

M e m o r a n d u m

To: CAPCO Board of Directors
From: Eden C. Harrington-Hall, Assistant Director
Date: February 19, 2016
Subject: Board of Directors Meeting

This is to inform you that a CAPCO Board of Directors meeting will be held at 12:00 ***p.m. February 25, 2016 at the main office.***

If you have any questions, or would like additional information about the Board packet, please call me at CAPCO - 753-6781.

Board of Directors Meeting Agenda

February 25, 2016

I. Call to Order

II. Approval of the January 28, 2016 Meeting Minutes

III. **Standing Committee Reports**

- **Executive Committee**

Resolutions:

- **16 – 02 – is seeking your acceptance the updated Vehicle Use Policy.**
- **16 – 03 – is seeking your acceptance the change to the 401(k) Plan.**
- **16 – 04 – is seeking your acceptance the Authorized Signatories.**

! • **Finance and Audit Committee**

- ***Motion to Receive and File Financial Statements.***

Resolution:

- ***16 – 05 – is seeking your acceptance the HS/EHS budgets and T&TA budgets***

- ***Board Development Committee***

Resolution:

16 – 06 – is seeking your acceptance the New Board Member Orientation Policy/Procedure

- ***PP& E Committee***

Resolutions:

- ***16 – 07 – is seeing your acceptance the Updated Community Assessment***

IV. Executive Director Report

V. Program Director Reports

- WIC
- Family Development
- Weatherization
- Head Start
- CDPAP
- HR

VI. Head Start Policy Council Update

VII. Old Business

VIII. New Business

IX. Adjournment

Board of Directors Meeting Minutes

January 28, 2016

- I Meeting called to order at 6:05 p.m.
In attendance: Janet Hansen, Penny Prignon, Helen Spaulding, Paula Currie, Carole Ann Davies, Luann King, Rama Haidara, Pat Snyder, Gary Dallaire, Elizabeth Haskins **Excused:** Miranda Greene, Mary Ann Discenza **Absent:** Shawn Allen
- II. Motion for acceptance of the December 10, 2015 Meeting Minutes made by Cheryl Michales; seconded by Carole Ann Davies. There being no discussion or corrections, motion carried.
- III. **Standing Committee Reports**
 - **Executive Committee – No meeting**
 - **Finance and Audit Committee**
 - Motion to receive and file Financial Statements made by Helen Spaulding; seconded by Rama Haidara. There being no discussion, motion carried.
 - **Board Development Committee**
 - **Resolution:**
 - 16 – 01 – motion for acceptance the slate of officers for 2016 made by Cheryl Michales; seconded by Elizabeth Haskins. President Currie asked if there were any nominations from the floor, there being none, motion carried.
 - **PP& E Committee**
 - The Head Start/Early Head Start monthly reports were shared with the group, there being nothing significant to address, motion made by Rama Haidara; seconded by Janet Hansen to receive the reports.
- IV. Executive Director Report
- V. Program Director Reports
 - WIC
 - Family Development
 - Weatherization
 - Head Start
 - CDPAP
 - HR

VI. Head Start Policy Council Update

VII. Old Business

VIII. New Business

IX. There being no further business, motion for adjournment made by Janet Hansen; seconded by Cheryl Michales. Meeting adjourned at 6:20 p.m.

Executive Committee

February 18, 2016

Members present: Paula Currie, Rama Haidara, Shawn Allen, Helen Spaulding. Staff: Lindy Glennon

Meeting called to order at 8:30 a.m. Lindy introduced Martha Allen, new Fiscal Director.

Committee needs to approve new authorized signatures for contracts. Motion to add Martha Allen made by Helen Spaulding, 2nd Rama Haidara. Motion carried.

Lindy presented proposed changes to the Vehicle Use Policy in the CAPCO Personnel Policies and Procedures. HR is currently researching possibility of adding minimum insurance coverage requirements to this policy. But, we do not have enough information at this time to make that proposal. The policy is being presented as is. Paula made suggestion to add requirement to provide proof of insurance and a correction to "closest" on the last page. Motion to approve with these corrections made by Paula Currie, 2nd Shawn Allen. Motion carried.

Lindy introduced proposed changes to the current 401(k) plan. Current plan includes making employer contributions to eligible employees at the end of the calendar year. All eligible employees employed as of 12/31 are eligible for contributions. With addition of full time HR Director and better reporting/tracking in Complete Payroll service, concerns about administration and not being able to make timely contributions has been addressed. Proposed change is to make contributions to eligible employees on the bi-weekly payroll schedule. Motion to approve by Helen Spaulding, 2nd Rama Haidara. Motion carried.

Discussed new time for the Executive Committee meetings. Committee agreed that the 3rd Thursday at 8:30 would work when Executive Committee meetings are needed.

Being no further business, meeting adjourned at 9:00.

Resolution of the Board of Directors

of

Cortland County Community

Action Program, Inc.

Resolution No.16-02

WHEREAS, the Cortland County Community Action Program, Inc. Executive Committee has reviewed the updated Vehicle Use Policy and has recommended accepting as presented, and

WHEREAS, the Cortland County Community Action Program, Inc. Board of Directors has reviewed the Vehicle Use Policy and accepts as presented.

IT IS HEREBY RESOLVED that on February 25, 2016 the Board of Directors adopts for acceptance the Vehicle Use Policy.

President

Date

Vehicle Usage and Safety

Employees in certain positions may be required to drive CAPCO or personal vehicles to conduct business on behalf of CAPCO. Employees must operate vehicles in a safe and responsible manner, and in compliance with all motor vehicle and traffic laws.

Driver's License

Any employee who drives a CAPCO or personal vehicle to conduct Agency business must possess a valid driver's license that is free from major infractions and meets Agency safety standards at the time of hire and throughout employment. Following a conditional offer of employment, the Agency will conduct Motor Vehicle Record (MVR) checks of final applicants and employees who apply for positions that explicitly or may involve driving. A MVR check will occur on an annual basis, or more or less frequently based on the business needs of the Agency, for all current employees whose positions may require the use of a vehicle to perform their job duties. All requests for information regarding an applicant's or employee's motor vehicle record or background will be in compliance with the Fair Credit Reporting Act (FCRA)

Employees who drive on Agency business must immediately notify their supervisor of any moving violations or license suspension or revocation during working or nonworking hours. An employee is not allowed to drive on Agency business with a suspended or revoked license. The employee is responsible for paying the cost of any traffic or parking tickets, moving violations, or fines that result from driving on Agency business.

If an employee's Agency driving privilege is suspended and that employee's position requires regular use of a vehicle in order to perform his/her job duties, the employee will either be reassigned to another comparable position if available, or he/she will be terminated for being unable to perform the duties of his/her job.

Use of Personal Vehicle for Agency Business

There may be times when an employee is asked to use his/her personal vehicle for Agency business purposes. An employee who drives a personal vehicle to conduct Agency business must have and provide proof of an acceptable auto liability insurance (for both bodily injury and property damage). If an employee's liability insurance lapses, the employee's supervisor must be notified immediately.

CAPCO does not assume any liability for injury to the public caused by the negligence of an employee who is driving a personal vehicle in the course of Agency business. CAPCO is not responsible for any damage to an employee's personal vehicle or loss or damage to personal property contained within the vehicle. In the event CAPCO is brought into a lawsuit involving an automobile accident caused by an employee, the employee's personal insurance coverage will provide protection for the employee and the Agency, followed secondarily by the Agency's insurance program.

Use of Agency Vehicles

Agency-provided vehicles may be assigned to employees for the purpose of conducting Agency business. Only authorized employees are allowed to drive Agency vehicles. Agency vehicles should be used only for authorized CAPCO business and may not be used for personal use or to transport unauthorized

individuals or materials. An employee is not permitted to transport program participants in an Agency vehicle unless they are conducting authorized Agency business. If transporting a program participant under the age of 18 without the parent or legal guardian, consent must be obtained from the parent or legal guardian prior to providing transportation. At no time are there to be riders in an Agency vehicle except authorized program participants and Agency staff. Unauthorized riders include, but are not limited to family members, friends, etc.

