



Inspire
Development Centers

ANNUAL REPORT 2021





LETTER FROM MSHS POLICY COUNCIL PRESIDENT

My name is Carlos Gil, and I am a happily married man, father of four children, two adults and two minors, ages 7 and 3. I was born in Colombia and raised in Spain. I have tried to better myself in all aspects and get ahead like all families. In Spain, I worked in construction and over time I ended up as a Chef in different restaurants. When the crisis came to Europe, Spain, I almost went bankrupt and it was a very difficult time for me. My older children had yet to finish with their university, but it was very difficult for me to help them finish with their degree.

I made the decision to migrate to this great country, the United States, and came to live in New York. There was very little work for how expensive everything is, between rent and life itself. I endured this nightmare for 5 months and I had to make another decision, change states, and I arrived to Washington state. The job I was able to find was in agriculture, I had never performed this type of work, but I'm not afraid of any job. Now the problem is, who takes care of my son so that my wife and I can go to work so that we can get ahead in life.

We started from scratch. Looking for information on childcare for my son, someone recommended Inspire, I went there to ask for information so that they could provide this service to my son who was 9 months old, and I did qualify. It was a great relief for us, apart from the fact that he was in very good hands. The days went by, and in a meeting that they hold every month in all of the centers, they were having elections, they needed an alternate and I was elected, I was in this position for 2 years. Then at another meeting, in Sunnyside, they were holding some other elections for Policy Council executive committee members, I was elected vice-president. I was also in this position for 2 years but I had to act as president because the president only attended one meeting. Then, due to the pandemic, we could not fill this position, I had to take on that responsibility, and I took it on without any problem until they were finally able to conduct elections and I was formally elected president. It's impressive how this has changed my life, it took a turn of 360 degrees and the growth in my life has been impressive. I have had the opportunity to travel to other states and interact with other parents and share ideas that are useful to us for our centers, my experience at an intellectual level has grown a lot.

I was also invited to an event called Kaizen which has been the most amazing experience I have had so far. Spending a full week with several specialists and directors, sharing ideas to improve the Migrant program, which is the largest in Inspire in relation to the other programs, of which I am proudly a part of. We managed to speed up the process, I did not know that I could possess these qualities to be able to interact with so many administrative and professional staff, and I was not intimidated about sharing ideas with them. So, I encourage other parents to work with their centers and communities to excel and be successful like me, and those around you. All this, thanks to Inspire. I hope these words encourage you to be successful, do not hesitate to do so, you can always count with my support.

These words come from a humble servant,

Carlos Gil



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Our Board of Directors set the tone at the top by overseeing our corporate strategy. We would like to thank them for their continued support and guidance.



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EHS Manager



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Olivia Muzquiz
Regional Director

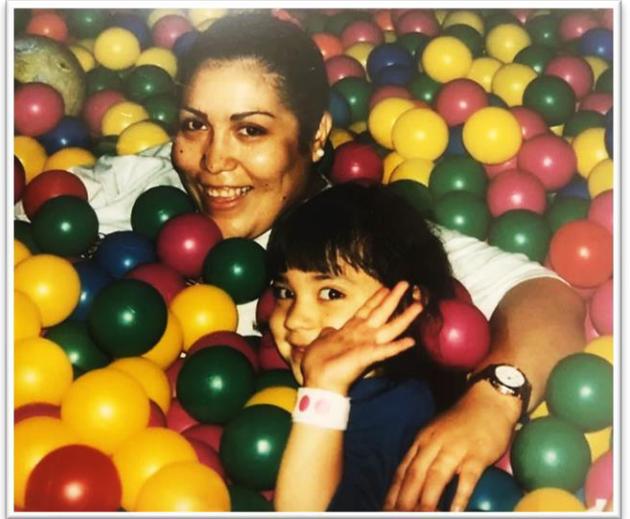


Helen Alvarado
Regional Director

HEAD START SUCCESS STORIES

MEET RACHEL SOPHIA ROMERO

My name is Rachel Sophia Romero, I grew up a child of migrant workers, and was provided an amazing opportunity to take part in Head Start. I feel Head Start provided a secure foundation for me to learn, grow and become a more independent child both at home and in school. Head Start enabled creativity while learning, which increased my confidence within the school setting as well as my “want” to learn as a child. Head Start took normal daily tasks such as reading, forming a line, brushing teeth and building relationships (with students and teachers) and made them unique, enjoyable and safe.



Sophia with Teacher Mari



Head Start allowed me to express myself while instilling routine and structure which I feel is very important for a child to truly learn. As of now I have graduated with two bachelor's degrees one is Health Science the other a Bachelor's of Nursing. I was recently accepted and am currently enrolled in a Doctorate of Nurse Practitioner program at Simmons University in Boston.

Thank you Inspire Development Centers!

Rachel Sophia Romero

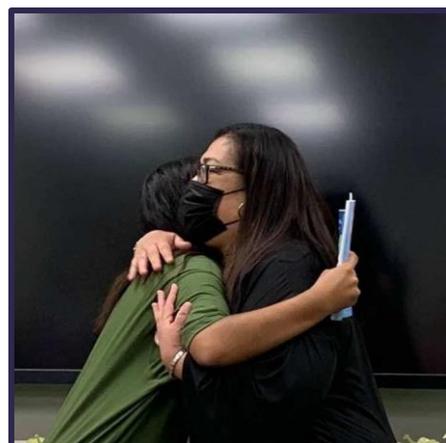
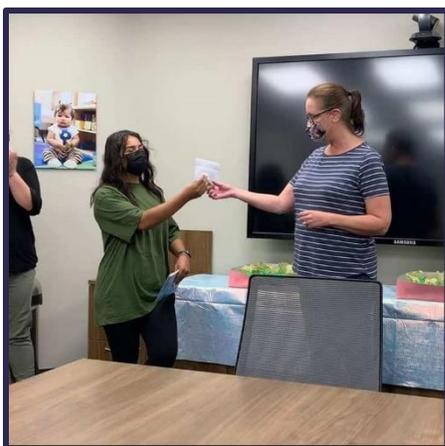
Meet Hogla “Deida” Cortez Vega



Hi, I am Hogla “Deida” Cortez Vega, I am a first-generation student and daughter of immigrants. Through a program similar to Inspire (EPIC), my parents were able to find the importance of education. While we have gone through many hardships, my parents taught me that a good education should always be a priority. With this mindset, I was able to achieve many accomplishments, such as graduating from high school as top 5% of my class along with many college credits, awards, and honors. I am currently attending Whitworth University in Spokane majoring in both Spanish and Political Science with a career goal of becoming an Immigration Attorney.

As a student in the Political Science Field, I was required to complete an internship. I chose to apply to the Tanzania Study Program where only 15 students were to be selected. I was one of the 15 applicants chosen! Being selected, I would be traveling to Africa for 3 months during the Spring semester of 2022, an opportunity like this means so much to me. With this amazing opportunity come many expenses. Unfortunately, I did not qualify for aid, and school scholarships were not enough to cover the trip.

In the summer of 2021, I was fortunate enough to be hired by Inspire Development Centers as a summer Receptionist. I am thankful to Inspire for giving me the opportunity to work with a program that goes above and beyond to accommodate many children and families that I am able to relate to and see the amount of assistance these programs provide to these families. While working with Inspire I was able to dedicate my entire summer funds, along with emotional and monetary support from Inspire and its employees which helped me achieve my goal in paying for my internship.

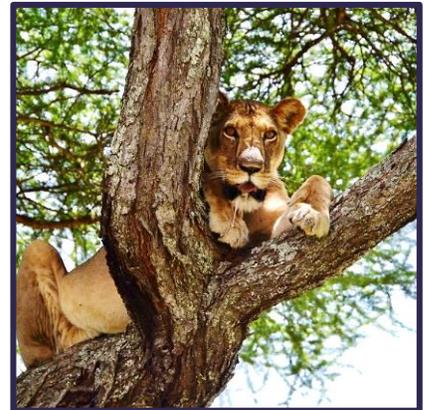




Update to present - It has been about a month and a half since I have arrived in Tanzania! We spent the first month in Zanzibar at the State University studying language, learning the history and culture of Tanzania. We are now staying in Arusha focusing on the political and psychological aspects of Tanzania by participating in a variety of research and interning at local organizations to observe the social interactions of government.

