

CERRO GORDO, HANCOCK AND WORTH COUNTY



**Current
Board
Chairperson:**

Name: Florence Greiman
Address: 855 State St.
Garner, IA 50438
Email: showcows@ncn.net
Phone: 641-923-3421

**Current
Director** :

Name: Cody Williams
Address: 22 N. Georgia, STE 300
Mason City, IA 50401
Email: eac@empowermentforthekids.org
Phone: 641-422-2707

Signature _____
Board Chairperson

Date the ECI Area Board approved the plan: 12/15/2011

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Section I: General Information

Identification of the Early Childhood Iowa Area (ECIA)

Boundaries of the ECIA

The CGHW Early Childhood area serves families who reside in the tri-county area. The following school districts are served:

CERRO GORDO

Clear lake
Mason City
West Fork
Ventura

HANCOCK

Garner-Hayfield
West-Hancock
Woden-Crystal Lake

WORTH

Central Springs
Northwood-Kensett

The following communities/towns are served:

CERRO GORDO

Clear Lake
Dougherty
Mason City
Meservey
Plymouth
Rock Falls
Rockwell
Swaledale
Thornton
Ventura

HANCOCK

Britt
Corwith
Crystal lake
Forest City (part)
Garner
Goodell
Kanawha
Klemme
Woden

WORTH

Fertile
Grafton
Hanlontown
Joice
Kensett
Manly
Northwood

Population eligible for services in the ECIA, and any exceptions to eligibility

All services defined by the board are eligible to citizens of the three county area.

Procedures in place with other ECIA boards to assure services are provided for children ages prenatal-5 years and their families when families or services cross ECIA boundaries

All services defined by the board are eligible to citizens of the three county area. If a citizen resides in the boundary described above they may get services even if a preschool is outside of the area.

Use of the Community Plan

Purpose of the community plan

This community plan reflects state and local goals that affect Cerro Gordo, Hancock and Worth County children ages 0-5. This plan will be used to guide the decisions of the Cerro Gordo, Hancock and Worth County Board. The community plan will be revisited every year to make sure the needs in the community are being met or to see if those needs have changed.

Overview of CGHW Area:

2013 Area Priorities the area Board has set:

- *Empower parents through a parent support and education programs.*
- *Improve the quality of child care and preschool for all families with young children.*
- *Enrich the network of community resources to promote a healthy start for all children.*

2013 Empowerment Indicators:

The following indicators have been identified by the CGHW Board and have been updated during 2012. The following priorities are supported by the CGHW Board:

- *Childhood Immunizations*
- *Postpartum Depression*
- *Preschool Experience*
- *Child Preventative Dental Services*
- *Quality Child Mental Health Services*
- *Child Abuse 0-5*
- *Childhood Obesity*
- *Quality Child Care*

ECIA board, in cooperation with community partners, other agencies, programs, or services, use the plan to move the local early care, health and education system forward

The board is dedicated to create a fair and equal process to get yearly applications from programs that are interested in affecting the area priorities/indicators in our community. The applications determine if programs can connect to the indicators that the board has determined through community input and community assessment. The board promotes collaboration with local community schools, health systems and childcare systems to ensure that no duplication is created.

Public can access the plan

The plan can be publicly accessed by the board's website at www.empowermentforthekids.org, or any requests from the public can be obtained from the office.

Vision

“Working together so every child is happy, healthy, and ready to learn”

Mission

Building strategies to improve the lives of young children and their families through collaboration, coordination, and planning in Cerro Gordo, Hancock, and Worth Counties.

Describe the process the ECIA board used to develop the vision

The board gathered together about 5 years ago to review mission, vision and to create a strategic plan for the area. The board created a matrix of what the priorities of the area board and state was with early childhood issues. The board created a statement that should be long lasting with the priority of the board in the future and present.

Geographic/Demographic Profile for the Early Childhood Iowa Area

Geographic Composition and Demographics:

The three counties are predominantly Caucasian.

Housing- Cerro Gordo County had a lower percentage of owner-occupied housing. All three counties had lower median housing value, and lower median rent than the state in 2000. Hancock and Worth counties had a higher percentage of owner-occupied housing.