Operators of CAPCO vehicles are responsible for the safe operation and cleanliness of the vehicle and obeying all state traffic laws. Papers and garbage are to be removed from the vehicle at the end of each usage. Smoking is prohibited in CAPCO vehicles. Vehicles should be maintained in a safe and secure condition when not in use. It is the employee's responsibility to notify the appropriate Program Director when an Agency vehicle is in of maintenance or repair work.

Accidents involving a CAPCO vehicle must be reported to your immediate supervisor and Program Director immediately. They are responsible for reporting it immediately to the Executive Director or fiscal director.

Vehicle Safety Regulations

The use of safety belts is mandatory for operators and all passengers of CAPCO vehicles. The driver is responsible for the ensuring passengers wear their safety belts.

In accordance with New York State regulation, an employee is not allowed to make or receive calls or messages on a cell phone while operating a vehicle unless a headset or hands-free device is used. Cell phone calls and messages should be made when the vehicle is parked. It is illegal for drivers to use handheld portable electronic devices while their vehicle of operation is in motion. This includes a hand-held mobile telephone, laptop computer, pager, broadband personal communication device, two-way messaging device, electronic game, or portable computing device.

Employees must not operate a vehicle, personal or Agency provided, at any time when his/her ability to do so is impaired, affected, influenced by alcohol, illegal drugs, prescribed or over-the-counter medications, illness, fatigue, or injury.

Employees who drive Agency vehicles must become familiar with the vehicle before driving. Employees should check the glove box for to make sure the registration and insurance cards are available. Check lists and log-sheets must be filed out before and after the usage of an Agency vehicle.

Each CAPCO vehicle must have an updated insurance card in the glove compartment at all times. Please be sure that all employees using CAPCO vehicles know where to locate the card. Also, all CAPCO employees using CAPCO vehicles must carry a valid NYS Driver's license.

In case of an accident

Find the closest point to move your car off the road if possible.

Notify the police, even if there appears to be no injuries or damage to the vehicles.

Call medical aid if necessary

Remain at the scene unless there is danger, such as a fuel spill. If you must move away from your car, keep it in sight, so that you will see when the police or emergency vehicles arrive.

If this information can be obtained safely, record names, address of driver, witnesses and occupants of other vehicles and any medical personnel who may arrive on the scene. Obtain the license plate number of the other vehicles involved, insurance company names, date and time of the accident.

Note the weather and road conditions. One or both could have contributed to the accident, potentially affecting CAPCO's insurance and whether you are ticketed or charged with a crime.

Under no circumstance should an employee risk his or her own safety, or the safety of any passengers or witnesses to obtain the information listed above. If the other party or parties involved appear threatening in any way, stay in your vehicle if you can safely do so, and wait for law enforcement. If you cannot remain in your vehicle, maintain a safe distance from the threatening parties and wait for law enforcement.

Do not discuss the accident with anyone at the scene except law enforcement officers. No statements should be shared with anyone other than the law enforcement officers. Do not accept any responsibility for the accident. Do not argue with anyone.

Employees must notify their supervisor or the Executive Director of any accident, theft, or damage involving an Agency vehicle or personal vehicle being used for Agency business. Notification must happen as soon as practical, but no later the 24 hours following the incident.

As soon as all the above steps are taken, immediately report back to the office to begin the claim process. Any delay in notifying the Agency could affect the amount of the claim.

Resolution No.16-03

BOARD OF DIRECTORS RESOLUTION TO AMEND A PLAN

WHEREAS, the Board of Directors of Cortland County Community Action Program, Inc. (the Employer) has assembled in a meeting this 25th day of February 2016;

WHEREAS, the Employer established the 401(k) Profit-Sharing Plan (the Plan) to provide retirement benefits for employees of the Employer; and

WHEREAS, the Employer has the right to amend the Plan pursuant to the provisions of the Plan.

NOW, THEREFORE, BE IT RESOLVED THAT:

- 1) 401(k) Contributions to eligible employees will be made on the bi-weekly payroll schedule
- 2) This attached Plan Amendment is approved;
- 3) All other provisions and conditions of the Plan remain unchanged; and
- 4) Lindy Glennon, Executive Director (Officer(s) and agent(s) of the Employer)
(Name and Title)

is/are hereby authorized and directed to take such further action as may be necessary, appropriate or advisable to effectuate the foregoing resolutions.

The undersigned Paula Currie, Board President (Secretary of the Board or Board President) of the Employer hereby certifies that the foregoing resolutions were duly adopted by the Board of Directors at the meeting referenced herein, and that the documents attached are the true copies of the documents referenced in those resolutions.

Secretary of Board / Board President

Date

Resolution of the Board of Directors
of
Cortland County Community
Action Program, Inc.

Resolution No.16-04

WHEREAS, the Cortland County Community Action Program, Inc. Executive Committee has reviewed the change to the Community Services Block Grant Authorized Signatories to remove Colleen Kania as a signatory for Vouchers and Financial Reports and add Martha Allen, Finance Director and has recommended accepting as presented, and

WHEREAS, the Cortland County Community Action Program, Inc. Board of Directors has reviewed the Authorized Signatories and accepts as presented.

IT IS HEREBY RESOLVED that on February 25, 2016 the Board of Directors adopts for acceptance the Authorized Signatories.

President

GRANTEE AUTHORIZED SIGNATURES
COMMUNITY SERVICES BLOCK GRANT
2016 CSBG Contract

Grantee: Cortland County Community Action Program, Inc. Date 2/25/2016
Contract # C1000292

DOCUMENT	TITLE	NAME	SIGNATURE
Contracts/Amendments	1) CEO/Executive Director	Lindy Glennon	
	2) Board Chairperson	Paula Currie	
Financial Reports	1) CEO/Executive Director	Lindy Glennon	
	2) Fiscal Officer/Controller	Martha Allen	
Program Reports	1) CEO/Executive Director	Lindy Glennon	
	2) Board Chairperson	Paula Currie	
Vouchers	1) CEO/Executive Director	Lindy Glennon	
	2) Fiscal Officer/Controller	Martha Allen	

The above authorizations were approved by the board of directors on 25-Feb-16.
(Date)

Name of Board Chairperson: Paula Currie

Signature: _____
(Board Chairperson) (Date)

If more than two persons are authorized to sign, copy and attach additional sheets.

Check here if extra sheets are attached [____].

**FAILURE TO SUBMIT THIS FORM WITH ORIGINAL SIGNATURES INDICATES THAT ONLY THE
BOARD CHAIRPERSON IS AUTHORIZED TO SIGN ALL CSBG DOCUMENTS.**

**IF CHANGES OCCUR DURING THE CONTRACT PERIOD, A REVISED
AUTHORIZED SIGNATURES FORM MUST BE SUBMITTED.**

Finance Committee
February 17, 2016

Members present: Paula Currie, Luann King, Carole Ann Davies, Helen Spaulding, Penny Prignon. Staff: Lindy Glennon, Martha Allen (Fiscal Director), Shelley Barnhart.

Meeting called to order at 12:30 p.m. Introduced Martha Allen as the new Fiscal Director. Martha started today.

Shelley presented the financial report (see attached). All reports, filings, vouchers are current. Over 90 days on Aged AP are due to HS/EHS leases, other maintenance contracts. Billing for CDPAP is current, billing is completed in Fiscal office as of January 2016.

CDPAP: Income statement for December does have a deficit being recognized. The deficit was less than we were originally anticipated with reduction of Medicaid reimbursement rate. Lindy shared that CAPCO has received notification of the 2016 Medicaid rate. It is \$15.97 per hour (\$.25 increase over 2015). CAPCO was also approved for an Enhanced CDPAP rate of an additional \$1.09 per hour. We are currently working with Kristen Monroe and DSS to identify how to refer participants as eligible for this enhanced rate. Bettina Lipphardt, Auditor, is meeting with staff next week to review cost report and determine if there are costs that are not being captured in they report. If determined not to be complete, we can request a hearing and review by March 31, 2016. Carole Ann asked how this deficit impacts the general revenue and concern that if Medicaid continues to decrease, impact on Agency reserves. This is definitely a concern and one that we are working to address. Lindy reiterated need for and plan to identify funding (grant to MacDonald Foundation) for Development Director.

