, Madrid, Ogden, Roland-Story, Gilbert, Nevada, and United. Four additional school districts have small catchments areas within the boundaries of the BooSt ECI Area - North Polk, Southeast Webster - Grand, West Marshall, and Woodward Granger. All public schools within the ECI Area have preschool programs. There are also four private schools in the ECI Area that have preschool programs - Ames Christian School (Ames), Sacred Heart (Boone), St. Cecilia (Ames), and Trinity Lutheran (Boone).

**ECI Area Demographics:** American Community Survey (ACS) data from 2016 indicates a total population of 121,245 in the two-county BooSt ECI Area, an increase of 6.7% compared to 2010. (Boone County’s population increased by 1%, while Story County’s population increased 18%) The ECI Area is primarily rural areas surrounding the two population centers of Boone and Ames. These two cities represent over 64% of the total ECI Area population. Des Moines Area Community College has campuses located in Boone and Ames, and Iowa State University is located in Ames, both have a positive impact on the economic vitality of the ECI Area.

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| Race and Ethnicity Data for the BooSt Together for Children ECI Area(reflects totals for Boone & Story Counties-ACS 2010-16) |
|  | Total | White | Black/ African American | Am. Indian & Alaska Native | Asian | Nat. Hawaiian & Pacific Islander | Some Other Race | Two or More Races | Hispanic or Latino |
| Population | 121,245 | 108,658 | 2,460 | 244 | 6,559 | 40 | 364 | 2,893 | 3,616 |
| Percent |   | 89.62% | 2.03% | 0.20% | 5.41% | 0.03% | 0.30% | 2.39% | 2.98% |

The 2016 ACS reported a total of 8,037children, ages five years and younger in the ECI Area. 20% of family households in the ECI Area reported having children younger than 6 years of age. 47% family households identified as married with children zero to 5 years; 5.6% reported as female households, and 3.1% reported as male headed households.

According to 2010 Census data, the ECI Area had a higher rate of residents 25 years of age an older with Bachelor or higher education degrees than the State of Iowa (ECI Area =42.6%, State of Iowa = 27%). There were variances between Boone and Story counties in the percent of residents with Bachelor or higher degrees (Boone County = 22%, Story County = 50.3%). The percent of ECI Area residents without a high school diploma was nearly 4.2%.

Iowa Workforce Development reports the June 2018 unemployment rate for Boone County was 2.2%, for Story County it was 1.5%. These rates were less than the statewide rate of 2.8%.

**Section II**

**Community Needs Assessment**

Development: A community needs assessment was conducted in the summer and fall of 2018. The process began with gathering data to monitor trends in indicators of child wellbeing for the FY18 BooSt Annual Report. The Boost ECI Area Board and community stakeholders reviewed indicator data and priorities at the October 11, 2018 board meeting.

Information from the US Census Bureau ACS on the Iowa State Library was used to update the demographic information about Boone and Story Counties. In addition Kids Count data, needs assessments from other agencies, Boone County and Story County Public Health Community Health Needs Assessment/Health Improvement Plans were also reviewed.

*Mid Iowa Community Action Head Start* *Needs Assessment* - The 2017 needs assessment included a review of administrative data, as well as survey data from low-income families, staff members and stakeholders in the five counties served. Families identified the high cost of health insurance and the lack of access to mental health services as high priority needs. It was also noted that their data showed that in Story County 40% of Hispanic children 0-4 were in poverty (ACS 2011-2015).

*Boone County and Story County Public Health Community Health Needs Assessment/Health Improvement Plans* - Public health departments statewide completed needs assessments and developed Health Improvement Plans for their counties of service, which were due in 2016. Representatives of the local ECI Area and other community stakeholders participated in the processes implemented in Boone and Story counties. Both counties identified access to mental health services and access to dental health services as priority needs.

*Prevent Child Abuse Iowa 2018 Needs Assessment* – Statistics gathered by PCAI show that statewide teen births have declined by 50%. Abuse rates per 1000 children Boone and Story Counties are close to the state average of 12 per 1000. The assessment also found that single parents, especially women, were more likely to live in poverty.

*Iowa Women’s Foundation (IWF) Child Care Solutions* – In July of 2018 the BooSt ECI Area collaborated with the Iowa Women’s Foundation, United Way of Story County, Ames Chamber of Commerce, and Child Care Resource and Referral (CCRR) to convene a conversation around Community Solutions to childcare shortages. One session comprised mainly of community stakeholders while a second session was attended mostly by childcare providers.