Occupation- In 2000, the largest segment of employed persons age 16 or older in Cerro Gordo County was in management, professional or related occupations (28.3%). In Hancock County, the largest segment was employed in production, transportation, and material moving occupations (28.4%), as was in Worth county (27.0%).

Families Receiving Food Assistance- The percentage of the population receiving food assistance has markedly increased over the last 5 years. Hancock and Worth county percentages are consistently significantly less than those of the State as a whole, but Cerro Gordo County's percentages are comparable to those in the State.

Demographics

Population: Overview of Population by County

Year	Cerro Gordo	Hancock	Worth	State
1980-Census	48,458	13,833	9,065	-
1990-Census	46,733	12,638	7,991	-
2000-Census	46,477	12,100	7,909	2,926,324
2010-Census	44,151	11,341	7,598	3,046,355

Source: US Census Bureau

Interpretation of Data: CGHW county population generally decreased between 1980 and 2010. In the opposite the State trend is an increases in population.

Population: 2009 Age Distribution of Population

Age	Cerro Gordo %	Hancock %	Worth %	State %
Under 5	5.8	6.1	5.5	6.8
18 and Younger	21.3	23.2	22.2	23.7
65 and Over	17.8	18.1	18.0	14.8

Source: US Census Data Source

Interpretation of Data: The median age in the three county was higher than the state.

Population for Ages 0-5

	Cerro Gordo	Hancock	Worth	County Composite
2000	3,342	893	557	4,792
2010	3,038	824	485	4,347

Source: U.S. Census, from files prepared by the Iowa State University Office of Social and Economic Trend Analysis

Interpretation of Data: CGHW county population 0-5 generally decreased between 2000 and 2010, while older populations generally increased. The same trend is seen in the State as a whole. Indications are that future Census will reflect a continuation of this trend.

Educational Levels

Percent with:	Cerro Gordo		Hancock		Worth		State	
	1990	2000	1990	2000	1990	2000	1990	2000
Less than 12 years	18.7	12.7	21.6	14.2	22.1	14.0	19.9	13.9
High school graduate	34.8	33.3	39.2	38.6	39.0	39.6	38.5	36.1
Less than 4 years college	30.9	33.7	28.9	31.8	28.0	33.7	24.7	28.8
4 or more years college	15.5	20.3	10.3	15.4	10.9	12.7	16.9	21.2

Source: Data for Decision Makers

Interpretation of data: All 3 counties had a higher percentage of population with less than 4 years of college than the state.

Median Income

	1979	1989	1999	2009
Cerro Gordo	\$36,720	\$33,439	\$35,867	\$44,494
Hancock	\$35,657	\$33,877	\$37,703	\$48,040
Worth	\$34,875	\$30,491	\$36,444	\$49,371
State	\$37,515	\$34,921	\$39,469	\$48,065

Source: Data for Decision Makers

Interpretation of data: Median income is below state average except in the last year, Worth county exceeded the state average.

Percent of Population in Poverty

	1979	1989	1999	2009
Cerro Gordo	8.7	8.9	8.5	10.6
Hancock	8.2	8.9	6.0	9.2
Worth	8.5	9.9	8.3	9.2
State	10.1	11.5	9.1	11.8

Source: Data for Decision Makers

Interpretation of data: Poverty levels are below state average. All 3 counties saw a increase in poverty.

Child Abuse-Confirmed and Founded

	Cerro Gordo	Hancock	Worth
2007	246	46	47
2008	208	37	29
2009	254	32	19

Source: Prevent Child Abuse Iowa 2001-2006

Interpretation of data: The rate of confirmed and founded child abuse cases in the area is higher than that of the State of Iowa in all three years. However, the Cerro Gordo county rate skews the composite rate because it is nearly double that of the State of Iowa rate, while Hancock and Worth counties have rates comparable to that of the State.

Family Investment Participants

	Cerro Gordo	Hancock	Worth	State
2007	493	71	31	41,479
2008	499	92	30	38,968
2009	529	91	57	42,497

Source: IDHS KIDS Count 2004-05

Interpretation of Data: All three CGHW counties have a significantly lower percentage of individuals on the FIP Program than does the State of Iowa as a whole. However rates have increased due to the economy in recent years.