Aside from our studies, I have had the chance to go snorkeling in the ocean, visit different safaris and meet so many great people from different backgrounds!

Extremely grateful Inspire Development Centers helped me in achieving my goal to allow me this opportunity to experience this portion of my professional development!



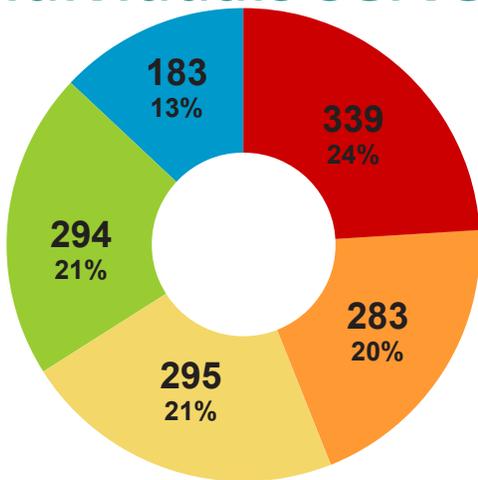
OUR PROGRAMS

Inspire Development Centers is community-based nonprofit organization committed to providing comprehensive, culturally-appropriate services to families and children in need. We promote a philosophy of meeting community needs by serving rural areas primarily supported by agriculture and ensuring responsive services. Inspire Development Centers has enrolled into one of the largest community-based organizations in the Pacific Northwest, providing a range of direct human services to over 4,000 families across rural Washington.

Migrant & Seasonal Head Start (MSHS)

Migrant & Seasonal Head Start program is federally funded for 1934 slots and provides services to children six weeks to five years of age during the months of April through November. The hours of services at the centers are determined by the agricultural activities and the working needs of the parent in each community.

Individuals Served

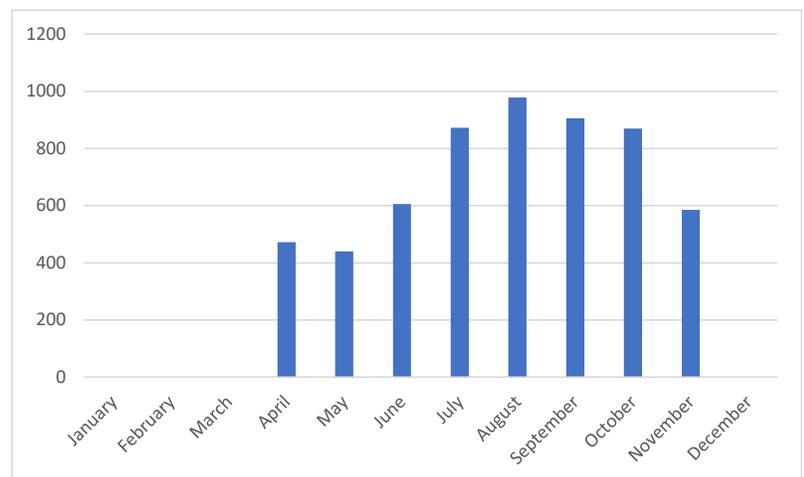


0-1 Year Old	3 Years Old
1 Year Old	4 Years Old
2 Years Old	5+ Years Old

72% SERVED	Children Funded	1934
	Children Served	1394
1067	Families Served	
70%	Two Parent	743
30%	Single Parent	324

6%	Disabilities Total	119
Prior to Enrollment		64
During Enrollment		55
Number of IEP's		70
Number of IFSP's		49

Average Monthly Enrollment MSHS



Medical Services: 1088

78%



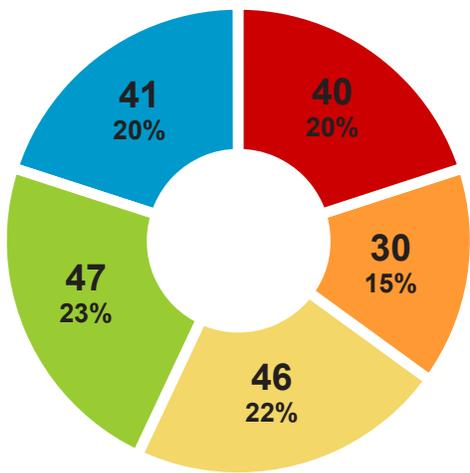
Dental Services: 1151

83%

Migrant Expansion (MEXP)

Migrant Expansion is federally funded for 266 slots and provides services to children six weeks to five years of age during the months of April through November. The hours of services at the centers are determined by the agricultural activities and the working needs of the parent in each community.

Individuals Served



0-1 Year Old	3 Years Old
1 Year Old	4 Years Old
2 Years Old	5+ Years Old

77% SERVED	Children Funded	266
	Children Served	204
155	Families Served	
68%	Two Parent	105
32%	Single Parent	50

7%	Disabilities Total	19
Prior to Enrollment		18
During Enrollment		1
Number of IEP's		17
Number of IFSP's		2



Medical Services: 165

81%

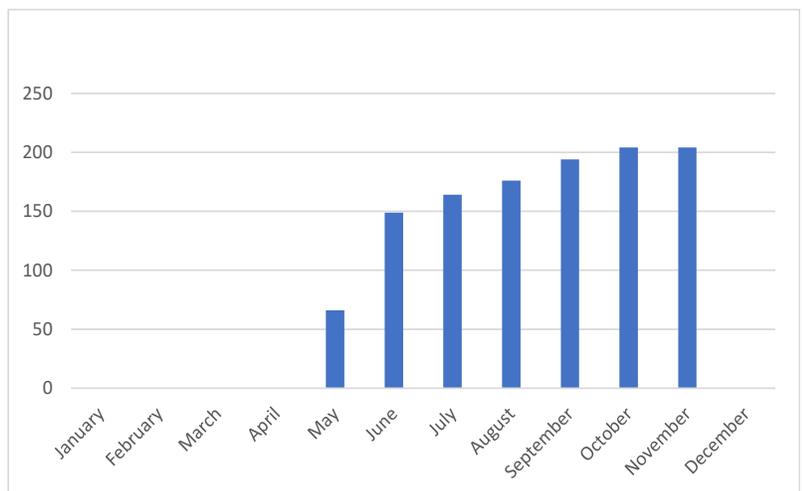


Dental Services: 176

86%

Average Monthly Enrollment

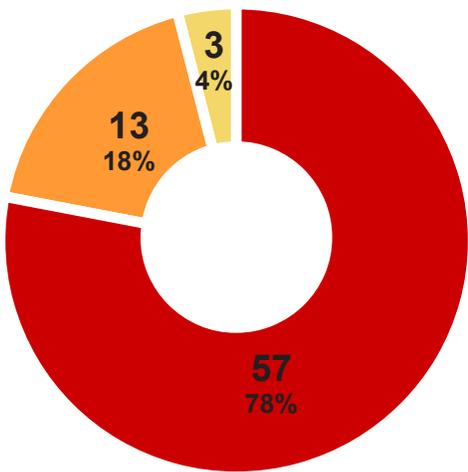
MEXP



Migrant & Seasonal Early Head Start (MEHS)

Migrant and Seasonal Early Head Start Program is federally funded for 96 slots and prioritizes enrollment of children six weeks to three years of age. This is a center-based program that also emphasizes serving pregnant mothers. The hours of services at the centers are determined by the agricultural activities and the working needs of the parent in each community.