The IWF shared local childcare data gathered by CCRR. Participants broke into groups to explore five different solutions to childcare issues. It was noted that low unemployment has had an unexpected impact on home providers. As providers face higher insurance costs, some are choosing to leave childcare for jobs that offer health insurance.

At a follow-up meeting in September those in attendance decided to focus on two key areas – recruiting new home based providers and engaging business partners. It was determined that provider recruitment was a task that could be addressed rather quickly by working with CCRR Childcare Consultants.

Building relationships with the business community will take time. Time to gain a better understanding of how the need for childcare impacts local businesses and where the support of businesses can be most effective. A notable recent success was the partnership of a local medical clinic with a childcare provider to make on-site childcare available.

*Community Collaborative for Children’s Wellbeing Grant* – BooSt staff and board members have participated in planning and implementing a regional collaborative to improve the mental health and wellbeing of young children. The lack of a coordinated information and referral system was identified as a universal need. A representative from Iowa211 spoke about improvements being made, such as creating a single database for the entire state. It was noted that there were often gaps in information, especially for smaller local services such as food pantries. A proposed solution would be for local human service councils or United Ways to work more closely with 211 to make sure that local resources get listed with 211. Partners explored having the Mental Health Region actively collaborate with 211 to identify how to save costs on staffing hotlines.

Improving early identification of mental health concerns was also a goal. It was determined that while the ASQ was used by many programs, it did not focus on mental health issues. Participants agreed to pilot the use of the ASQ-SE (Social Emotional) and grant funds were used to purchase it for programs not using it.

*Grade Level Reading* – The BooSt ECI Area has also participated in Grade Level Reading efforts sponsored by United Way of Story County. Various workgroups have gathered information on nationally recognized best practices, developing a county wide survey of early learning supports. A current strategy is to interview kindergarten teachers to learn how well prepared children are to enter kindergarten. They also have been gathering data from all the school districts in the county to identify differences in usage of free and reduced lunches, 3rd and 4th grade reading scores, and what local resources support early literacy.

**Results and Analysis of the ECI Area Board Priorities and Indicators**

| Results Area | Priority | Rationale for Identification or Deletion of Priority |
| --- | --- | --- |
| Children Ready to Succeed in School | All children have access to affordable quality early learning opportunities  | Efforts must focus on not only making services available, but also striving for services in the early childhood system to demonstrate quality practices. The Board will work with community partners to promote awareness of quality services, and to provide supports that help providers, families, friends and neighbors create quality environments for children. |
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| --- | --- | --- | --- | --- | --- |
| Year | 2014 | 2015 | 2016 | 2017 | 2022 Goal |
| BooSt ECI | 65% | 77% | 78% | 81% | 85% |
| State  | 54% | 64% | 68% | 68% |  |

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| **Indicator analysis and discussion:** While the overall trend is positive board members and stakeholders noted that there is wide variation when looking at disaggregated data from each school district. It was recommended that the board explore why this variability exists and to compare how children compare on reading proficiency at the end of third grade. It was also recommended that childcare settings be encouraged to use formative assessments such as Gold so that they can provide more timely support to young children. |

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| Results Area | Priority | Rationale for Identification or Deletion of Priority |
| Secure and Nurturing Environments | Support experienced and well trained early childhood providers and staff members | It is crucial to have well trained staff providing services in the local early childhood system of services. The Board will work with community partners to support resources that advance the professional development needs of early childhood providers. |
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| --- | --- | --- | --- | --- | --- | --- |
| **Year** | **2011** | **2015** | **2016** | **2017** | **2018** | **2022 Goal** |
| CC Homes | 15 | 25 | 19 | 12 | 17 | 26 |
| CC Centers | 10 | 16 | 15 | 10 | 10 | 17 |

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| **Indicator analysis and discussion:** It was noted that the number of quality rated centers and homes was increasing but we are concerned that a majority of home providers do not participate in QRS. Board members and stakeholders noted that families with limited incomes are often forced to place affordability ahead of quality when choosing childcare. While studies show that high quality is an essential component of imparting lasting benefits in early education; families also need to be able to afford high quality care. Currently access is limited for at risk children.It was recommended that an indicator be used that gives equal weight to accessibility and quality. |