Provide a summary of the area's strengths and challenges

According to the data the area strength is large population in a very rural area of the state. Cerro Gordo County is a center of retail and provides many professional services. The median Income has risen faster in the three county area as compared to the state as a whole. With this still being a rural community, most are very connected to each other, so collaboration is strong among agencies and community members.

Describe how this information is used in planning.

This information is used in determining results of the community assessment. In example with the numbers of respondents to the assessment, most were above the target population of those that most likely would receive services. This information is used to take in account of the skewed results in determining priorities for the area.

Section II: Community Needs Assessment

Development of the Community Needs Assessment

The board looked at the community needs assessment from another ECI area board. This board used the example to begin the work of creating one for this area. The board determined most of the items in the example were information that this board would like to take a look at as well. The board did make some changes unique for this area. Lots of discussion was done on how to get the assessment out to the community. Ideas were given to go to school conferences, local venues and setting up areas where the public could take the survey on a computer. Due to the short turn over time, it was determined that an online survey e-mailed out to the largest population would be the most successful method of obtaining results.

Other agencies' data and needs assessments reviewed as part of this process. If other agencies' assessments were used, provide a brief overview of the assessment conducted (population assessed, timeframe and method for collecting the data, # of surveys completed by target population, etc.) and the relevance of this data to the plan

No other Assessments were used at this time to complete the needs assessment for the Local Early Childhood Iowa Area.

The methods used to request and collect information about the strengths, needs and gaps in services in the ECIA.

The board created three electronic survey assessments. The first was a family survey assessment that was created to get general demographic information with specialized area questions. The survey was created in a collaboration with Mason City schools and AEA 267 survey system. The link was given to all school districts that serve the population in the three county area. These email lists were derived by each district using their e-mail list serve. Over 3,000 surveys were sent out in the three counties a 7% return was obtained with 200 surveys returned. The second assessment was sent to local area agencies to assess funding and gaps of services. Link of survey was sent out to 75 agencies over e-mail. A 8% return was obtained with 6 surveys returned. The third assessment was created to survey childcare providers in the three county area. CCR&R surveyed #95 CHW providers through "constant contact" an email based survey. Only those providers who have provided CCR&R with an email address received the survey. *surveys were emailed to 95 cc providers (65% of regulated providers in the CHW area or 48% of all providers including non regulated). A return of 17 providers was obtained.

Analysis of the Needs Assessment Data Collected

Describe the process for analyzing the data

The board gathered the data from the assessment. Areas of concerns of data that was significant was summarized and presented to the whole board. The board discussed the results in a meeting that was open to the public for input in regards to information that was obtained.

Provide an overview of how the community was involved in the process

The community was involved through the assessment process with the assessment link being e-mailed to as many members of our community through local school districts. During board meetings in discussion public was invited to discuss the information with the board.

Include the information received from the community process - who responded, the needs and gaps that were identified, and other areas of interest that were identified

The board had input from 200 respondents of families in the three county area. The board had 17 childcare providers. The board wishes that it would have gotten more information from families that were in the area of need at the time of survey. Many of the respondents were not receiving any services at the time of survey. However many respondents have used services in the past.

Interesting facts:

80.5 % of respondents were that of two parent family.

90.6% of respondents were aware of Hawk-I

3.7% of children went without health insurance in the past year

18.5% of parenting information came from parenting classes

48.5% gained their parenting information from the internet

81.2 % Find that transportation to school has not been difficult

75% have had 1 year of preschool

20.44 % have received preschool scholarship through the board

38.47% have heard of the Area Board.

100% of Providers have utilized the Nurse Consultant

52.94% participate in QRS

50% of providers feel that QRS does not make a difference in care.

50% of providers believe that QRS paperwork not worth the time.