Individuals Served

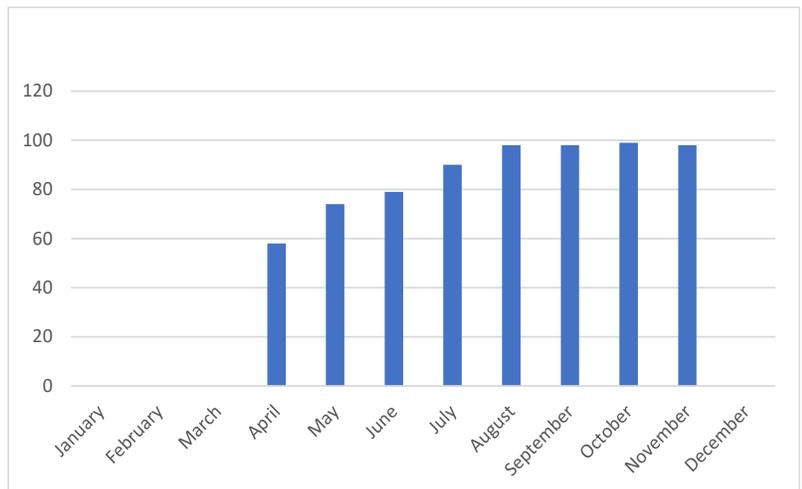


0-1 Year Old	3 Years Old
1 Year Old	4 Years Old
2 Years Old	5+ Years Old

103% SERVED	Children Funded	96
	Children Served	73
	Pregnant Mothers	26
96	Families Served	
69%	Two Parent	66
31%	Single Parent	30

4%	Disabilities Total	4
	Prior to Enrollment	0
	During Enrollment	4
	Number of IEP's	
	Number of IFSP's	4

Average Monthly Enrollment MEHS



Medical Services: 73

100%



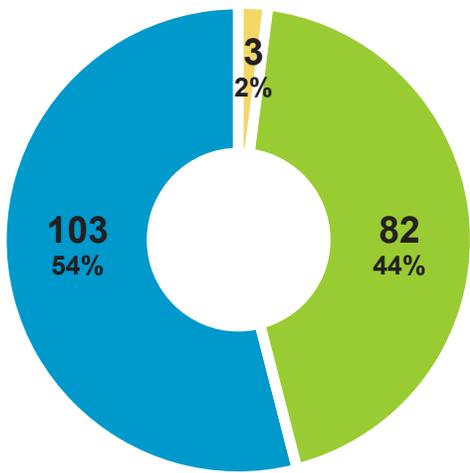
Dental Services: 69

95%

Region X Head Start (RHS)

Region X Head Start is federally funded for 192 slots in five child development centers. This program prioritizes enrollment of children three to five years of age. There are two child development centers that offer part-day programming Monday through Thursday, and three child development centers that offer full-day programming Monday through Friday. Services run September through June.

Individuals Served



0-1 Year Old	3 Years Old
1 Year Old	4 Years Old
2 Years Old	5+ Years Old

98% SERVED	Children Funded	192
	Children Served	188
175	Families Served	
57%	Two Parent	99
43%	Single Parent	76

10%	Disabilities Total	19
Prior to Enrollment		12
During Enrollment		7
Number of IEP's		19
Number of IFSP's		



Medical Services: 188

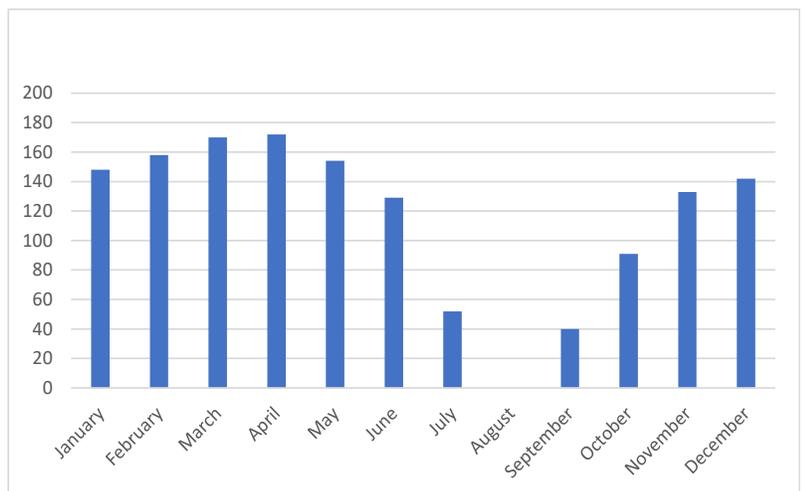
100%



Dental Services: 171

91%

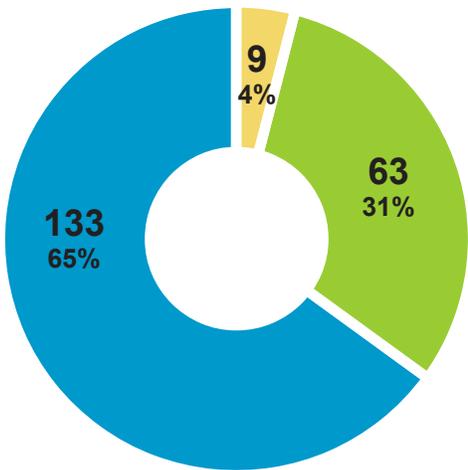
Average Monthly Enrollment RHS



Region Expansion (REXP)

Region Expansion is federally funded for 218 slots in five child development centers. This program prioritizes enrollment of children three to five years of age. There are three child development centers that offer full day programming Monday through Friday. Services run September through June.

Individuals Served



0-1 Year Old	3 Years Old
1 Year Old	4 Years Old
2 Years Old	5+ Years Old

94% SERVED	Children Funded	218
	Children Served	205
192	Families Served	
59%	Two Parent	114
41%	Single Parent	78

10%	Disabilities Total	21
Prior to Enrollment		16
During Enrollment		5
Number of IEP's		21
Number of IFSP's		



Medical Services: 205

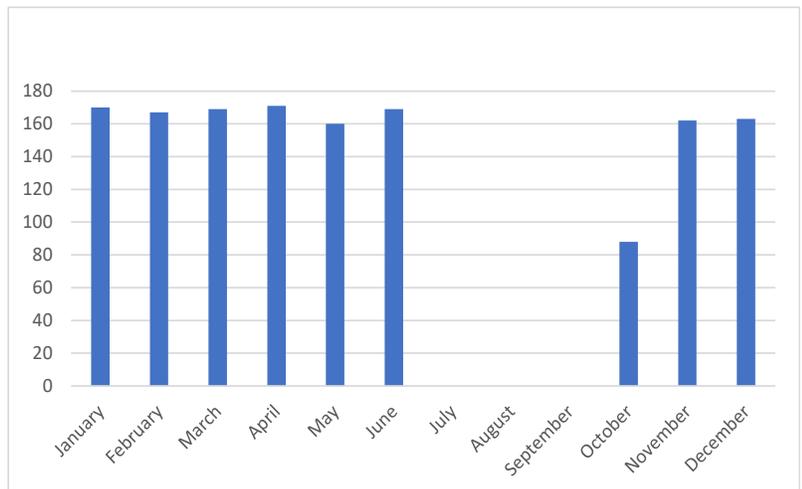
100%



Dental Services: 182

89%

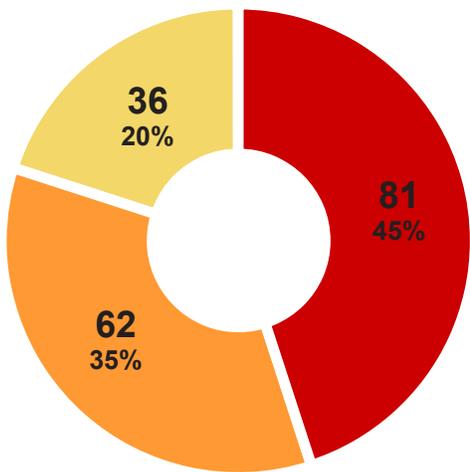
Average Monthly Enrollment REXP



Early Head Start (EHS)

Early Head Start is federally funded for 160 slots and prioritizes enrollment of pregnant mothers and children birth to three years of age. This program is a year-round home-based program. All services are carried out through a weekly home visit that supports the home as the learning environment and promotes healthy family functioning.