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| Results Area | Priority | Rationale for Identification or Deletion of Priority |
| Secure and Nurturing Families | Enhance development of nurturing bonds and healthy relationships  | Quality family support services are valuable resources for families of young children to encourage healthy and nurturing family relationships. The Board will work with community partners to connect families with family support resources in the community. |
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| **Year** | **2010** | **2014** | **2015** | **2016** | **2017** | **2022 Goal** |
| Boone Co. | 47 | 31 | 41 | 54 | 36 | 20 |
| Story Co. | 138 | 71 | 66 | 85 | 105 | 60 |

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| **Indicator analysis and discussion:** Abuse and neglect rates for Boone and Story County are fairly close to statewide rates. During the needs assessment participants found it difficult to make meaningful suggestions when reacting to child abuse rates. It was seen as too global an indicator to serve as a guide to make policy and programmatic changes. For example, the decline in abuse rates seen in 2014 were more likely the result of policy changes in how DHS handled abuse findings rather than an actual decline in the number of abuse cases. The BooSt ECI Area Board will work with stakeholders and other ECI areas to identify an indicator that is more closely tied to the children served by home visiting programs we fund. |

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| Results Area | Priority | Rationale for Identification or Deletion of Priority |
| Healthy Children | Enhance supports for the physical, emotional, and social developmental health of all children  | The first five years of life are crucial for all young children, laying the developmental foundation for children’s lives. The Board will work with community partners to support resources in the ECI Area that benefit child development issues and help all children be prepared to enter school ready to learn. |
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| --- | --- | --- | --- | --- | --- | --- |
| Year | 2010 | 2013 | 2014 | 2015 | 2016 | 2022 Goal |
| Boone Co. | 78% | 79% | 77% | 77% | 68% | 95% |
| Story Co. | 81% | 81% | 75% | 75% | 77% | 95% |

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| **Indicator analysis and discussion:** There is a lot of misinformation on the internet about vaccinations leading some parents to not have their children immunized. This is problematic locally where people travel to ISU from all over the world. There has been a long gradual decline in immunization rates and IDPH has seen an increase in measles cases in Iowa. Because childcare settings bring children together they need to be especially vigilant about making sure that the children they enroll are fully immunized. |

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| Results Area | Priority | Rationale for Identification or Deletion of Priority |
| Secure and Supportive Communities | Engage and collaborate with diverse community partners to strengthen the Early Childhood system | Collaboration with community partners is necessary to enhance and expand the early childhood system. The Board will build support for early childhood issues through community outreach.  |
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| Year | 2000 | 2013 | 2014 | 2015 | 2016 | 2022 Goal |
| Boone Co. | 11.6% | 14.3% | 12.2% | 11.4% | 10.1% | 7.0% |
| Story Co. | 11.5% | 18.0% | 12.1% | 12.2% | 11.3% | 7.0% |

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| **Indicator analysis and discussion:** Iowa along, with the entire country, has seen general economic conditions improve. However, much like the earlier discussion regarding child abuse, participants found it difficult to recommend policy and programmatic changes based on such a broad indicator as poverty. A more useful indicator may be to look at access to high quality care by children from low income families. There also may be merit in identifying low income areas and targeting support to providers in those areas.  |

**Community-wide Indicators of the ECI Area Board**

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| Indicator | Rationale for Selection of Indicator |
| Immunized Children (Rate of children immunized up to date by 24 months) | Twenty-four month childhood immunization rate was selected as an indicator to track due to the need to maintain safe child care environments.  |
| Pre-literacy Skills (No. and percent children meeting expectations as measured by developmental assessments) | PreK literacy assessment data was selected due to the high correlation between reading ability and school success. (Examples of assessment tools include Gold, IGDI, and FAST).Track third grade reading scores by school district to see how it correlates to the kindergarten FAST. |
| Affordable Quality Early Learning Environments | The number of independently evaluated centers, preschools and development homes was selected because studies show that the quality of care is an important variable regarding the lasting impact of early care and education. The number of Child Care Assistance recipients in quality care will also be tracked. |
| Child Abuse (Rate of child abuse for children 0 to 5) | The BooSt Board will work to identify a different measure that is more closely tied to family support services funded by BooSt.  |
| Children in Poverty (Percent of children 0 to 5 who live below the poverty level) | Children in poverty will continue to be followed as a global indicator but a different indicator will be identified that is more closely linked to outcomes for children and families served by BooSt funded programs.  |