***Priorities of the Early Childhood Iowa Area Board
Analysis of the Information collected to identify priorities***

Priority	Rationale for Identification or Deletion of Priority
<i>Empower parents through a parent support and education programs.</i>	<i>This was modified from the previous statement. The board changed the wording to be a much broader over arching statement including all forms of parent education and support program instead of just home visitation programs. The board felt that it is still very important to focus on parent education and support due to the area indicators and that this method would be the most effective. An overwhelming response from the assessment is that parent support and education was very important and not easily accessed in the local area.</i>
<i>Improve the quality of child care and preschool for all families with young children.</i>	<i>The board did change this statement by taking the word accessibility out. The area has seen a shift in that enough childcare and preschool slots are available. In the past this was an issue. Providers have seen a shift that not enough children are utilizing services to fill the slots available. In looking at the assessments it was relevant by providers and parents that quality child care and quality preschool was a large importance to the majority of the community. However a lack of knowledge and understanding of quality has and will create a challenge for this priority.</i>
<i>Enrich the network of community resources to promote a healthy start for all children.</i>	<i>The board decided to keep this priority the same. The community needs assessment did state that more resources and education needs to be provided in order to create a more healthy community to promote the wellbeing of young children in the community.</i>

Identified Priorities

List the priorities adopted by the ECIA Board based on the information above.

- Empower parents through a parent support and education programs.
- Improve the quality of child care and preschool for all families with young children.
- Enrich the network of community resources to promote a healthy start for all children.

*Community-wide Indicators of the Early Childhood Iowa Area Board
Analysis of the Information collected to identify indicators*

Indicator	Rationale for Selection of Indicator
<i>Childhood Immunizations</i>	<i>During review of local data it was determined that the existing childhood immunization was decreasing. With further review and investigation, the board found that state and federal funding for this area has been cut by more than 45%. In recent years many news stories have attributed autism to vaccinations and has created many parents alarmed about getting their child vaccinated. The board felt strong that this area still needed to be strengthened in the area.</i>
<i>Postpartum Depression</i>	<i>This indicator was previously an indicator and the board felt that the data has not changed and that the percent of mothers leaving the hospital depressed was a significant risk to the child and mother. The board recognizes that mental health issues are a major issue in our community and that services are not utilized due to stigma of mental health issues and the lack of qualified professionals in the area.</i>
<i>Childhood Obesity</i>	<i>This is a new indicator that the board included with the indicators in this review. The board felt that the three county area was high in comparison to the state as a whole. The health agencies in the area have started working in recent years to curb the obesity problems in our state. The board felt that it has become a health issue to our children in the area.</i>
<i>Child Preventative Dental Services</i>	<i>This is a new indicator that the board included in this review. The area preventative dental services are below the state average in the past few years. The board also felt that it is important for young children to have preventative dental services so children are ready to learn.</i>
<i>Quality Child Mental Health Services</i>	<i>This is a new indicator that the board included in this review. The board felt that an increase of mental health issues in the schools at younger ages has become a concern. The assessment did identify a need for quality mental health care for young children. Most childcare providers feel that they are not educated enough on how to deal with mental health issues and behavior issues.</i>
<i>Child Abuse 0-5</i>	<i>This indicator was previously an indicator and the board felt that the data has not made a significant change towards the better. Child abuse in the three county area is higher than the state average.</i>
<i>Preschool Experience</i>	<i>This is a new indicator that the board included in this review. The community is utilizing the preschool scholarship more every year, but the community assessment did make it clear that up to 25% of children are possibly not receiving a quality preschool experience.</i>
<i>Quality Childcare</i>	<i>This indicator was previously an indicator and the board felt that the data has changed during a period when there was more support from the state and the area board. However due to fund decreases by the state and the board, these numbers have gone back down.</i>

Adopted Indicators

Complete the following matrix for the indicators adopted by the ECIA Board, and link each indicator to the state result areas.