EARLY CHILDHOOD DEVELOPMENT: Across all contracts, a deficit is not anticipated. We have started the budget process for next year's contract. This will be presented to the Finance Committee today for review and approval.

ENERGY SERVICES DEPARTMENT: December income statement for WAP is showing a deficit but expenses are being moved from WAP to program income, to help with this. NYSERDA is showing a deficit, Denise thinks two additional jobs with help this contract. Shelley and Denise worked on a formula to make sure all of program ADM is covered in NYSERDA work. This will help to ensure NYSERDA is billed covering all ADM cost. Should receive direction from HCR soon regarding the 2016 budget, program starting April 1, 2016. Carole Ann Davies asked how things are progressing in terms of fee for service work. Lindy shared that we are still working towards this. We are doing some, but still want that to grow. We have MOU's in place with Thoma Development to do audits that are being paid for that is revenue outside of HCR and NYSERDA contracts.

FAMILY DEVELOPMENT DEPARTMENT: Grants are being written to Looking to complete grant Dollar General and Youth Bureau to help with the GED and Literacy program.

WIC/ EPC : Contracts on track. No deficit anticipated. Kirsten and Shelley are updating to account for additional clerk in WIC. Still working to get permission from Regional Office to fill that position.

Motion to receive and file made by Carole Ann Davies, 2nd Helen Spaulding. Motion carried.

Lindy presented proposed Head Start and Early Head Start refunding budgets the T&TA budgets for both. The HS contract is for \$1,673,815 with \$630,025 inkind. The EHS budget is \$972,486 with \$31,500 inkind. EHS T&TA is \$24,000 and HS T&TA is \$22,400. (See attached). No proposed changes in locations, classrooms, staffing, etc. Motion to approve by Helen Spaulding, 2nd Carole Ann Davies. Motion carried.

Carole Ann reminded committee that Bettina Lipphardt, auditor, had offered training fiscal training for Board. With new Board members coming on, this would be a good time to address this. Lindy will discuss with Bettina at meeting 2/24.

No further business, meeting adjourned 1:20 p.m.

CORTLAND COUNTY COMMUNITY ACTION PROGRAM, INC.

FINANCE DIRECTOR MONTHLY CHECKLIST

FOR THE MONTH December 2015

Submitted by Shelley Barnhart on February 17, 2015

ITEM/REPORT	DUE	DATE FILED
Subsidiary ledgers in balance for the month?	N/A	yes
bank accounts have been reconciled through?	N/A	Jan-16
Accounts receivable over 90 days past due	N/A	yes
Accounts payable over 90 days past due	N/A	none
NYS Tax filing	3/20/2016	
Coporate Tax Returns (990's)	5/15/2016	
Quarterly payroll tax returns filed by complete payroll?	qtrly	yes
Form 1099's	1/31/2016	1/15/2016
Program Reports		
CSBG 2015-2016 py		
20% Expenditure report		
45% Expenditure report		
70% Expenditure report		
1st Qtr Program/Fiscal Attestation Forms	1/31/2016	
2nd Qtr Program/Fiscal Attestation Forms	4/30/2016	
3rd Qtr Program/Fiscal Attestation Forms	7/31/2016	
4th Qtr Program/Fiscal Attestation Forms	10/31/2016	
1st qtr MWBE Reports	1/10/2016	1/7/2016
2nd qtr MWBE Reports	4/10/2016	
3rd qtr MWBE Reports	7/10/2016	
4th qtr MWBE Reports	10/10/2016	
Unaudited Financial Statements	11/30/2016	
Energy Services		
WAP 15-16 py		
Monthly Voucher to Energy Services for presentation to DHCR	15th of mo.	2/11/2016
1st qtr MWBE Reports	7/10/2015	7/9/2015
2nd qtr MWBE Reports	10/10/2015	10/9/2015
3rd qtr MWBE Reports	1/10/2016	1/8/2016
4th qtr MWBE Reports	4/10/2016	
Unaudited Financial Statements	7/30/2016	
Head Start & Early Head Start 15-16 py		
Quarterly Form 425:		
1ST QTR	4/30/2016	
2ND QTR	7/30/2016	
3RD QTR	10/30/2016	
4TH QTR	1/30/2017	
Form 425 due:		
semi-annual	1/30/2016	1/11/2016
preliminary annual	7/30/2016	
final	10/30/2016	
WIC 15-16py		
Monthly Voucher	Monthly 15th	2/11/2016
Final Voucher	11/15/2016	
CDPAP		
Cost Report	9/15/2015	12/2/2015

FINANCE COMMITTEE REPORT
SUMMARY OF DECEMBER 2015 FINANCIAL STATEMENTS
PRESENTED BY Shelley Barnhart
February 17, 2016

AGENCY

All reporting requirements have been met timely.

Over 90 days on Aged AP are due to HS/EHS leases, other maintenance contracts.

CDPAP

Billing for CDPAP is current, billing is completed in Fiscal office as of January 2016. Income statement for December does have a deficit being recognized.

EARLY CHILDHOOD DEVELOPMENT

Across all contracts, a deficit is not anticipated. We have started the budget process for next year's contract.

ENERGY SERVICES DEPARTMENT

December income statement for WAP is showing a deficit but expenses are being moved from WAP to program income, to help with this. NYSEDA is showing a deficit, Denise thinks two additional jobs with help this contract. Denise is concerned with her program ADM not being covered, we talked about setting a formula to make sure all of program ADM is covered. This will help to ensure NYSEDA is billed covering all ADM cost.

FAMILY DEVELOPMENT DEPARTMENT

Looking to complete grant applications for Dollar General and Youth Bureau to help with the GED program, this was completed on the fiscal end 2/12/16.

WIC

The WIC and EPC contracts, a deficit is not anticipated. Kirsten and I are updating to account for additional clerk in WIC.