**Strategies of the ECI Area Board**

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| **Children Ready to Succeed:** All children have access to quality early learning opportunities | 1. Support affordable early education through tuition assistance.
2. Work with local child care providers and preschools to expand the use of formative assessments to guide teaching and early learning.
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| **Secure and Nurturing Environments:** Well trained caregivers promote the development of the whole child | 1. Support early childhood provider training.
2. Support quality improvement through nurse and childcare consultants.
3. Provide incentives for quality improvement related to registration, training, quality improvement, and accreditation.
 |
| **Healthy Children:** Improved physical, emotional, and social developmental health of all children ages birth to five  | 1. Promote developmental screening and referral to early intervention services.
2. Nurse Consultants work with childcare providers to share information about the importance of immunizations and monitor records.
3. Nurse Consultants help providers develop health care plans for children with special needs and provide universal precautions and medication administration trainings.
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| **Secure and Nurturing Families:** Support the development of nurturing bonds and healthy parent/child relationships | 1. Support healthy relationships between families and children through home visiting services.
2. Provide emergency childcare during times of crisis.
3. Work with 211 to improve information and referral services for families.
 |
| **Secure and Supportive Communities:** Engage and collaborate with diverse community partners | 1. Provide information and referral for families of children, prenatal to age five, for additional supports.
2. Collaborate and partner with other services and agencies to promote early childhood services.
3. Support early care and education settings that serve more families with low incomes.
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**Section III**

**Fiscal Assessment**

The Fiscal Assessment focused on identified childcare shortages, especially infant care. There is also concern with the decline in child care home providers. Reviewing stories from around the country shows that childcare shortages are being experienced in other states (US News 9/8/18). Ironically the problem seems to have been made worse by low unemployment.

One would think that with a shrinking number of childcare providers that providers would be seeing their pay increase. This is not so, childcare is labor intensive and much of the efficiencies seen in other industries has been due to automation. The high cost and lack of available childcare has impacts beyond parents, the US Chamber of Commerce Foundation has released a report about the need for businesses to get involved. (The Workforce of Today, the Workforce of Tomorrow, US CC Foundation)

*Statewide Voluntary Preschool Program*: Childcare settings have seen unintended effects of the growth of the Statewide Voluntary Preschool Program (SWVPP) for four year old children. As more children have switched from private preschools and childcare settings to the free SWVPP childcare, providers have to draw a greater percentage of their revenue from younger children. This is especially true for infant care where higher staffing ratios required.

The SWVPP is not means tested; parents who had been willing to pay private providers for preschool now receive it for free. The SWVPP is often located in a separate location from the childcare setting. This requires parents to arrange for transportation from the preschool to childcare. For many families they are not able to take time away from work in the middle of the day to provide transportation. It is easier for these parents to leave their child in childcare. This is demonstrated by data on the Iowa Department of Education website that shows that a lower percent of children eligible for free and reduced lunches attend SWVPP when compared to the percent in regular education.

*Childcare Assistance (CCA): C*ompared to other Iowa counties, parents in this ECI Area use the CCA program at a significantly lower rate. Increasing the use of CCA by20% would generate $300,000 in state funding. While the CCA rate is less than the market rate, it can be increased when programs achieve the highest quality levels. In 2017 only 3% of area children receiving CCA were in high quality settings (CCRR 2018).

There are several reasons why CCA is underutilized, the reimbursement rate is often significantly lower that the prevailing market rate. This leads providers to either not accept CCA or limit the number of children with CCA. It is also underfunded, statewide only 28% of eligible children receive CCA.

*Fragmentation of funding and regulations:* Childcare has multiple funding streams (parents, DHS, DE, IDPH, Head Start, and ECI) and each funding source comes with its own rules and regulations. As noted above there are unintended and sometimes negative consequences when each entity works independently of the other. While any single change or requirement one agency sees as reasonable and well intended, it is only when seen in the context of the entire early care and education system that the broader impacts can be seen.

A recent example is how the more stringent federal requirements related to CCA may have had the adverse impact of leading more home providers to become unlicensed and unregistered. The same may be said of increased quality improvement standards when the corresponding incentives do not match the additional work required.

Childcare is also impacted by the current political climate that supports free market solutions to any economic problem and shuns government actions. Over the last several decades there has been a significant increase in out-of-wedlock births in Iowa (35% in 2016, IDPH). Research also shows that single parent households are much more likely to live in poverty.