For column 2 of the matrix, use the following key:

A – Children Ready to Succeed in School

B – Healthy Children

C – Secure and Nurturing Families

D – Safe and Supportive Communities

E – Secure and Nurturing Child Care Environments

EARLY CHILDHOOD IOWA AREA INDICATORS

Community Empowerment Area Indicators	Identify the State Results Linked to the Indicator by A, B, C, D, E	Identify Source of data for each Indicator	Baseline Data (date & numerical value)	Subsequent Year's Data (Trend Line) Identify Year			Goal (numerical value & projected timeline)	Progress Update (Brief Analysis of data)
				2009	2008	2007		
Childhood Immunization	B	Iowa Department of Public Health- % Fully Immunized by 24 months	2010 CG-82% H-85% W-81%	2009 CG-89% H-60% W-100%	2008 CG-89% H-67% W-100%	2007 CG-83% H-100% W-100%	Goal By 2015 95% Immunized by 24 Months	In the three county area the number of immunizations have decreased in past years.
Feelings of Sadness or Misery at End of Pregnancy	B	Iowa Barriers to Prenatal Care Project	2009 CG-9% H-7% W-5%	2008 CG-8% H-9% W-13%	2007 CG-11% H-9% W-10%	2006 CG-7% H-8% W-4%	Goal By 2015 Maintain or reduce 2009 Numbers of those responding Yes	The number of new mothers expressing possible postpartum depression has remained steady in the three county area.
0-5 WIC Children Defined Overweight	B	IDPH Pediatric Nutrition Surveillance	2010 CG-12.3 H-10.4 W-*	2009 CG-13.5 H-15.6 W-*	2008 CG-14.2 H-14.6 W-*	2007 CG-12.9 H-20.7 W-*	Goal By 2015 8% or less to be above the 95% percentile by the age of 5.	The rate has remained steady for the past few years and still comparable to the state average which is above what the state believes that the rate should be.
0-5 Children Receiving Preventative Dental Services	B	IDPH-EPSTDT Dental Services Reports	2010 CG-26.4% H-37.85% W-20.59%	2009 CG-37.10% H-39.00% W-47.90%	2008 CG-42.04% H-46.54% W-50.38%	2007 CG-45.41% H-53.42% W-46.43%	Goal By 2015 80% of children by age 5 Receiving Preventative Dental Services	The number of those children 0-5 receiving preventative dental care has decreased in the area in the past few years.
Child Mental Health	B	County Social Services # DSM-IV TR Diagnosed 0-5	2011 CG-10 H-1 W-0	N/A	N/A	N/A	Goal By 2015 50% increase in children receiving quality child mental health services.	The board just started to track this data, and is currently looking for another data source that may reflect the population better. Concerns from the community assessment is what caused the addition.
Child Abuse	C	IDHS	2009 CG-57.5% H-37.5% W-47.4%	2008 CG-67.3% H-54.1% W-51.7%	2007 CG-56.5% H-67.4% W-51.1%	2006 CG-48.3% H-42.6% W-38.1%	Goal By 2015 5% decrease in the three county area.	In 2008 data was a very high year in the three county for child abuse. Overall the area as a whole is higher than the state abuse rate.
Preschool Experience	A	CGHW Preschool Scholarship Services	2010 CG-112 H-36 W-6	2009 CG-100 H-26 W-8	2008 CG-91 H-35 W-11	2007 CG-65 H-28 W-12	Goal By 2015 100% of all Children under the 200% Poverty Level attending 1 year of preschool.	The increase use of scholarship due to a large push from the board is causing more children to attend preschool. According to the community assessment all children are not receiving quality preschool experience.
Quality Childcare	E	Child Care Resource and Referral	2011 CG-15 H-4 W-4	2009 CG-22 H-3 W-2	2007 CG-12 H-2 W-0	2006 CG-11 H-2 W-0	Goal By 2015 25% Increase of Involvement	In 2009 the area had a large increase of participation. During that period a lot of financial incentives caused providers to sign up for QRS. Since that time those incentives have decreased and so have the numbers of participation.

Strategies of the Early Childhood Iowa Area Board

In the past three years the board has reviewed annually their current indicators to ensure that funds are being used to make the most impact to the community. The board has found that some indicators in the past year have been met and funding was no longer established for those data areas. The board has continued to refine the RFP process to ensure fairness in the distribution of funds in the community, but still ensuring that the funds target the areas of need.