CAPCO

Balance Sheet

	12/31/2015	11/30/2015	10/31/2015	9/30/2015	8/31/2015	7/31/2015
ASSETS						
CURRENT ASSETS						
Cash	\$593,096.68	\$524,818.88	\$226,140.47	\$561,552.39	\$642,623.46	\$440,841.87
Grants Receivable	\$269,119.56	\$335,697.06	\$446,806.74	\$317,578.20	\$244,783.09	\$487,288.05
Accounts Receivable						
1-125100-CI ACCOUNTS RECEIVABLE	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
1-125100-ES ACCOUNTS RECEIVABLE	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
1-125100-M ACCOUNTS RECEIVABLE	\$349,903.18	\$381,448.56	\$350,511.85	\$308,075.01	\$275,790.85	\$287,758.07
1-125101-M Less: ALLOWANCE FOR DOUBTFUL	\$11,000.00	\$11,000.00	\$11,000.00	\$11,000.00	\$11,000.00	\$11,000.00
1-125300-M MEDICAID VARIANCE RECEIVABLE	(\$196.36)	(\$196.36)	(\$196.36)	(\$196.36)	(\$196.36)	(\$196.36)
Net Accounts Receivable	<u>\$338,706.82</u>	<u>\$370,252.20</u>	<u>\$339,315.49</u>	<u>\$296,878.65</u>	<u>\$264,594.49</u>	<u>\$276,561.71</u>
Prepaid Expenses	\$152,271.56	\$107,677.83	\$135,552.80	\$147,527.64	\$146,822.34	\$11,963.55
TOTAL CURRENT ASSETS	<u>\$1,353,194.62</u>	<u>\$1,338,445.97</u>	<u>\$1,147,815.50</u>	<u>\$1,323,536.88</u>	<u>\$1,298,823.38</u>	<u>\$1,216,655.18</u>
PROPERTY AND EQUIPMENT						
Vehicles, furniture and equipment	\$740,057.15	\$739,139.67	\$742,486.73	\$740,152.99	\$738,681.09	\$738,363.81
Building	\$1,172,557.16	\$1,172,557.16	\$1,148,774.16	\$1,136,660.16	\$1,095,283.18	\$1,071,202.85
NET PROPERTY AND EQUIPMENT AT COST	<u>\$1,912,614.31</u>	<u>\$1,911,696.83</u>	<u>\$1,891,260.89</u>	<u>\$1,876,813.15</u>	<u>\$1,833,964.27</u>	<u>\$1,809,566.66</u>
Less Accumulated Depreciation	<u>(\$996,684.41)</u>	<u>(\$996,684.41)</u>	<u>(\$996,684.41)</u>	<u>(\$996,684.41)</u>	<u>(\$996,684.41)</u>	<u>(\$978,978.64)</u>
TOTAL PROPERTY AND EQUIPMENT	<u>\$915,929.90</u>	<u>\$915,012.42</u>	<u>\$894,576.48</u>	<u>\$880,128.74</u>	<u>\$837,279.86</u>	<u>\$830,588.02</u>
SOFTWARE DEVELOPMENT COSTS	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
TOTAL ASSETS	<u><u>\$2,269,124.52</u></u>	<u><u>\$2,253,458.39</u></u>	<u><u>\$2,042,391.98</u></u>	<u><u>\$2,203,665.62</u></u>	<u><u>\$2,136,103.24</u></u>	<u><u>\$2,047,243.20</u></u>
LIABILITIES AND NET ASSETS						
CURRENT LIABILITIES						
Accounts Payable	\$227,256.48	\$299,845.05	\$241,272.25	\$490,912.99	\$344,965.14	\$144,977.14
Payroll taxes and Accruals	\$1,382.96	(\$21,490.00)	(\$188,245.42)	(\$203,884.33)	(\$127,332.16)	(\$41,894.97)
Other Current Liabilities	\$2,625.63	\$6,637.63	\$6,637.63	\$5,219.72	\$2,727.63	\$2,058.61
Deferred Income	\$137,946.11	\$113,113.25	\$19,102.72	\$74,222.03	\$77,270.97	\$82,245.97
Total CURRENT LIABILITIES	<u>\$369,211.18</u>	<u>\$398,105.93</u>	<u>\$78,767.18</u>	<u>\$366,470.41</u>	<u>\$297,631.58</u>	<u>\$187,386.75</u>
LONG-TERM DEBT	\$421,823.98	\$422,537.39	\$423,219.17	\$423,927.65	\$424,604.37	\$425,278.61
TOTAL LIABILITIES	<u>\$791,035.16</u>	<u>\$820,643.32</u>	<u>\$501,986.35</u>	<u>\$790,398.06</u>	<u>\$722,235.95</u>	<u>\$612,665.36</u>
NET ASSETS	<u>\$1,478,089.36</u>	<u>\$1,432,815.07</u>	<u>\$1,540,405.63</u>	<u>\$1,413,267.56</u>	<u>\$1,413,867.29</u>	<u>\$1,434,577.84</u>
Total LIABILITIES AND NET ASSETS	<u><u>\$2,269,124.52</u></u>	<u><u>\$2,253,458.39</u></u>	<u><u>\$2,042,391.98</u></u>	<u><u>\$2,203,665.62</u></u>	<u><u>\$2,136,103.24</u></u>	<u><u>\$2,047,243.20</u></u>

CAPCO

Income Statement

1/1/15-12/31/15 CAPCO ADMINISTRATION

1/7/2016 02:00:57 PM

LINE ITEM	BUDGET		ACTUAL		BUDGET		ACTUAL		FORECAST	TOT CONTRACT	REMAINING
	TOT BUDGET	12/1/2016 12/31/2016	12/1/2015 12/31/2015	1/1/2015 12/31/2016	1/1/2015 12/31/2015						
ADM - ADMINISTRATIVE CHARGES											
REVENUE											
OTHER REVENUE											
OTHER INCOME	0	0	1,365	0	2,410	482	2,892	-2,892			
Total OTHER REVENUE	0	0	1,365	0	2,410	482	2,892	-2,892			
Total REVENUE	0	0	1,365	0	2,410	482	2,892	-2,892			
EXPENSES											
PERSONNEL											
SALARIES/WAGES											
SALARY/WAGE EXPENSE	215,217	0	14,255	215,217	215,750	43,150	258,900	-43,683			
NEW ACCRUED BENEFIT TIME	19,864	0	1,274	19,864	20,162	4,032	24,195	-4,331			
Total SALARIES/WAGES	235,081	0	15,529	235,081	235,913	47,183	283,095	-48,014			
FRINGES											
FICA EXPENSE	16,464	0	1,037	16,464	15,683	3,137	18,820	-2,356			
UNEMPLOYMENT INSURANCE EXPENSE	4,244	0	5	4,244	3,815	763	4,578	-334			
WORKERS COMP EXPENSE	810	0	111	810	1,442	288	1,730	-920			
DISABILITY INSURANCE EXPENSE	324	0	0	324	376	75	452	-128			
GROUP INSURANCE EXPENSE	29,410	0	0	29,410	29,999	6,000	35,999	-6,589			
401-K EXPENSE	6,457	0	311	6,457	5,104	1,021	6,125	332			
Fringes on Accrued Leave Earned	2,781	0	178	2,781	2,823	565	3,387	-606			
Total FRINGES	60,490	0	1,641	60,490	59,243	11,849	71,091	-10,601			
Total PERSONNEL	295,571	0	17,170	295,571	295,156	59,031	354,187	-58,616			
OTHER THAN PERSONNEL											
OFFICE SUPPLIES	5,275	0	530	5,275	7,971	1,594	9,565	-4,290			
FOOD & FOOD SUPPLIES	0	0	0	0	136	27	164	-164			
COMMERCIAL INSURANCE	2,823	0	221	2,823	2,707	541	3,249	-426			
VEHICLE FUEL	0	0	0	0	0	0	0	0			
PARKING LOT RENTAL	752	0	54	752	620	124	744	8			
BOARD EXPENDITURES	0	0	0	0	50	10	60	-60			
POSTAGE	75	0	0	75	0	0	0	75			
DUPLICATING & PRINTING	0	0	0	0	0	0	0	0			
INTERNET SERVICE	913	0	56	913	570	114	684	229			
TELEPHONE	1,465	0	106	1,465	1,165	233	1,398	67			

Computer & Software Expense	7,088	0	124	7,088	6,932	1,386	8,318	-1,230
MEETING EXPENSE	0	0	0	0	80	16	96	-96
TRAINING & TECHNICAL AST	0	0	0	0	1,390	278	1,668	-1,668
STAFF RECOG.	0	0	0	0	840	168	1,008	-1,008
Staff Development	0	0	0	0	1,096	219	1,315	-1,315
LOCAL TRAVEL	0	0	0	0	5	1	6	-6
OUT OF TOWN TRAVEL	62	0	15	62	45	9	54	8
DUES & SUBSCRIPTIONS	410	0	0	410	9,707	1,941	11,648	-11,238
PERMITS, FEES, & RENTALS	231	0	0	231	348	70	417	-186
ADVERTISING	1,155	0	828	1,155	1,037	207	1,244	-89
BUILDING ALLOCATION	19,500	0	1,837	19,500	19,079	3,816	22,895	-3,395
Total OTHER THAN PERSONNEL	39,749	0	3,769	39,749	53,778	10,756	64,534	-24,785
ADMINISTRATION								
FINANCIAL AUDIT	0	0	0	0	507	101	608	-608
PAYROLL PROCESSING	2,097	0	381	2,097	4,228	846	5,074	-2,977
EAP SERVICES	6,923	0	601	6,923	6,713	1,343	8,055	-1,132
ADMINISTRATIVE ALLOCATION	-340,482	0	-21,680	-340,482	-360,041	-72,008	-432,049	91,567
Total ADMINISTRATION	-331,462	0	-20,697	-331,462	-348,593	-69,719	-418,312	86,850
Total EXPENSES	3,858	0	243	3,858	341	68	409	3,449
NET SURPLUS/(DEFICIT)	-3,858	0	1,122	-3,858	2,069	414	2,483	-6,341

Resolution of the Board of Directors

of

Cortland County Community

Action Program, Inc.