Childcare is also constrained by the idea that children only need baby sitters; a job that is frequently done by junior high students. The truth is that children benefit from high quality early care and education provided by a well trained and highly skilled educator. It is also known that these benefits have a disproportionate positive effect on children from low income and other at risk situations.

*Recommendations:* It would be naive for the BooSt Board to act as if the above tensions and contradictions surrounding childcare did not exist. BooSt should plan for flat or slowly shrinking state support for the foreseeable future. If support for early care and education is to grow, it needs to come from local resources. Greater efficiency needs to be obtained through collaboration and coordination.

* Collaborate with local businesses that are having trouble finding workers due to the childcare shortage.
* Collaborate with city, county, university, and local funders to make sure that early childhood is a priority and that local efforts are coordinated.
* Collaborate with CCRR to actively recruit and support new home care providers.
* Work with school districts and childcare centers to explore collaborative arrangements to combine childcare and preschool to have full day programming in one setting.
* Disaggregate local outcome data by income, race and ethnicity to determine how well prepared all children are to enter and succeed in school.

**BooSt ECI Area Board’s Process for Awarding Funds**

The BooSt ECI Area uses a competitive bid process to identify qualified providers to financial support programming and services that address early childhood priorities in the community plan. Policies and procedures are in place to do multi-year contracts. Board priorities for funding will be evaluated at least annually, which will guide decisions regarding the bid process. An appeal process regarding the Board’s decisions for awarding funds is included with the application.

Section IV

Community Collaboration

The ECI Area Board strives to develop an organizational structure and business practices that will ensure open communication between families, contracted service providers, community stakeholders, and board members. The ECI Area board will strive to include work groups or committees that enhance communication and collaboration efforts within the ECI Area. Community planning partners and efforts include, but are not limited, to the following:

***Boards of Supervisors*** in both Boone County and Story County have demonstrated consistent support local Early Childhood Iowa Area efforts. Representatives of the Boards of Supervisors serve on the local board, and the counties ensure that fiscal agent services and employer of records services are provided for the ECI Area.

***Child Abuse Prevention Council*** -Boone and Story County CARES is the Child Abuse Prevention Council for Boone and Story County. CARES offers supports and services throughout the ECI Area to address Child Abuse Prevention. The services and supports offered include Parent Education classes and classes for parents going through a divorce.

***Children’s Well-being Community Collaborative*** - The BooSt ECI Area has participated in this grant awarded to YSS in Ames. The goal of the grant is to pull together representatives from a six county region in central Iowa to identify how we can collaborate to develop a more integrated system of care to address the mental health needs of young children.

***Community Resources Guides*** - Boone and Story Counties have directories of resources, supports, and services available for families. A part of the work of the Community Collaboration grant is focused on how to coordinate and organize information about local resources. We are currently working with Iowa 211 to develop local partners who will work with 211 to make sure that local resources are current and accurate.

***Community Solutions to Childcare Shortages*** – this project was developed by the Iowa Women’s Foundation. BooSt ECI Area began working with the IWF in June of 2018. Workgroups of childcare professionals, businesses and community stakeholders are working to reduce CC shortages.

***Decategorization Projects (DCAT) -*** There are two DCAT Projects in the BooSt ECI Area, each with its own Governance Board. Boone and Dallas Counties are one DCAT Cluster, and Story County is a separate DCAT Cluster. DCAT focuses on meeting the needs of at-risk children 0 to 18 years of age, in particular those children and families that may be involved with, or at risk for involvement with, either the Department of Human Services Child Welfare system or the Juvenile Court Services system. The DCAT Clusters oversee the Community Partnership for Protecting Children (CPPC).

***Heartland Area Education Agency 11*** is a partner with the BooSt ECI Area in working with local schools and early education providers to provide educational services, programs, and resources for improving the learning outcomes and well being of children.

***Homeless Resources –*** The homeless shelter in Story County serves both counties. Their services include shelters for families and women and transitional living.

***Human Services Councils*** - Both counties in the BooSt ECI Area have Human Services Councils in place. The ECI Area staff participates in the meetings of these councils as a means to network with other community providers, and to share information and updates regarding ECI.

***Children’s Integrated Data System*** - BooSt staff have been engaged in the work of the Early Childhood Integrated Data System project of ECI. If successful this project will be able to collect and analyze the data gathered by multiple service providers and provide date on which programs are having the most impact in children being able to succeed in school.