The past few years the board has encouraged quality childcare and quality preschool programming. The board has done this by supporting programs with trainings and fiscal support. A few years ago the board created creative curriculum training for preschools and childcare providers. These trainings were to promote the continued educational improvements for quality in the homes and centers in the three county area.

Currently the capacity of impact has diminished in the past few years due to the decrease in funds. The director is no longer full time, and the board is no longer able to continue collaboration and the support of some of the quality programs like creative curriculum as they hoped. Although the board has tried to adapt to ensure that funds are still targeting areas that the community feels essential to continue the growth of 0-5 in the area.

The board has made a commitment to look at the community plan in the next few years to have more accountability due to the changes in requirements at the state. The board is establishing tools and policies to ensure that this is completed to follow standards that the state has set.

The ECIA Board's Process for Awarding Funds

The board's process for awarding ECI funds

Currently the board holds a request for proposals every year based on the indicators in the community plan. The process is started in February with a time line and a formal procedure to ensure fairness in a competitive process for the funds to make the greatest impact on the funds.

- **Step 1 Technical Review Team**

The technical review team will review all applications before any applications move to the evaluation committee. The Technical review team will consist of the local coordinator and the executive committee of the CGHW board. The review team will be looking for applications that do not duplicate existing services in the area, and ensuring that any application connects to one of the local priority indicators. The committee will also insure that all proposals meet silo requirements by the code of Iowa. The review will be based on the disqualifiers listed in the RFP section 2.12. If an application is disqualified at this point, the application will not be reviewed by the Evaluation committee. If the application meets all guidelines, and no concerns are present as listed in 2.12, the application will be reviewed and scored by the evaluation committee.

- **Step 2 Evaluation Committee**

The Board intends to conduct a comprehensive, fair and impartial evaluation of proposals received in response to this RFP. The Board will use an Evaluation Committee to review and evaluate the proposals. The evaluation committee is made of the local coordinator, board members and community members designated by the CGHW board. The coordinator will be present for technical advisement in the review, but will not officially score the applications. The

committee will be comprised of a minimum of 5 individuals. To the best of the ability of the board, the committee members will have no perceived or actual conflict of interest. The evaluation committee will make a recommendation to the Cerro Gordo, Hancock, and Worth Empowerment Area Board indicating the committee choice. The Cerro Gordo, Hancock, and Worth Empowerment Area Board will select the applicants to receive the award. The Cerro Gordo, Hancock, and Worth Empowerment Area Board is not bound by the committee's recommendation. All applicants submitting proposals will receive either a written acceptance or rejection of the proposal submitted.

- **Step 3 Recommendation of the Evaluation Committee**

The final recommendation(s) of the Evaluation Committee shall be presented to the Cerro Gordo, Hancock, and Worth Empowerment Area Board for consideration. This recommendation may include, but is not limited to, the name of one or more applicants recommended for selection or a recommendation that no applicant be selected. The Cerro Gordo, Hancock, and Worth Empowerment Area Board will select the applicant to receive the award. The Cerro Gordo, Hancock, and Worth Empowerment Area Board is not bound by the committee's recommendation. All applicants submitting proposals will receive either a written acceptance or rejection of the proposal submitted.

How the board connects the identified priorities to their funding decisions

All Existing Programs that apply for funds must fill in a table provided in the application that states past program performance achievement. They need to report previous year outcomes for program and state if the program is on track to meet outcomes. If not, why not? and if on track, why have they been successful. They need to report # to serve according to the previous year application, and then report # served as of April 1, of that year, and finally number anticipated to be served by June 30, of that year. The application also requires that a program write a narrative briefly list how that program will directly affect the baseline data for the priority(s) indicator. The board uses this information to ensure that any program accepted will follow the community plan, and if a program is not performing to the community plan, then the board will have reasoning to why not to continue funding for that program.

The board's appeal process

- **Appeal Process**

Applicants have the right to appeal the funding decisions based upon a showing that the policies (RFP Process, and By-Laws) and procedures governing the grant selection process have not been properly applied. The appeal process begins on the postmarked date of the written notification to the applicant of the grant committee's decision. Appeals should be in writing and filed with the Coordinator of Cerro Gordo, Hancock, and Worth County Empowerment Area within ten working days of the date of written notification of funding decisions to the applicant. It is the responsibility of the applicant to assure that appeals are received before 4:30 p.m. on or before the tenth working day of the appeals process. Appeals received after 4:30 p.m. on the tenth day will not be reviewed.