Resolution No.16-05

WHEREAS, the Cortland County Community Action Program, Inc. Finance and PP&E Committees has reviewed the Head Start/Early Head Start budgets, T&TA budgets and the Executive Summary for the 2016-2017 Refunding Application and has recommended accepting as presented, and

WHEREAS, the Cortland County Community Action Program, Inc. Board of Directors has reviewed the Head Start/Early Head Start's budgets and Executive Summary and accepts as presented.

IT IS HEREBY RESOLVED that on February 25, 2016 the Board of Directors adopts for acceptance the Head Start/Early Head Start Refunding Application for the 2016-2017 program year.

President

Date

CAPCO Head Start Budget and Non-Federal Share and Justifications

Program Type	Line Item #	Budget Categories	Budget Category Section	Line Item Description	Program Operations	Program Operations Justification	Non-Federal Share	Non-Federal Justification
Head Start	a.1	Personnel	Child Health and Development Personnel	Program Managers and Content Area Experts	\$114,754	To cover the costs of the Education/Special Needs Coordinator, the Health/Nutrition Coordinator, 2 Classroom Supervisors, and 1 Education Assistant. Primary responsibilities is to develop and implement high quality services are being provided to children and families. The salaries fund 4 of the positions full time, 52 weeks. One Classroom Supervisor is full time, 44 weeks per year. All 4 positions are shared with EHS except for 1 Classroom Supervisor who is all Head Start.	\$7,889	This amount is used from UPK funds to assist in covering the Education/Special Needs Coordinator, as well as the Health/Nutrition Coordinator salaries. Primary responsibilities to develop and implement high quality services and ensure they are being provided in the UPK classrooms. These positions are 52 weeks, but only operate 44 weeks for UPK.
Head Start	a.2	Personnel	Child Health and Development Personnel	Teachers / Infant Toddler Teachers	\$224,770	To pay the salaries of 13 Head Start Teachers who provide services to the children in the area of Early Childhood Development. The salaries fund these positions full time, 44 weeks per year.	\$44,496	This amount is used for five (5) teachers necessary to provide services to the children in the area of Early Childhood Development from UPK funds. The salaries fund these positions for 44 weeks.
Head Start	a.5	Personnel	Child Health and Development Personnel	Teacher Aides and Other Education Personnel	\$264,550	To pay the salaries of 21 positions; 13 Teacher Assistants, 5 Classroom Assistants, and 3 Break Aides. TA's assist Teachers, CA's serve as a 3rd person in the classroom, and BA's assist in breaking education staff. The salaries fund the Teacher Assistant positions full time for 44 weeks per year. All 3 Classroom Assistants are 44 weeks; 1 is 16.5 hours/week, 3 are 27.5 hours/week, and 1 is 37.5 hours/week. The 3 Break Aide's are all 25 hours per week, 44 weeks per year.	\$33,350	This amount is used from UPK funds to cover part of the salaries of five (5) Teacher Assistant positions in the UPK classrooms. The salaries fund the positions for 44 weeks.
Head Start	a.6	Personnel	Child Health and Development Personnel	Health / Mental Health Services Personnel	\$58,048	To pay the salaries of 3 positions; 2 Health Assistants and 1 Mental Health Specialist. Both Health Assistant's assist is providing high quality services in Health. The Mental Health Specialist is a referral to the children in paly therapy, assists 1:1 Aides (when applicable) with behavioral children and is a resource for families, as well as staff. All 3 positions are full time; 1 HA is 52 weeks/year, 1 HA is 45 weeks/year, and the MHS is full time 44 weeks per year and the remainder 8 weeks in the summer she is part-time to assist the Early Head Start Program and prepare for the following year.	\$10,761	This is an average estimated reimbursement from Cortland County (the local DSS) for part of the Mental Health Specialist's salary. It is based on what has been received from June -December and then an average was completed through May of 2016. This is for her part in providing play therapy/counseling services to children who have been identified through the local CPSE committee. Our program received a \$70.00/hour reimbursement based on the notes provided by the Mental Health Specialist, as well as the attendance of the child. This is a full time through June and the summers, she is part-time. This is a 52 week position.
Head Start	a.7	Personnel	Child Health and Development Personnel	Disabilities Services Personnel	\$26,202	To cover the salary of 1 position; the Special Needs Specialist who assists the Coordinator in delivering high quality services to the Head Start children with special needs. This is a full time position, 52 week per year.	\$0	N/A

CAPCO Head Start Budget and Non-Federal Share and Justifications

Program Type	Line Item #	Budget Categories	Budget Category Section	Line Item Description	Program Operations	Program Operations Justification	Non-Federal Share	Non-Federal Justification
Head Start	a.8	Personnel	Child Health and Development Personnel	Nutrition Services Personnel	\$19,874	To cover the salaries of 3 positions; 1 Nutrition Supervisor and 2 Kitchen Assistants. The Nutrition Supervisor oversees the Cook and Assistant Cook (these are funded by USDA monies, as well as the majority of the Nutrition Supervisor). The Nutrition Supervisor also oversees the 2 Kitchen Assistants to ensure healthy meals and snacks are being served and delivered in a timely manner. The Nutrition Supervisor is full time, 52 weeks per year. The Cook and Assistant Cook are funded by USDA funds and 1 is full time and 1 is part time; both are 52 weeks per year. The Kitchen Assistants are both part time; 1 is 44 weeks per year and 1 is 52 weeks per year. All these positions are shared with EHS except for one Kitchen Assistant who is solely Head Start.	\$0	N/A
Head Start	a.9	Personnel	Child Health and Development Personnel	Other Child Services Personnel-Substitutes	\$11,946	To cover the salaries of on call substitutes for education staff who may call in sick or take a personal day. This is for 6 part time positions and are on a current list of subs for 52 weeks per year.	\$0	N/A
Head Start	a.10	Personnel	Family and Community Partnership Personnel	Program Managers and Content Area Experts	\$51,650	To cover two positions; the Family & Community Partnerships Coordinator and the Family & Community Partnerships Assistant. Both ensure high quality services in Family Services and Community/Family Engagement are developed and implemented. They also supervise the Family Advocates, Home Visitors, and Family Engagement Specialists, as well as maintain ERSEA regulations, and assist Family Advocates and Home Visitors with the PFCE framework. These positions are full time, 52 weeks per year. These two positions are shared with EHS.	\$1,496	This amount is used from the UPK funds to cover part of the Family Services Assistant salary whose primary responsibility is ERSEA and the UPK applications. This is a full time positions for 52 weeks per year.
Head Start	a.11	Personnel	Family and Community Partnership Personnel	Other Family and Community Partnerships Personnel	\$96,612	To cover the salaries of 6 positions; 4 are Family Advocates and 2 are Family Engagement Specialists with Family Advocate responsibilities too. They help families develop and implement Family Partnership Agreements, ensure home visits and notes are completed, and assist education staff and families with monthly Parent Action Group meetings. 3 are full time, 44 weeks per year for HS. 1 is full time, 52 weeks per year and works with EHS too. The 2 Family Engagement Specialists are full time, 52 weeks per year. These are all shared positions with EHS except for 3 Family Advocates who are solely Head Start.	\$0	N/A
Head Start	a.12	Personnel	Program Design and Management Personnel	Executive Director / Other Supervisor of HS Director	\$18,786	To cover a portion of 1 position; the Executive Director of the Agency. This position oversees all of the Director's in the agency and their programs. This is a full time position, 52 weeks per year. This position is shared with EHS.	\$579	This amount is used from UPK funds to assist in covering the Executive Director's salary to oversee the day to day operations of the UPK program. This is a full time position, 52 weeks per year.