Individuals Served

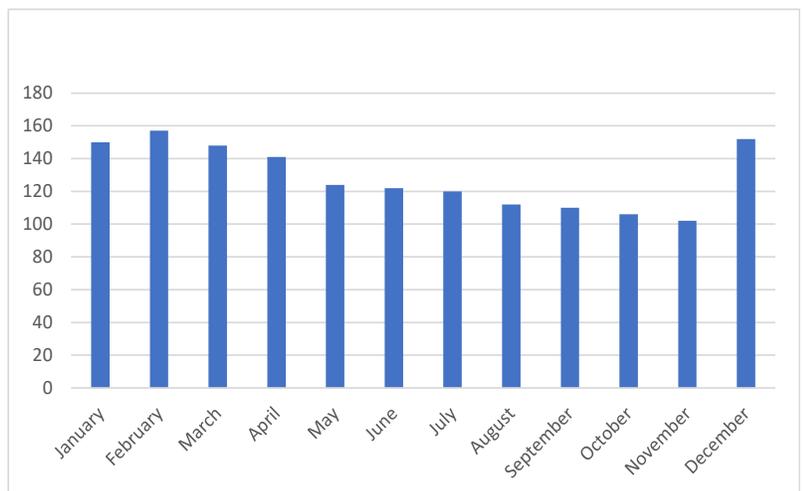


0-1 Year Old	3 Years Old
1 Year Old	4 Years Old
2 Years Old	5+ Years Old

130% SERVED	Children Funded	160
	Children Served	179
	Pregnant Mothers	29
180	Families Served	
58%	Two Parent	105
42%	Single Parent	75

10%	Disabilities Total	16
	Prior to Enrollment	4
	During Enrollment	12
	Number of IEP's	
	Number of IFSP's	16

Average Monthly Enrollment EHS



Medical Services: 160

89%

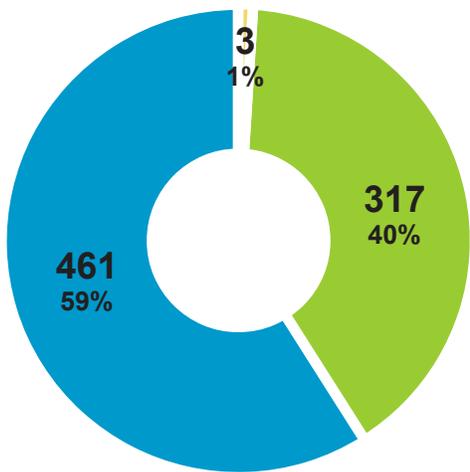
Dental Services: 175

98%

Early Childhood Education & Assistance Program (ECEAP)

Early Childhood Education & Assistance Program is a State funded for 962 slots and prioritizes enrollment of children three to five years of age. This program offers full-day programming in two child development centers, and part-day programming in twenty child development centers. Services are offered during the months of September through July.

Individuals Served



0-1 Year Old	3 Years Old
1 Year Old	4 Years Old
2 Years Old	5+ Years Old

81% SERVED	Children Funded	962
	Children Served	781
765	Families Served	
62%	Two Parent	477
38%	Single Parent	288

8%	Disabilities Total	73
Prior to Enrollment		45
During Enrollment		28
Number of IEP's		73
Number of IFSP's		



Medical Services: 719

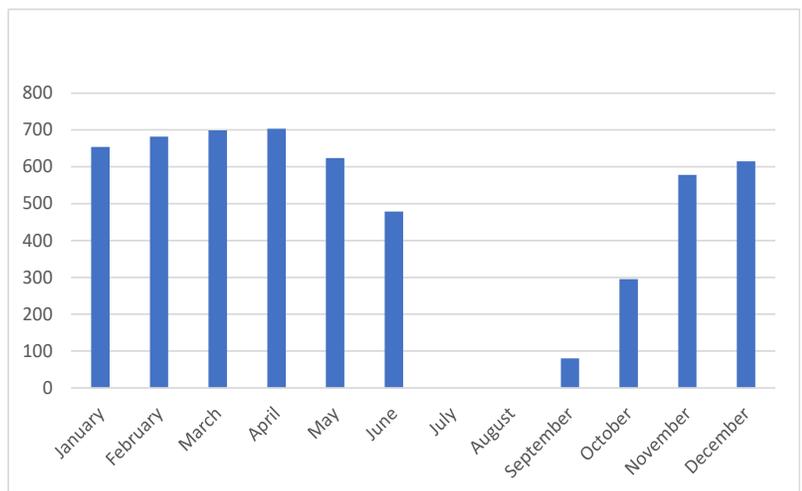
92%



Dental Services: 686

88%

Average Monthly Enrollment ECEAP



EDUCATION

In 2020-2021 Inspire Development Centers continued to face unprecedented disruptions to our important work with children and families due to the spread of COVID-19. In our new reality, IDC put educational processes in place to stay connected with children and families. IDC provided both remote and onsite educational experiences to children to promote a healthy development and school readiness of young children.

Teachers and parents worked collaboratively to continue to support children’s school readiness skills through a variety of weekly learning opportunities and parent contacts. Families of preschool children signed-out iPads with age appropriate games and digital books to use at home and participated in virtual learning experiences. Children also received a home learning kit with materials to support a wide range of developmental skills.



“IMIL Music and Movement”



“Teacher Leading a Virtual Lesson”



“Lacing Virtual Home Activity”

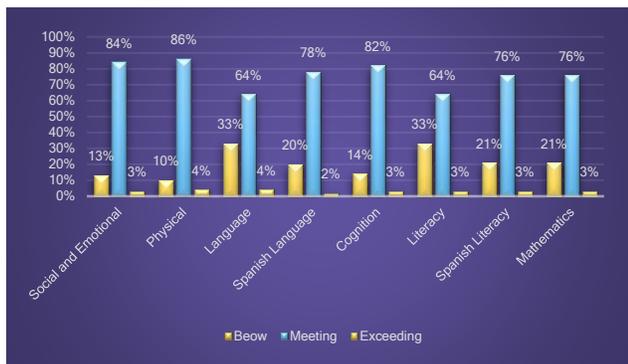


“Early Head Start Virtual Home Visit”

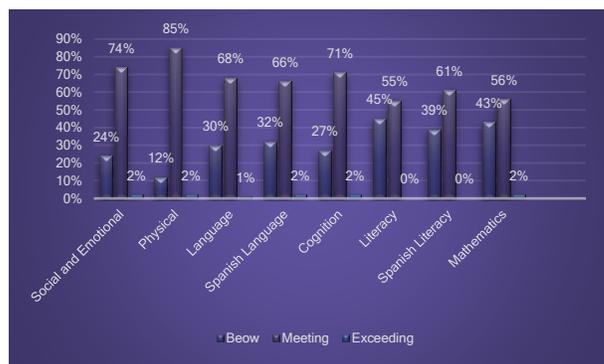
School Readiness Snapshot Report

The 2020-2021 school year brought both challenges and advantages when assessing students' skills. Due to the lower teacher-student ratio in classrooms, teachers were able to build connections, observe, and facilitate learning more individually. However, when classrooms transitioned remotely due to a COVID-19 exposure it was a challenge for teaching staff to engage and educate families on how to observe and assess children’s skills. Even given these challenges, our students were able to make great growth this school year. The following Teaching Strategies GOLD reports shows the percentage of birth to five-year-old children who at the end of the program year were below, meeting, and exceeding *widely held expectations in the different programs.

Migrant Programs (1122 Children)

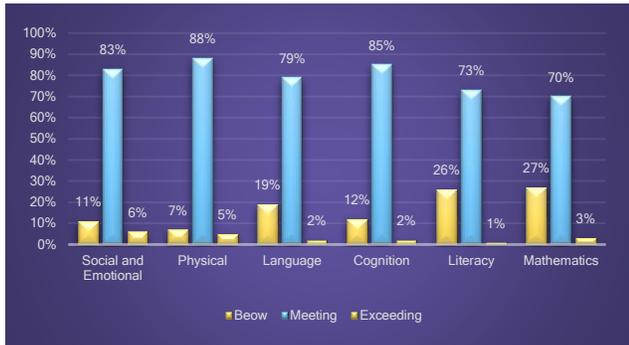


Region Programs (322 Children)

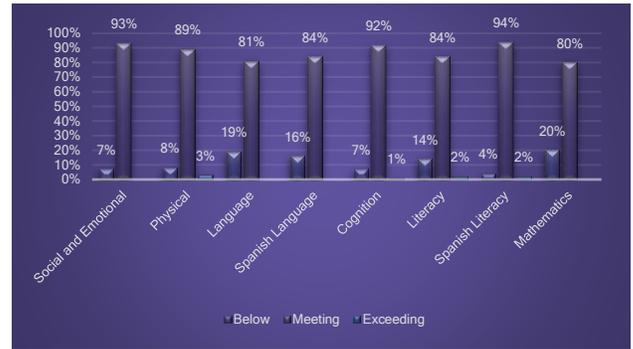


EDUCATION

ECEAP Program (652 Children)