- All appeals shall be delivered to the office of the Cerro Gordo, Hancock, and Worth County Empowerment Area Coordinator.
- All appeals shall clearly state how Cerro Gordo, Hancock, and Worth County Empowerment Area failed in following the rules of the grant process as governed by the policies and procedures outlined in the application material provided to all applicants. The request must also describe the remedy sought.
- The CGHW board Executive Committee will review the appeal and gather information regarding any infractions of the process.
- The Executive Committee will make a report and a recommendation to the Cerro Gordo, Hancock, and Worth County Empowerment Area Board at the next regularly scheduled meeting.
- The Cerro Gordo, Hancock, and Worth County Empowerment Area Board will determine if there has been a violation of process and will rule on the appeal.

Section III: Fiscal Assessment

Early Childhood Iowa Area Board's Fiscal Assessment

The board created an agency assessment that was created online and sent to area agencies and organizations. Only 6 did respond to the assessment. The board was not able to get a good picture of the amount of funds used by agencies for young children. The board also found that agencies are not very open about the amount of funds being used. The board felt that not enough information was gathered at this time to use any of it to impact any decision of the board. The board does have an initiative to ensure that the funds are not duplicating any services in the area and that programs try to get other funds to help support their program.

ECIA FISCAL ASSESSMENT (CONDUCTED FY'November 2011)

(Codes for identifying sources of funding: Federal Funding =F, State Funding=S, Local Funding=L, Private Funding=P, ECI Local Funding=E)

AGENCY AND ORGANIZATION SERVICES

Agency/ Organization	Location	Type of Service Provided	Ages of Children Served	Number of Families Served	Yearly Estimated Funding	Identified Sources of Funding	Identified Gaps in Funding	Agency's Level of Collaboration
Iowa CCR&R of NE Iowa	Waterloo Iowa/ Mason City Iowa	Child Care Consulting, CCR&R, Early Access,	0-10+	Did not respond	\$1,000,000.00 plus across 19 county area.	E, S, F	Not Enough Funding to Serve Everyone, Transportation, Attitudes and Participation, Lack of Financial viability for childcare providers,	High collaboration, communication, coordination, contribution, and cooperation.
United Way of North Central Iowa	Mason City, Iowa	Dental Services, FADDSS Services, Family Support/Home Visitation, General Assistance	Did not respond	Did not respond	1.4 Million	Did not respond	Not Enough Funding to Serve Everyone, Transportation, Quality Staff, Attitudes and Participation, Education Level of Participants, Resources are unavailable, Access to Healthcare, Prescription Drugs.	High Levels of Collaboration

EARLY CARE ENVIRONMENTS

Child Care Home, Licensed Centers, Preschools	Location	Type of Service Provided	Ages of Children Served	Number of Families Served	Yearly Estimated Funding	Identified Sources of Funding	Identified Gaps in Funding	Agency's Level of Collaboration
No Entity Returned Information								

RELIGIOUS ENTITIES

Religious Entity	Location	Type of Service Provided	Ages of Children Served	Number of Families Served	Yearly Estimated Funding	Identified Sources of Funding	Identified Gaps in Funding	Agency's Level of Collaboration
No Entity Returned Information								

CITY MANAGED SERVICES

Agency/ Organization	Location	Type of Service Provided	Ages of Children Served	Number of Families Served	Yearly Estimated Funding	Identified Sources of Funding	Identified Gaps in Funding	Agency's Level of Collaboration
No Entity Returned Information								

CIVIC ORGANIZATIONS

Organization	Location	Type of Service Provided	Ages of Children Served	Number of Families Served	Yearly Estimated Funding	Identified Sources of Funding	Identified Gaps in Funding	Agency's Level of Collaboration
No Entity Returned Information								