CAPCO Head Start Budget and Non-Federal Share and Justifications

Program Type	Line Item #	Budget Categories	Budget Category Section	Line Item Description	Program Operations	Program Operations Justification	Non-Federal Share	Non-Federal Justification
Head Start	a.13	Personnel	Program Design and Management Personnel	Head Start / Early Head Start Director	\$40,038	To pay a portion of the Head Start Director's salary to manage the day to day operations of the Head Start Program. This is a full time position, 52 weeks per year. This position is shared with EHS.	\$4,853	This amount is used from the UPK funds to cover part of the Head Start Director's salary to manage the day to day operations of the UPK/Head Start classrooms. This is a full time positions, 52 weeks per year.
Head Start	a.14	Personnel	Program Design and Management Personnel	Program Design & Management Coordinator	\$30,869	To pay a portion of the Program Design & Management Coordinator's salary to assist the Head Start Director in managing day to day operations, fiscal responsibilities, program governance, and supervising of clerical and agency receptionist. This is a full time position, 52 weeks per year. This position is shared with EHS.	\$2,479	This amount is used from UPK funds to pay a portion of the Program Design & Management Coordinator's salary to assist the Head Start Director in managing the day to day operations, as well as some fiscal responsibilities for UPK and HS. Also, completes the UPK application on an annual basis. This is a full time position, 52 weeks per year.
Head Start	a.16	Personnel	Program Design and Management Personnel	Clerical Personnel	\$17,316	To pay a portion of 1 Clerical position; the Office Assistant who supports the day to day operations of Head Start, transportation with school districts, maintains staff vehicles, and assists all functional area Coordinator's in there areas. This is a full time position, 52 weeks per year. This position is shared with EHS.	\$0	N/A
Head Start	a.17	Personnel	Program Design and Management Personnel	Fiscal Personnel	\$38,986	To pay a portion of 3 salaries in the fiscal department; the Finance Director, the Assistant Finance Director, and the Bookkeeper. They manage the fiscal operations of the Head Start Program. These positions are full time, 52 weeks per year and are shared with EHS.	\$1,201	This amount is used from UPK funds to help cover the Finance Director, Assistant Finance Director, and bookkeeper's salary of managing the fiscal responsibilities of the UPK grant. These 3 positions are full time, 52 weeks per year.
Head Start	a.18	Personnel	Program Design and Management Personnel	CAPCO Assistant Director	\$2,211	To pay a portion of one salary; the CAPCO Assistant Director. This person is responsible for all computer software maintenance and upkeep to the Head Start Program. This is a full time position, 52 weeks per year and is shared with EHS.	\$68	This amount is used from UPK funds to help cover the salary of the CAPCO Assistant Director. This person is responsible for the computer software maintenance and upkeep for the UPK classrooms. This is a full time position, 52 weeks per year.
Head Start	a.18	Personnel	Program Design and Management Personnel	Human Resources Director	\$10,787	To pay a portion of one position; the Human Resources Director. This person supports Human Resources, manages all Head Start personnel files and training logs for staff. This is a full-time position, 52 weeks per year and is shared with EHS.	\$332	This amount is used from UPK funds to cover part of the HR Director's salary who assists HS/UPK employees with Human Resources information, personnel files, and training logs. This is a full time position, 52 weeks per year.
Head Start	a.18	Personnel	Program Design and Management Personnel	CAPCO Receptionist	\$8,470	To pay a portion of one position; the Agency Receptionist. Answers phones for Agency, greets visitors, and assists with copying, postage and ordering of supplies for Head Start and EHS. This is a full time position, 52 weeks per year and is shared with EHS.	\$62	This amount is used from UPK funds to help cover the Agency Receptionist position who answers phones, makes copies, and distributes mail on behalf of the UPK classrooms. This is a full time position, 52 weeks per year.
Head Start	b.1	Fringe Benefits		Social Security (FICA), State Disability, Unemployment (FUTA), Worker's Compensation, State Unemployment Insurance (SUI)	\$137,958	To pay the costs of 70 employees Social Security, State Disabilities, Worker's Compensation, and State Unemployment.	\$12,565	This amount is used from UPK funds for the portion of staff to designate towards their fringe benefits.
Head Start	b.2	Fringe Benefits		Health / Dental / Life Insurance	\$208,731	To pay the costs of the Health and Dental Insurance for the employees participating in the agency plans.	\$26,918	This amount is used from UPK funds for the portion of staff to designate towards the Health and Dental Insurance plans for the staff who participate in one of the Agency Health and Dental plans.
Head Start	b.3	Fringe Benefits		Retirement	\$29,192	To pay retirement benefits of the employees who participate in the Agency retirement plan.	\$2,508	This amount is used from UPK funds for the portion of staff to designate towards their retirement plans, if they elect to participate in the retirement plans.
Head Start	b.4	Fringe Benefits		Accrued Time Benefit	\$42,877	To pay the Head Start portion of staff to designate towards their fringe on accrued leave earned.	\$1,935	This amount is used from UPK funds for the portion of staff to designate towards their fringe on accrued leave earned.

CAPCO Head Start Budget and Non-Federal Share and Justifications

Program Type	Line Item #	Budget Categories	Budget Category Section	Line Item Description	Program Operations	Program Operations Justification	Non-Federal Share	Non-Federal Justification
Head Start	c.1	Travel		Staff Out-Of-Town Travel	\$19	Administrative allocation for staff out of town travel.	\$0	N/A
Head Start	e.1	Supplies		Office Supplies	\$5,333	Funds are made available to purchase office supplies necessary to support services to children and families. This includes pens, paper, pencils, post stickers, tape, laminating materials, printer toners, and other office supplies. The office supplies are utilized by all Head Start staff.	\$0	N/A
Head Start	e.2	Supplies		Child and Family Services Supplies	\$15,000	These funds are education supplies and program materials which are needed to support the children and families enrolled in Head Start. These supplies include trucks, dolls, appropriate multicultural resources for classrooms, construction paper, paints, computers, games, curriculum materials, and materials needed each year in the classrooms whether buying new or replacing old worn out materials such as cots, chairs, tables, etc.	\$0	N/A
Head Start	e.4	Supplies		Other Supplies-Medical	\$2,500	These funds pay the costs for medical supplies such as gloves for the classrooms, scales, thermometers, materials for first aid kits, and other medical items needed for classroom utilization.	\$0	N/A
Head Start	e.4	Supplies		Other Supplies-Disabilities	\$1,000	To pay for program supplies needed in the classrooms such as developmentally appropriate supplies for children who may need specific supplies to improve skills such as larger crayons, rocking chairs, timers, and other supplies deemed necessary.	\$0	N/A
Head Start	e.4	Supplies		Other Supplies	\$0	N/A	\$0	N/A
Head Start	f.1	Contractual		Administrative Services (e.g., Legal, Accounting)	\$10,858	This is for payroll processing and financial audit fees on behalf of Head Start. This is the portion of anticipated costs resulting from agency wide external audit procedures such as internal controls, agency legal fees, and Head Start's portion for payroll processing of checks.	\$1,100	To pay the UPK portion for payroll processing and financial audit fees for the UPK program and staff.
Head Start	f.2	Contractual		Health / Disabilities Services	\$1,500	This is used for the speech screenings for Head Start children provided by the local SUNY Cortland College, as well as any necessary dental follow-up needed for Head Start children.	\$0	N/A
Head Start	f.4	Contractual		Child Transportation Services	\$0	N/A	\$366,962	This is the portion of non federal share for transportation costs received by 3 school districts. They each have a cost per child to transport and agreements are on file, as well as transportation waivers for bus monitors and child restraint systems. For all school districts the formula is total # of children eligible for transportation x school district cost per child per day for transportation x # of miles from school to furthest child's home and back x total # of days in school year. McGraw is 5 children x \$4.55/child/day x 13 miles x 175 days = \$ \$51,756.25. Homer is 9 children x \$6.74/child/day x 27 miles x 175 days = \$286,619.00, and Marathon is 8 children x \$6.13/child/day x 21 miles x 175 days = \$180,222.00 for a grand total of \$518,597.00.
Head Start	f.5	Contractual		Training and Technical Assistance	\$0	N/A	\$0	N/A