EHS Program (93 Children)

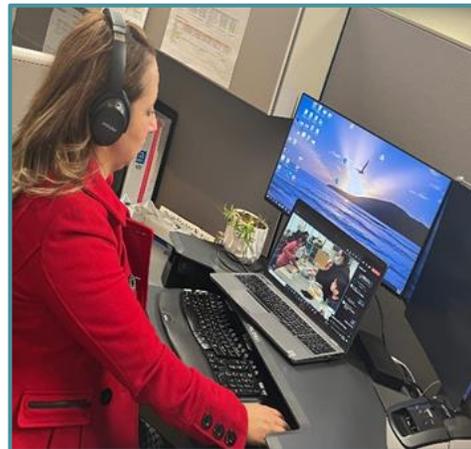


*The term widely held expectations describes the range of knowledge, skills and abilities that children of a particular age typically demonstrate from the beginning to the end of a program year. These widely held expectations are based on the latest research in early childhood education, are demonstrated in the progressions for GOLD® Objectives for Development and Learning 1–23, and are used to help determine if a child’s (or group of children’s) knowledge, skills and abilities are below, meeting or exceeding their age’s expected range of knowledge, skills and abilities.



EARLY LEARNING MENTOR COACH

- Three new Early Learning Mentor Coaches were hired to be able to support teaching staff in skill development.
- ELMC's conducted "What is CLASS" trainings.
- Trained staff on the Early Achievers revisions.
- Conducted both in-person and virtual observations.
- ELMC's participated in Professional Development trainings such as Developing Mentoring and Coaching Relationships, Practice Based Coaching, Developmental Parenting, STEAM, Partners for A Healthy Baby, as well as various conferences.
- Trained teachers on the use of children iPads to be able to support parents in engaging in remote and virtual learning experiences.



MENTAL HEALTH AND DISABILITIES

- Center and program staff participated in wellness days and monthly wellness challenges across the Inspire Centers where staff engaged in self-care activities and education.
- Awarded Complex Needs dollars to support the Social Emotional needs of children and families for ECEAP.
- Awarded Quality Improvement funds to support Social Emotional needs of children and families for MSHS.
- Partnered with PAVE to have virtual support groups for parents and staff with children suspected or receiving services on an Individual Education Plan (IEP)
- Participated in Ripple Effect: Trauma Informed Practice: Cohort 2
- Completion of Trauma Informed Pilot and Train the Trainer with Cultivate Learning University of Washington
- Held first Parent Mental Health Retreat Virtually (Complex Needs Funding)
- Acquired Board Certified Behavior Analyst to support Early Childhood Behavior Specialist
- Lead Mental Health and Disabilities Specialist accepted for Equity ECHO program with Georgetown University. Geared towards early childhood mental health and equity within our programs.
- Ongoing Autism training for teaching staff with Responding to Autism
- Purchase of Active Calming Centers, Self Regulation Kits and CLASS Social Emotional Kits, iPads for children with IEP's (Complex Needs and Quality Improvement Funds)



HEALTH

Inspire Development Centers (IDC) continues to follow the health and safety policies and procedures & State and Federal regulations. The temporary directives and systems that the agency put in place to protect the children, families and staff continue to be revised as needed and following the CDC, DOH and local health departments recommendations. Our team of nurses continue to assist their regions. The RN's follow up on all the staff, children and family referrals with a pending COVID-19 test or a positive case to prevent the cross contamination at our centers. The RN's are vigilant when a positive case is reported in their region and follow the IDC process to report the case and work closely with Human Resources and local Health Departments to ensure that the families and staff are notified of any potential group exposures.

The Health component continues to work hard during the COVID-19 pandemic and adjusting to the new normal. Nurses, Family Advocates and parents working together as a team to comply with health requirements for children. The pandemic made it hard for centers to complete the screenings and obtain the medical and health exams for all children. The staff worked hard, as always, and IDC was able to complete above 90% of the health requirements for children enrolled in 2021, and staff continues to work with parents to keep children current. The health component is ensuring that every child enrolled is current with age appropriate immunizations or on a plan.

Dental Exams at our centers with the dental provider Dr. Norell



Health screens conducted at the center



PARENT FAMILY & COMMUNITY ENGAGEMENT

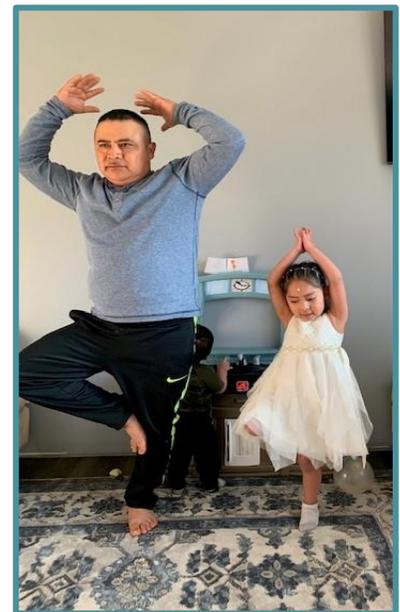
Teaching and completing the 9th Family Development Credential course, with 10 Family Advocates and Home Educators receiving their credential through the University of Connecticut.

Helping administer the Group Health Foundation parent grants. Our agency awarded 23 grants to families in our various communities. The grants supported parents with financial assistance to access educational and vocational opportunities, as well as removing barriers to employment.

Supporting the continued rollout of the agency-wide virtual parenting curriculum. The curriculum, ReadyRosie, was accessible by all families and has a comprehensive library of 1-2 minutes videos with many topics ranging from behavioral, literacy, math, social, math, emotional, and other parenting skills.

Supporting remote parent engagement opportunities, such as fatherhood activities, in order to encourage strong parent/child interactions.

Partnering with numerous community agencies in order to have resources available to the families we serve. Joined our partners in various activities, including helping deliver food boxes to several communities through 2nd harvest.



ELIGIBILITY, RECRUITMENT, SELECTION, ENROLLMENT & ATTENDANCE

This year our continued challenge has been enrolling children into our programs due to Covid-19. Family Advocates have continued to be active in their communities and involved in many food distributions to continue to reach out to families and give them information about our Programs.



As an incentive for the FA's, the ERSEA department has implemented a Family Advocate appreciation award. Family Advocates are selected monthly and announced during the ERSEA calls to show our appreciation for their hard work and dedication. The announcement is also displayed on the digital signage which is found at all Inspire Development Center locations.



GOVERNANCE

IDC continued engaging families at both center level and the Policy Council while maintaining safety procedures. With the guidance and support of IDC staff, Policy Council members participated in monthly meetings both in person or by teleconference. Members were also engaged during regular Parent Voice Meetings receiving center updates maintaining a constant form of communication between centers and the Policy Council.

The electronic voting device, ElectionBuddy, was also used for ongoing parent recruitment to the Policy Council ensuring the voices of families were heard during parent voting at a safe distance. Parents continued their leadership development through trainings, meetings and conferences. Parents also received recognitions for their high attendance and participation during their Policy Council meetings. Additionally, parents were engaged through invites to virtual Town Hall meetings, community trainings and Vaccine Projects to continue bringing awareness on the effects that COVID-19 has had on their families and communities.



EARLY HEAD START



Early Head Start is a Home-Based program that provides weekly home visits to children birth to three and pregnant mothers. Comprehensive services are carried out in the home environment of the families enrolled.

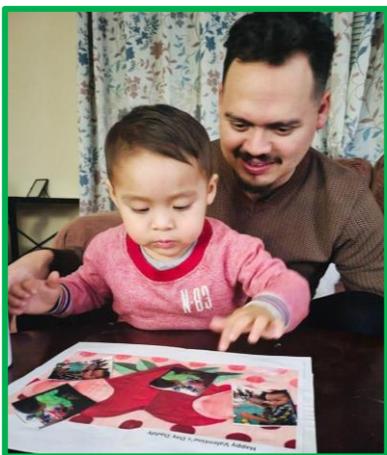
Although Covid factors affected the in-person home based services that the program provided in 2021, staff were able to continue with weekly home visits through virtual services along with providing age-appropriate home learning kits for every child enrolled. Parents were provided an agency I-pad in order to join the monthly socializations that were being offered. As of June of 2021, EHS was able to go back to providing in-person service safely in the homes, and socialization activities were able to be offered at the IDC centers twice a month.