LIBRARIES

Library	Location	Type of Service Provided	Ages of Children Served	Number of Families Served	Yearly Estimated Funding	Identified Sources of Funding	Identified Gaps in Funding	Agency's Level of Collaboration
No Entity Returned Information								

FAMILY SUPPORT AND PARENT EDUCATION OPPORTUNITIES

Program Name/Model	Location	Type of Service Provided	Ages of Children Served	Number of Families Served	Yearly Estimated Funding	Identified Sources of Funding	Identified Gaps in Funding	Agency's Level of Collaboration
No Entity Returned Information								

HEALTH SERVICES

Health Service	Location	Type of Service Provided	Ages of Children Served	Number of Families Served	Yearly Estimated Funding	Identified Sources of Funding	Identified Gaps in Funding	Agency's Level of Collaboration
Worth County Public Health	Northwood, Iowa	Education, General Assistance, Lead Testing, MCH Services, Public Health Services	All Ages	Did not respond	Did not respond	Did not respond	Not Enough Funding to Serve Everyone, Transportation, Attitudes and Participation, Resources are unavailable,	High Levels of Collaboration

OTHER SERVICES/PROGRAMS

Service/Program	Location	Type of Service Provided	Ages of Children Served	Number of Families Served	Yearly Estimated Funding	Identified Sources of Funding	Identified Gaps in Funding	Agency's Level of Collaboration
Steben's Children Theater	Mason City, Iowa	Creative Drama	3-10+	Did not respond	E=16,800 P=2,000	E, P	Not enough funding to serve everyone	High Level of Collaboration, communication, cooperation, and coordination.
Winnebago, Hancock, Worth Social Services	Winnebago, Hancock, Worth	General Assistance	0-10+	Did not respond	Did not respond	Did not respond	Protective Daycare Funds, Home Repair, Parenting Classes, Respite Care	High Levels of Collaboration

Section IV: Community Collaboration

Collaborative and Networking Opportunities

Currently, the CGHW Board collaborates at different levels with various agencies throughout the area. The Board itself has in place a sub-committee structure with membership from community agencies to assist with community input. Each committee has a job description, and it is a requirement for at least one Board member to serve in one or more of the groups. The board also ensures collaboration and communication through community meetings that the area director attends in behalf of the board. One of the most successful examples over recent years is that of the preschool community in Mason City. The Mason City School District and the area director has quarterly meetings with all preschool providers in Mason City to ensure collaboration with the voluntary preschool program provided in the school. The school wants to create a community preschool program and not just in the community school. The school and the area board recognize the importance of options for parents. Some community preschools have become satellite sites for the voluntary preschool program through these meetings. With these meetings they have created a better whole system to ensure quality programming and that as many children as possible have the opportunity to attend preschool. The area director participated in focus groups for United Way of North Central Iowa on the Education committee. The Director also spends time evaluating program applications of education funds.

The board does not deal with infectious disease directly. The board does support the local Childcare Nurse Consultant at a high level and believes that this position does give information about these areas to local childcare providers and preschools.

Section V: Review and Evaluation

Provide a narrative. The narrative describes:

The boards process to evaluate, on a regular basis, the effectiveness of the plan in addressing the needs of the community

The following components are currently in place to ensure on-going evaluation and effectiveness of the community plan as well as funded programs.

- The CGHW Board requires funded projects to submit written quarterly reports created in the Governors Accountability Act format.
- A monthly finance report is completed by each funded project.
- A year end report is completed by each funded project with inputs, outputs, outcomes and finances.
- The community plan will be reviewed on an annual basis to address any changes within the community and legislation.
- The CGHW Board submits an annual report to the state of Iowa.
- The CGHW Board seeks-redesignation from the state of Iowa every three years.

The board's process to evaluate the effectiveness of the programs funded

~ Include a statement referring the reader to the annual report for the required program performance measures data.

The annual report has the required performance measures from the state and the area board ensures the funded programs have indicated all information for these measures. The board uses the annual report to evaluate the effectiveness of the area funds to the priorities of the state and local board.

The board's process to evaluate their roles and responsibilities and operational activities.

The board will have a community evaluation annually to reflect on its own operation and to ensure that the board is being effective.