CAPCO Head Start Budget and Non-Federal Share and Justifications

Program Type	Line Item #	Budget Categories	Budget Category Section	Line Item Description	Program Operations	Program Operations Justification	Non-Federal Share	Non-Federal Justification
Head Start	f.8	Contractual		Other Contracts	\$3,439	This is the Head Start portion to pay for the Employee Assistance Program (EAP), as well as parking lot rental for staff to be able to park during work days.	\$24	This is the portion of UPK funds which is designated to parking lot rental.
Head Start	h.2	Other		Rent	\$86,244	This portion of funds are utilized to pay rent for 13 Head Start classrooms located throughout Cortland County.	\$51,900	This is the UPK portion of rent for the UPK operated classrooms in the Cortland School District; Randall, Parker, YMCA, and Smith Centers. Cinquanti Real Estate completed a Broker Price opinion for HS and EHS. This analysis is based on commercial square footage values, current market conditions and locations. Also included are inclusions of amenities such as parking, pool, kitchen use, and playground use for properties in similar locations. This was completed on 8/21/2015 and is done every three years.
Head Start	h.4	Other		Utilities, Telephone	\$18,995	These funds are used for the utility costs for 13 Head Start classrooms, as well as the main office space. In addition, it is telephone usage costs for all Head Start classrooms, the main office, and the Head Start Director's cell phone. This line also supports all internet services throughout all the Head Start classrooms and main office.	\$60	This is the portion of utilities, internet services; and phone service for the UPK operated classrooms.
Head Start	h.5	Other		Building and Child Liability Insurance	\$3,613	To pay the cost of the commercial and child accident insurance required by the agency to conduct activities according with regulations and standards.	\$463	This is the portion of building and child liability and commercial insurance for the UPK classrooms in the Cortland School District.
Head Start	h.6	Other		Building Maintenance / Repair and Other Occupancy	\$36,401	These funds are utilized for the main office trash removal, janitorial maintenance of all Head Start centers and the main office. This includes carpet cleaning, janitor cleaning, snow plowing, as well as building allocation which includes a percent of the main office space in the building based on the HS square footage.	\$800	This is the portion of building maintenance, janitorial maintenance, and building allocation for the UPK classrooms in the Cortland School District.
Head Start	h.8	Other		Local Travel	\$7,500	To provide mileage reimbursement for staff to conduct teacher and social services home visit, training, and other activities within the service areas. The reimbursement rates shall be consistent with the agency travel policies which is \$0.565/mile.	\$0	N/A
Head Start	h.11	Other		Volunteers	\$0	N/A	\$52,524	Reviewed for the last 12 months of actual charges from 10/14 through 10/15 and applied the 74% to Head Start and 26% to Early Head Start for parents, community members, paraprofessionals, and professionals. Head Start's 74% portion is equal to \$52,524.00. Parent rate is \$10.00/hour and the paraprofessional rate is \$12.50/hour and professionals are generally \$30.00/hour unless the professionals set their own rate. In addition, Policy Council members are considered professionals and their rate is set at \$20.00/hour.
Head Start	h.13	Other		Parent Services	\$7,524	To provide families the opportunity to participate in the Parent Action Group (PAG) meetings, as well as the Family Engagement activities at the center level. Funds will be used for child care, food, supplies/materials for activities. This will also be utilized for recruitment efforts in the county.	\$0	N/A
Head Start	h.15	Other		Publications / Advertising / Printing	\$16,000	These funds are designated for printing in the offices and centers, anticipated costs for recruitment of personnel and children, postage, and dues and subscriptions on behalf of the Head Start Program. Funds are also used for printing materials.	\$0	N/A

CAPCO Head Start Budget and Non-Federal Share and Justifications

Program Type	Line Item #	Budget Categories	Budget Category Section	Line Item Description	Program Operations	Program Operations Justification	Non-Federal Share	Non-Federal Justification
Head Start	h.16	Other		Training or Staff Development	\$2,000	This is for Teachers to be able to receive the necessary trainings/classes they need to fulfill their job responsibilities.	\$0	N/A
Head Start	h.17	Other		Other-Staff Vehicle maintenance, registrations, fuel, and insurance.	\$10,762	This is the costs for maintenance, repairs, and oil changes for staff vehicles, as well as fuel for staff vehicles, and costs for vehicle registrations and insurances. This is for four staff vehicles and is shared with EHS.	\$0	N/A
Head Start	h.17	Other		Other-Policy Council Expenditures	\$1,500	For monthly Policy Council meetings on roles and responsibilities, food for meetings, and day care expenses for families. There is funds for transportation to and from meetings, if needed and this is a shared cost with EHS.	\$0	N/A
Head Start	h.17	Other		Other-Staff Immunizations	\$500	This is an allocated line for mandated TB shots and staff physicals required of all staff to retain their current positions, as well as for any new hires in the future.	\$0	N/A
Head Start	h.17	Other		Other-Permits and Fees	\$3,000	This is Head Start's portion of anticipated administrative permits, fees, rentals such as permits to repair office building, rentals of equipment used by administrative personnel, and permits to operate food at the Head Start centers.	\$0	N/A
Head Start	h.17	Other		Computer Software & Expenses	\$5,000	This is for computers, computer software for designated computers in the offices and classrooms which need annual upkeep and maintenance, as well as new programs.	\$4,700	This is an average of donated non federal share for the computers and software programs purchased through Tech Soup who applies a generous donation each time HS orders each program year.
Head Start	h.17	Other		Other-Background Checks	\$500	This is for required background checks through Albany for new hires in regard to maltreatment and neglect.	\$0	N/A
Total					\$1,673,815		\$630,025	

CAPCO Head Start 2016-2017 Training and Technical Assistance Plan

Training Need	Source for Need Identification	Training Strategy	Budget Amount	Justification
Annual pre-service training requirements, Head Start goals, and philosophy, performance standards, OSHA, shaken baby, and identifying and reporting child abuse and neglect.	Performance Standards	Pre-service training. Use of community organization resources; local DSS for mandated reporting. Use child care solutions consultant for CPS, shaken baby, and daycare regulations training. Use Dept. of Health consultant for OSHA/Sanitation training. Use the local Red Cross for First Aid training.	\$250.00	Materials for mandated reporting training.
			\$250.00	Materials for Red Cross training, and cost of consultant.
			\$250.00	Consultant fees for OSHA/Sanitation training.
			\$250.00	Consultant fee for daycare regulations, shaken baby trainings.
Teacher-Child Interactions and the CLASS	Reauthorization Act, Professional Development, and CLASS Scores	Hire a consultant to train staff on the significance of Teacher-Child interactions and the positive impact it has on child outcomes and school	\$1,000.00	Consultant/Trainer Fee
			\$1,250.00	Per Diem/Travel Costs
			\$500.00	Material Fees
Continuity of Services: What is the benefit?	Self-Assessment, On-going monitoring	Train all staff in EHS and HS on the transition plan and how continuity of services will ensure smooth transitions from EHS to HS and from HS to	\$1,000.00	Consultant/Trainer Fee
			\$1,250.00	Per Diem/Travel Costs
			\$500.00	Material Fees

Early Learning Framework	CLASS, Child Outcomes	Hire a consultant to train staff in understanding the new Office of Head Start Early Learning Outcomes framework.	\$500.00	Consultant/Trainer Fee
			\$800.00	Per Diem/Travel Costs
			\$500.00	Material Fees
National Parenting Conference	T & TA Plan	To send two staff and one parent to the National Parenting Conference. The Director and one staff person will present on the topic Active Play.	\$1,200.00	Travel Fees
			\$1,000.00	Registrations
			\$1,500.00	Hotel Costs
			\$1,000.00	Out of Town Travel
Region II Head Start Annual Conference	T & TA Plan	Send three staff to the Region II Annual Head Start Conference. Staff will participate in conference sessions, hear updates from OHS, and network with other programs from Region II.	\$1,200.00	Travel Fees
			\$1,000.00	Registrations
			\$1,500.00	Hotel Costs
			\$1,000.00	Out of Town Travel
National Head Start Conference	Community Assessment	To send two staff to the National Head Start Conference which will include the Director as a presenter on Active Plan. The staff is attending the training to learn new strategies and techniques necessary to implement outcomes activities for children and families.	\$1,200.00	Travel Fees
			\$1,000.00	Registrations
			\$1,500.00	Hotel Costs
			\$1,000	Out of Town Travel

Total Head Start T & TA Budget	\$22,400.00	
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NOTE: The training and technical assistance plan will be utilized throughout the program year to determine further trainings and if budgeted amounts should be re-allocated based on training needs. If programmatic issues do not change throughout the program year, the training and technical assistance plan will stay as is.