Community partnerships increased through agency food distribution and assistance with social and health services through-out all of the communities served. In 2021 slots were added to the communities of Pasco, Mattawa and Sunnyside.

Late in the year the EHS staff engaged in a program planning day that included a SWOT Analysis (Strengths, Weaknesses, Opportunities and external Threats). Through that exercise two program goals were identified; 1) Strengthen Community Partnerships throughout all of the EHS communities, 2) Strengthen communication and collaboration with IDC center's Core Team.



Trainings were provided to increase Infant and Toddler Health and well-being, along with engaging parents in home visits.



TRANSPORTATION

Transportation & Facilities component was able to upgrade fire & security alarms systems in 6 locations, Kennewick, Mt. Vernon, Grandview, College place, Moses Lake and Harrah. We also upgraded 2 outdoor playgrounds with new outdoor play structures in College place and Kennewick. Quincy received a front and back parking lot upgrade and Pasco 1 received a new ECEAP bus.

Kennewick new outdoor toy



College Place new outdoor toy



Pasco 1 new ECEAP bus



AMERICAN RESCUE PLAN & COVID-19 FUNDING

On May 27, 2021, Inspire Development Centers (IDC) was awarded One-Time American Rescue Plan (ARP) and COVID-19 funding from the Office of Head Start (OHS) to continue supporting children and families during the Pandemic and for investing in safe and high-quality early childhood learning opportunities for children. The budget period is from April 1, 2021 through March 31, 2023. For the Migrant Seasonal Head Start programs, the total funding awarded under ARP is \$2,747,164.00 and \$691,025.00 under COVID-19. For the Head Start programs, the total funding awarded under ARP was \$682,005.00 and \$171,552.00 under COVID-19.

Some examples of allowable uses of funding includes:

- Technology to ramp up recruitment and enrollment efforts.
- Prioritize additional weeks of services for children and families.
- Mental health support for children and families.
- Purchasing buses and other vehicles that support continuity of program services.
- Partnerships to increase the inclusion of children with disabilities.
- Meal and nutrition services.
- Make facilities safer by installing new heating, ventilation and HVAC systems and windows to reduce risk of indoor coronavirus transmissions.
- Outdoor learning play materials and equipment.
- Cleaning supplies and services.
- Staff wellness and mental health support.
- Additional staff for smaller group sizes.
- Professional learning and development for staff.

PARTNERSHIP



HEALTHY AND READY FOR THE FUTURE Quarterly Report December 2021-January 2022

Two-month period: December 2021 – January 2022

Date: February 11th, 2022

Organization: Inspire Development Centers

Prepared by: Chris Castillo

INSTRUCTIONS: Please complete the following questions and tables taking in mind only the services within your organization that are conducted as part of the Healthy and Ready for the Future initiative.

SECTION 1: REFERRALS TO A MEDICAL/DENTAL HOME

- 1a. Indicate the total number of **referrals to a medical/dental home**, including how many of these were for children of migrant and seasonal many farmworker families:

Referrals to a Medical/Dental Home	Total Number	Total Number that were from Migrant & Seasonal Farmworker Families
Referrals to a medical/dental home for children aged 2-5	394	307
Referrals to a medical/dental home for children aged 6-17	0	0
GRAND TOTAL:	394	307

- 1b. Indicate the total number of **unduplicated children from 1a.** that are girls: 194 and boys: 200
- 1c. Indicate the total number of **unduplicated children from 1a.** that are in pre-school (under age 5): 388, elementary school (aged 5-11): 6, and middle or high school (aged 11-17): 0

SECTION 2: ORAL HEALTH CARE SERVICES

- 2a. Indicate the total number of **well-child visits with some type of oral health service** (i.e., dental screening and/or fluoride varnish application) for those aged 2-17 ideally resulting from the referrals indicated in Section 1, including how many of these were for children of migrant and seasonal farmworker families:

Well-Child Visits with Oral Health Service(s)	Total Number	Total Number that were from Migrant & Seasonal Farmworker Families
Well-child visits with some type of oral health service for children aged 2-5	446	317
Well-child visits with some type of oral health service for children aged 6-17	0	0
GRAND TOTAL:	446	317

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- 2b. Indicate the total number of **dental visits** for those aged 2-17 ideally resulting from the referrals indicated in Section 1, including how many of these were for children of migrant and seasonal farmworker families:

Dental Visits	Total Number	Total Number that were from Migrant & Seasonal Farmworker Families
Dental visits for children aged 2-5	505	342
Dental visits for children aged 6-17		
GRAND TOTAL:	505	342

- 2c. Indicate the total number of **unduplicated children from 2a. and 2b.** that are girls: 246 and boys: 259
- 2d. Indicate the total number of **unduplicated children from 2a. and 2b.** that are in pre-school (under age 5): 500, elementary school (aged 5-11): 5, and middle or high school (aged 11-17): 0

SECTION 3: ORAL HEALTH SCREENINGS AND ORAL/BEHAVIORAL HEALTH PRESENTATIONS

- 3a. Indicate the total number of children aged 2-17 reached with **oral health/dental screenings and oral health education in non-clinical settings.** Leave blank sections that are not applicable:

Oral Health/Dental Screenings	Total Number	Total Number that Received Fluoride Varnish or Dental Sealant	Total Number that Received Oral Health Education	Total Number that were Children of Migrant & Seasonal Farmworker Families (if known)
Oral health/dental screening for children aged 2-5	352	335	352	271
Oral health/dental screening for children aged 6-17	0	0	0	0
GRAND TOTAL:	352	335	352	271

- 3b. Indicate the total number of children aged 2-17 and adults aged 18 and over reached with **oral and/or behavioral health education via presentations.** Leave blank sections that are not applicable:

Oral and/or Behavioral Health Presentations	Total Number	Total Number that Received Oral Health Presentation	Total Number that were from Migrant & Seasonal Farmworker Families (if known)
Oral and/or behavioral health presentation for children aged 2-5	46	42	18
Oral and/or behavioral health presentation for children aged 6-17	0	0	0
Oral and/or behavioral health presentation for adults aged 18 and over	0	0	0
GRAND TOTAL:	46	42	18



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- 3c. Indicate the total number of **unduplicated children from 3a. and 3b.** that are girls: 173 and boys: 179
- 3d. Indicate the total number of **unduplicated children from 3a. and 3b.** that are in pre-school (under age 5): 352, elementary school (aged 5-11): 0, and middle or high school (aged 11-17): 0

SECTION 4: SOCIAL AND EMOTIONAL SCREENINGS/REFERRALS

- 4a. Indicate the total number of **social and emotional screenings or referrals** conducted for children aged 2-17, including how many were for children of migrant and seasonal farmworker families:

Social & Emotional Screenings/Referrals	Total Number	Total Number that were Children of Migrant & Seasonal Farmworker Families
Social and emotional screenings/referrals for children aged 2-5	1653	908
Social and emotional screenings/referrals for children aged 6-17	0	0
GRAND TOTAL:	1653	908

- 4b. Indicate the total number of **unduplicated children from 4a.** that are girls: 836 and boys: 817
- 4c. Indicate the total number of **unduplicated children from 4a.** that are in pre-school (under age 5): 1653, elementary school (aged 5-11): 0, and middle or high school (aged 11-17): 0

SECTION 5: SOCIAL AND EMOTIONAL ASSESSMENTS/SUPPORT SERVICES

- 5a. Indicate the total number of **social and emotional assessments/support services** conducted from the social and emotional screenings/referrals in Section 4, including how many were for children of migrant and seasonal farmworker families:

Social & Emotional Assessments/Support Services	Total Number	Total Number that were Children of Migrant & Seasonal Farmworker Families
Social and emotional assessments/support services for children aged 2-5	39	25
Social and emotional assessments/support services for children aged 6-17	0	0
GRAND TOTAL:	39	25

- 5b. Indicate the total number of **unduplicated children from 5a.** that are girls: 13 and boys: 26
- 5c. Indicate the total number of **unduplicated children from 5a.** that are in pre-school (under age 5): 39, elementary school (aged 5-11): 0, and middle or high school (aged 11-17): 0

SECTION 6: HEALTH INSURANCE ENROLLMENTS (LEAVE BLANK IF NOT APPLICABLE)

6. Indicate total number of enrollments into Medicaid: 419, CHIP: 215, or the Marketplace: 0 for children from Sections 1, 2, or 3 above.