***Iowa State University Extension -*** provides education and information for Boone and Story counties in central Iowa. ISU Extension provides training and supports for human service and citizen endeavors.

***SAFE (Substance Abuse Free Environments)*** was established in Boone County in 1991 as a coalition invested in the safety and well being of the people of the community focused on increasing awareness of and prevention of substance abuse and related problems.

***Story County Analysis of Social Services and Evaluation Team (ASSET)*** - ASSET is a planning and funding system in Story County. ASSET is a collaborative effort of the City of Ames, Story County, United Way of Story County, Iowa State University's Student Government, and Central Iowa Community Services. To enhance collaborative planning, ECI Area updates will be provided at ASSET meetings as requested regarding funding priorities and funding allocation decisions of the ECI Area Board. There will also be reciprocal sharing of referrals of programs/services to consider for funding support, and requests for detail on funds allocated through either the ECI Area or the ASSET process during funding application processes. Community plan and ECI Area priorities updates will be shared with the ASSET Board annually.

***Ames Chamber of Commerce*** – The BooSt ECI Area joined the chamber in order to explore ways to collaborate with local businesses on finding ways to address the needs of families with young children that impact businesses such as the need for childcare.

***Story County Quality of Life Alliance*** - This is a Story County based initiative of various stakeholders that have partnered to conduct countywide community needs assessments since 2000. Representatives in this process have included United Way of Story County, Mary Greeley Medical Center, Iowa State University, Lutheran Services in Iowa, YSS, Mid Iowa Community Action, Story County Community Services, MGMC Home Health Services/Story County Public Health, and BooSt Together for Children. Results of the latest assessment were released in 2015. Community Plan updates and ECI Area priorities will be included in the ongoing efforts of this community planning collaborative. Discussions are underway to plan the 2019 needs assessment.

***Story County Juvenile Justice Committee*** - This lunch and learn series is coordinated by YSS and Lutheran Services in Iowa for Story County community service providers with an interest in issues affecting children and youth through age 18 years meet. The group meets monthly to hear educational presentations on relevant topics and to network.

***United Way*** - There are two United Way organizations in the BooSt ECI Area, United Way of Boone County and United Way of Story County. Each organization is a source of funding and community planning and leadership. Funds through the local United Way organizations are primarily targeted to support various human services related programs and services.

Section V

Review and Evaluation

Review and Evaluation Methods: The BooSt ECI Area uses the following review and evaluation methods to monitor effectiveness of the community plan, the board, staff and funded programs and services:

***Annual Community Plan Review -*** Members of the BooSt ECI Area Board review the community plan on an annual basis. This review includes analysis of updated data and updated community assessments that may impact the early childhood system.

***Site Visits*** - Designated ECI Area staff will conduct at least an annual site visit with funded programs and services contractors. A standard site visit monitoring tool shall be used for site visits, and information gathered during site visits will be compiled for review by the ECI Area Board.

***Progress Reports*** - Quarterly progress reports and DAISEY reports are used to gather data and program updates from funded program/service providers. ECI staff summarizes progress report information for review by the ECI Area Board. Progress reports gathered at the end of the fourth quarter will be used to provide required program performance measures data in the ECI Area annual report, which is due to the State ECI Office on or before September 15 of the close of each fiscal year.

***Program/Service Presentations*** - The BooSt ECI Area Board invites contractors to provide updates regarding their programs during board meetings.

***Meeting Evaluations*** - The BooSt ECI Area Board will periodically review its meetings to assess issues related to the process of meetings. Board officers and designated staff will review feedback to make changes for future meetings.

***Annual Evaluation*** - The BooSt ECI Area Board will implement an annual self evaluation using board evaluation tools provided online. In addition, community partners and funded program/service providers will be asked annually to evaluate the ECI Area initiative activities and Board function. A board committee will review board self evaluations, and community partner and provider evaluations, and develop an improvement plan based upon the assessment results which shall encompass a board professional development plan.

***ECI Area Staff Evaluations*** - The BooSt ECI Area Board will implement an annual evaluation of staff members using current the performance evaluation format provided by Story Co. In addition, community partners and funded program/service providers will be asked annually to provide input on the effectiveness of ECI Area staff in accomplishing expected roles and responsibilities. A board committee will review performance evaluation information and develop staff improvement plans.