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SECTION 7: ORAL HEALTH & SOCIAL AND EMOTIONAL WELLBEING MEDIA OUTREACH

7. Media/communications activities relating to spreading awareness messages around oral health and/or social and emotional wellbeing (including behavioral and mental health):

Traditional Media Outreach & Strategies	Number of Events/Activities	Number of Estimated Viewership/Listeners
TV	0	0
Radio	0	0
Newspaper Articles and Op-Eds	0	0
Newsletter Articles/Advertisements	98	799
Other (specify)	65	174
TOTAL:	163	973

Digital Media Outreach & Strategies	Number of Posts/Activities	Number of Estimated Views/Followers/Listeners	Number of Likes/Shares
Facebook	2	2498	257
Twitter	0	0	0
Instagram	1	40	10
Blogs	0	0	0
YouTube	0	0	0
Other (specify)	2	60	0
TOTAL:	5	2598	267

SECTION 8: RED NOSE DAY CAMPAIGN PROMOTION

8. Promotional activities around Red Nose Day:

Traditional Media Outreach & Strategies	Number of Events/Activities	Number of Estimated Viewership/Listeners
TV	1	74
Radio	0	0
Newspaper Articles and Op-Eds	0	0
Newsletter Articles/Advertisements	1	100
Booths/Tables at Health/Community Fairs	0	0
Other (specify)	2	617
TOTAL:	4	791

Digital Media Outreach & Strategies	Number of Events/Activities	Number of Estimated Viewership/Followers/Listeners	Number of Likes/Shares
Facebook	49	49	20
Twitter			
Instagram	136	49	136
Blogs			
YouTube			
Other (specify)	162	119	119
TOTAL:	347	217	275

SECTION 9: NARRATIVE AND PICTURES

9a. Briefly summarize initiative activities performed during December 2021 – January 2022, including any challenges and how they were overcome (if applicable) Bullets are okay:

- During this time, we concentrated on utilizing grant funds to improve our IDC regular practices. The use of the funds directly tied into growth assessments and making sure that equipment utilized was up to standard. This made it possible for center staff to get the most accurate numbers for growth assessments.
- The COVID-19 Pandemic created significant disruptions to overall program services.
- Staff also provided brief information about children upcoming dental appointments and exams on their monthly newsletters.
- Dental Curriculums were researched for purchase to enhance oral health activities. The challenge was finding a curriculum that best fitted our center practices and daily routines. Inspire reached out to Dientes Fuertes Vida Sana curriculum team and had conversations to determine if this was the best fit.
- The Compelling story was a great success. The parents were so glad to share personal stories of their children which in turn brought to life a great stories for our agency to experience.
- With the weather here in the northwest we had many days of remote learning so aside from what is listed above staff sent home backpack kits for remote learning.

9b. Include/embed any pictures (or links to download pictures) depicting any initiative and/or Red Nose Day activities during this period.



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SECTION 10: FINAL REPORT NARRATIVE QUESTIONS

10a. What is the projected number of adults who were impacted by Healthy and Ready for the Future?

- A significant number of parents whose children ages 0 to 5 who benefitted from Health and Ready for the Future funding were impacted by HRF. Inspire provided services to pregnant mothers where a number were on the IHPR call for an interview as requested by them. A handful of recent mothers or currently pregnant mothers were impacted along with about 120 other families that received hygiene kits as selected by their center for being the most needing family at the time. These families were provided extra resources and UnidosUS kits that included tooth brushes, tooth paste, floss, water bottle, and other hygiene items.
- During the summer of 2021, Lynden Center families that are migrant workers and only come to the area for a certain amount of time to work the berry fields, were given hygiene kits along with travel packs, lunch coolers, hydration packs for work and other necessities that helped them while working out in the hot sun all day.

10b. What is the projected number of Frontline Workers who worked directly and indirectly on Healthy and Ready for the Future? *(NOTE: Frontline workers can be but is not limited to: Family Support Staff, Dental Hygienists, Community Healthcare Workers)*

- By tallying up all the centers, the projected number would be approximately 90-100 individuals.

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10c. To the best of your knowledge, what is the projected number of duplicated children during December 2020-January 2022? *NOTE: This can be a percentage or a rough estimate (Example: The same child received a screening in different quarters.)*

- If there were any duplicated children in accordance to staff counts, the maximum would be around 5%.

Please answer each of the following questions in no more than 300 words:

10d. What were some of your organization's main achievements of the Healthy and Ready for the Future program in 2021? Please reflect upon your organization's unique strengths that helped in these achievements. This can include what you/your organization is especially proud of; and/or any best practices.

- **With IDCs Holistic approach to providing services, we have managed to maintain successes in many services during these uncommon times. Dental visits were able to be completed during the year. Having our Dentist visit our centers was a blessing, even though he was short staffed because of Covid-19, IDC staff was able to assist in providing varnish and fluoride treatments.**
- **UnidosUS compelling stories were shared with communities and a total of 2075 digital noses were distributed across all our 26 centers.**
- **ReadyRosie Curriculum was also shared with parents. This benefitted children by providing resources on social emotional activities to assist in their development.**
- **Despite not able to conduct health fairs, information about health was still provided to parents and other community members, including recruitment of UnidosUS and programs.**
- **New staff coming on after HRF has already begin is always a challenge because trainings have to be conducted, and a walk through on how to complete the HRF report is critical to ensure correct data is gathered and documented. Guidance was given consistently to provide the most accurate numbers.**
- **Ensuring that parents understood the importance of keeping their child current and up to date on well child exams and dental screenings. This was accomplished by having constant communication with parents and making sure that we addressed Covid-19 practices because that was a great concern for parents on why they were not scheduling appointments.**
- **Even with the pandemic a re-occurring concern, Inspire worked diligently to keep our centers open for in-person services. With Covid-19 exposures, centers were closed periodically to ensure the safety of children and staff. Having children back at the center and engaging in social activities greatly benefitted them and staff. The excitement to learn has been a great sight to see at the centers. This was done by IDCs agency practices and making sure we were following all CDC guidelines and having the proper protocols in place. Daily health screeners and our IDC nurses following up with any sick child was a success.**

10e. What are some lessons learned about the program implementation, especially in the current pandemic environment?

- **The biggest lesson is that there is so much out there to give. With the research on curriculums and the trainings provided there is a lot our children can benefit from. Even on year three with Healthy and Ready for the Future, we see the positive impact and the room for growth. Every year we digest if we did enough and if we could have done more.**
- **With the pandemic it has been difficult doing "more" for the reason that gatherings are less common, and health fairs have been difficult to conduct. Scheduling presenters for the center parents on Mental Health and Disability and oral care has been more of a challenge.**

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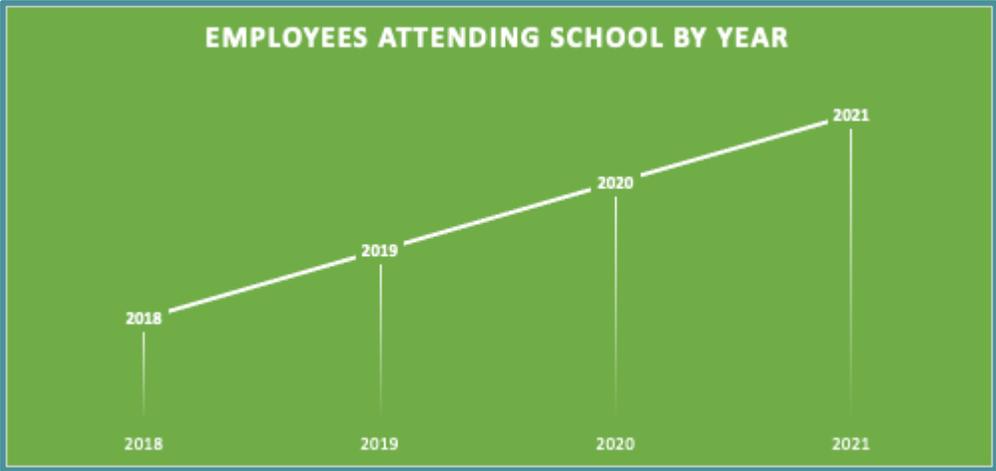
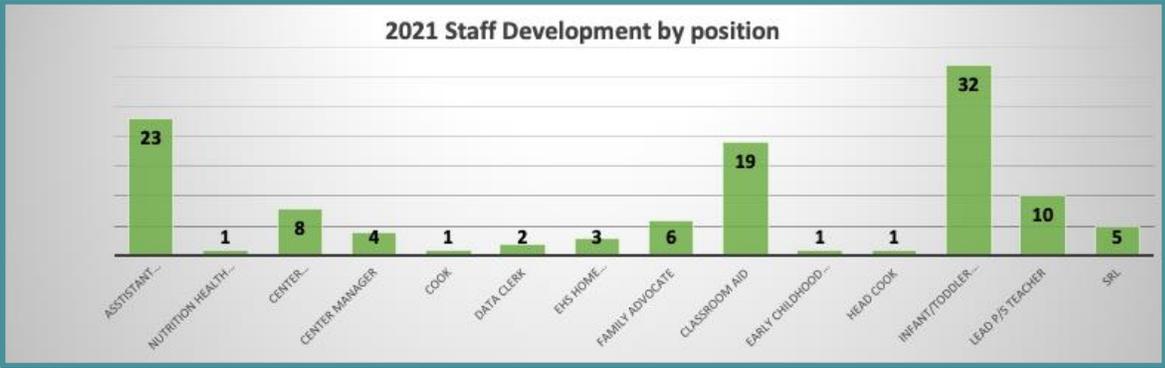
- **The Pandemic has put a big learning curve on all of us. Having to come up with ways to provide services and make sure that we move forward in a successful manner during these uncertain times will be critical for our ongoing future success.**

10f. What insights about oral health and social and emotional wellbeing among children and parents served under Healthy and Ready for the Future should UnidosUS be aware of for this upcoming grant year?

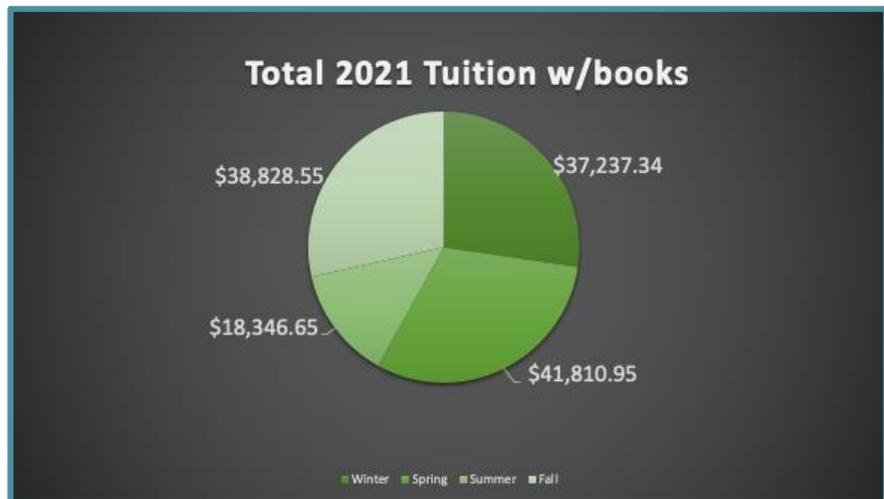
- **This year IDC looked at many Oral care curriculums. Finding what best fits our agency was a challenge. We think that possibly having some options and/or trainings around the best curriculums that are highlighted in other organizations would give us a better feel for what would best fit our agency.**
- **Another goal is to better utilize ReadyRosie Curriculum to the best of its abilities. With the training on Abriendo Puertas/Opening Doors, we seen the similarities along with the differences that this online learning platform has.**

NOTE: *As much as possible, please ensure you are obtaining the permission of any person(s) depicted in the photos by having them complete and sign the media release forms provided to you by UnidosUS and include them with the submission of this quarterly report.*

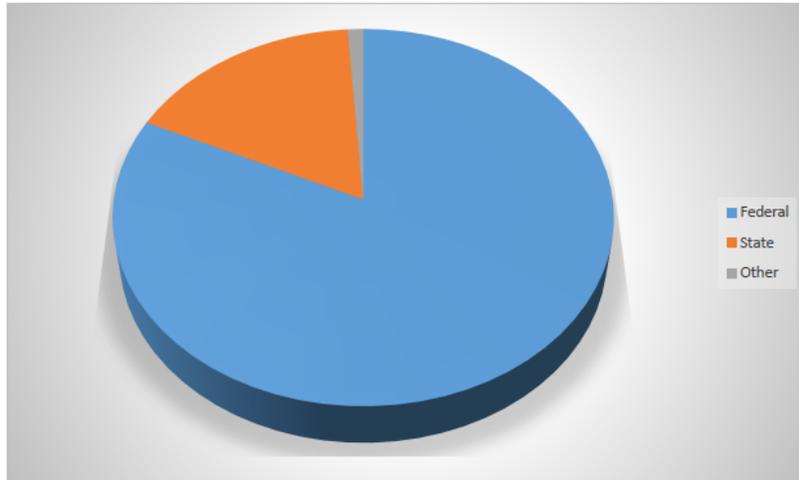
STAFF DEVELOPMENT



STAFF DEVELOPMENT

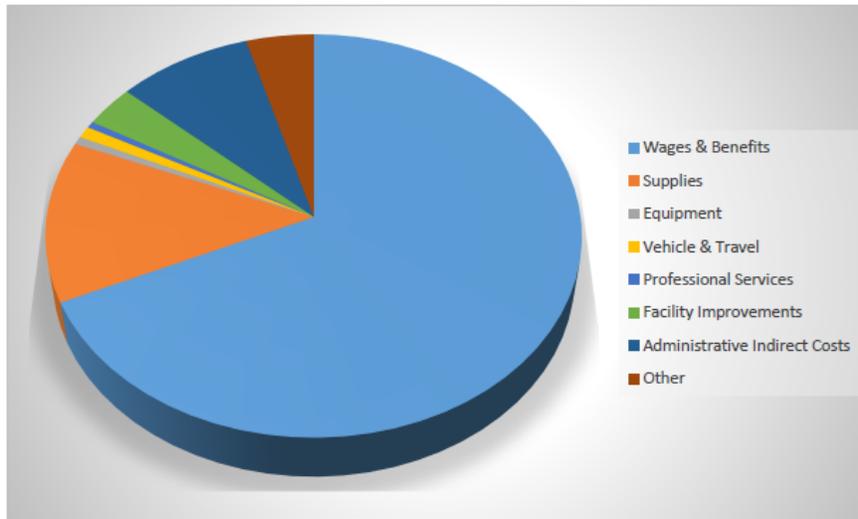


FISCAL



REVENUE

Funding Sources	Total
Migrant & Seasonal Head Start	\$ 30,362,796
Migrant & Seasonal Early Head Start	\$ 1,629,946
Region 10 Head Start	\$ 5,996,278
Region 10 Early Head Start	\$ 2,233,379
CARES Act/ARP Act (Covid 19 Funding)	\$ 965,532
USDA Department of Agriculture	\$ 880,653
State of Washington Early Childhood Education and Assistance Program (ECEAP)	\$ 8,644,925
Other	\$ 562,043
Total	\$ 51,275,552



EXPENDITURES

Expense Category	
Wages & Benefits	\$ 33,757,741
Supplies	\$ 6,396,496
Equipment	\$ 316,299
Vehicle & Travel	\$ 462,950
Professional Services	\$ 255,646
Facility Improvements	\$ 1,659,749
Administrative Indirect Costs	\$ 4,404,353
Other	\$ 2,213,047
Total	\$ 49,466,281