Policy Council Approval:

CAPCO Early Head Start Budget and NFS and Justifications

Program Type	Line Item #	Budget Categories	Budget Category Section	Line Item Description	Program Operations	Program Operations Justification	Non-Federal Share	Non-Federal Justification
Early Head Start	a.1	Personnel	Child Health and Development Personnel	Program Managers and Content Area Experts	\$53,229	To cover the costs of the Education/Special Needs Coordinator, the Health/Nutrition Coordinator, 1 Classroom Supervisor, and 1 Education Assistant. Primary responsibilities to develop and implement high quality services and ensure they are being provided. The salaries fund these 4 positions full time, 52 weeks per year. These are all shared positions with Head Start.	\$0	N/A
Early Head Start	a.2	Personnel	Child Health and Development Personnel	Teachers / Infant Toddler Teachers	\$288,471	To pay the salaries of 12 Teachers necessary to provide services to the children in the area of Early Childhood Development in Early Head Start. The salaries fund these 12 positions full time, 52 weeks per year.	\$0	N/A
Early Head Start	a.4	Personnel	Child Health and Development Personnel	Home Visitors	\$44,025	To pay the salaries of 2 Home Visitors. Positions complete weekly home visits and have home based socializations twice/month. The salaries fund these 2 positions full time, 52 weeks per year.	\$0	N/A
Early Head Start	a.5	Personnel	Child Health and Development Personnel	Teacher Aides and Other Education Personnel	\$9,955	To pay the salary of 1 Break Aide. The Break Aide serves as a staff person to break full time staff in the classrooms. This position is part time, 52 weeks per year.	\$0	N/A
Early Head Start	a.6	Personnel	Child Health and Development Personnel	Health / Mental Health Services Personnel	\$20,020	To pay the salaries of 3 positions; 2 Health Assistants and 1 Mental Health Specialist. Both HA's assist in providing high quality services in health. The MHS is a referral to the children and families, assists and supports staff with behavioral concerns in the classrooms. 1 HA is full time, 52 weeks per year, 1 HA is full time, 45 weeks per year, and the MHS is full time, 52 weeks per year (summer months, her hours per week decreases). All 3 positions are shared with Head Start.	\$0	N/A
Early Head Start	a.7	Personnel	Child Health and Development Personnel	Disabilities Services Personnel	\$2,911	To cover the salary of one position; the Special Needs Specialist who assists the Education/Special Needs Coordinator in delivering high quality services to the EHS children with special needs. This is a full time position, 52 weeks per year. This is a shared position with Head Start.	\$0	N/A

CAPCO Early Head Start Budget and NFS and Justifications

Program Type	Line Item #	Budget Categories	Budget Category Section	Line Item Description	Program Operations	Program Operations Justification	Non-Federal Share	Non-Federal Justification
Early Head Start	a.8	Personnel	Child Health and Development Personnel	Nutrition Services Personnel	\$20,339	To cover the salaries of 3 positions; 1 Nutrition Supervisor and 2 Kitchen Assistants. The Nutrition Supervisor oversees the Cook and Assistant Cook (these are funded by USDA monies, as well as the majority of the Nutrition Supervisor). The Nutrition Supervisor also oversees the 2 Kitchen Assistants to ensure healthy meals and snacks are being served and delivered in a timely manner. The Nutrition Supervisor is full time, 52 weeks per year. The Cook and Assistant Cook are funded by USDA funds and 1 is full time and 1 is part time; both are 52 weeks per year. The Kitchen Assistants are both part time; 52 weeks per year. All these positions are shared with EHS except for one Kitchen Assistant who is solely Head Start.	\$0	N/A
Early Head Start	a.9	Personnel	Child Health and Development Personnel	Other Child Services Personnel-Substitutes	\$14,118	To cover the salaries of on-call substitutes for education staff who may call in sick or take their accrued leave. This is for 6 part time positions and are on a current list of subs available for 52 weeks per year. These are shared part time positions with Head Start.	\$0	N/A
Early Head Start	a.10	Personnel	Family and Community Partnership Personnel	Program Managers and Content Area Experts	\$18,673	To cover two positions; the Family & Community Partnerships Coordinator and the Family & Community Partnerships Assistant. Both ensure high quality services in Family Services and Community/Family Engagement are developed and implemented. They also supervise Family Advocates, Home Visitors, and Family Engagement Specialists, as well as maintain ERSEA regulations, and assist Family Advocates and Home Visitors with the PFCE framework. These positions are full time, 52 weeks per year. These two positions are shared with Head Start.	\$0	N/A
Early Head Start	a.11	Personnel	Family and Community Partnership Personnel	Other Family and Community Partnerships Personnel	\$39,261	To cover the salaries of 3 positions; all 3 are Family Advocates, but 2 of those Family Advocates are Family Engagement Specialists, as well. They assist in the development and implementation of Family Partnerships Agreements, work with Expectant mothers, ensure home visits and notes are completed, and assist in the screening process. All 3 are full time, 52 weeks per year, and shared with Head Start.	\$0	N/A

CAPCO Early Head Start Budget and NFS and Justifications

Program Type	Line Item #	Budget Categories	Budget Category Section	Line Item Description	Program Operations	Program Operations Justification	Non-Federal Share	Non-Federal Justification
Early Head Start	a.12	Personnel	Program Design and Management Personnel	Executive Director / Other Supervisor of HS Director	\$11,627	To cover the salary of 1 position; the Executive Director of the Agency. This position oversees all of the Director's of the Agency programs. This is a full time position, 52 weeks per year. This is a shared positions with Head Start.	\$0	N/A
Early Head Start	a.13	Personnel	Program Design and Management Personnel	Head Start / Early Head Start Director	\$15,773	To cover the salary of 1 position; the Head Start/Early Head Start Director who manages the day to day operations of the Early Head Start Program. This is a full time position, 52 weeks per year. This is a shared position with Head Start.	\$0	N/A
Early Head Start	a.14	Personnel	Program Design and Management Personnel	Managers-Program Design & and Management Coordinator	\$11,717	To cover the salary of 1 position; the Program Design & Management Coordinator who assist the Head Start/Early Head Start Director in managing the day to day operations, as well as some fiscal responsibilities and program governance. Supervises the Office Assistant and the Agency Receptionist. This is a full time position, 52 weeks per year. This is a shared position with Head Start.	\$0	N/A
Early Head Start	a.16	Personnel	Program Design and Management Personnel	Clerical Personnel	\$6,084	To pay a portion of 1 Clerical position; the Office Assistant who supports the day to day operations of Head Start, maintains staff vehicles, and assists all functional area Coordinator's in there areas. This is a full time position, 52 weeks per year. This position is shared with Head Start.	\$0	N/A
Early Head Start	a.17	Personnel	Program Design and Management Personnel	Fiscal Personnel	\$24,128	To pay the salaries of 3 positions; the Finance Director, the Assistant Finance Director, and the Bookkeeper. They manage the fiscal operations of the Early Head Start program. These positions are full time, 52 weeks per year and are shared with Head Start.	\$0	N/A
Early Head Start	a.18	Personnel	Program Design and Management Personnel	Other Administrative Personnel- CAPCO Assistant Director	\$1,368	To pay the salary of 1 positions; the Agency Assistant Director. This person assists the Early Head Start Program is computer maintenance and upkeep issues. This is a full time position, 52 weeks per year and is shared with Head Start.	\$0	N/A
Early Head Start	a.18	Personnel	Program Design and Management Personnel	Other Administrative Personnel- HR Director	\$6,676	To pay the salary of 1 position; the Human Resources Director. This person supports the Human Resources, manages all Early Head Start personnel files, training logs for staff and insurance plans. This is a full time position, 52 weeks per year and is shared with Head Start.	\$0	N/A

CAPCO Early Head Start Budget and NFS and Justifications

Program Type	Line Item #	Budget Categories	Budget Category Section	Line Item Description	Program Operations	Program Operations Justification	Non-Federal Share	Non-Federal Justification
Early Head Start	a.18	Personnel	Program Design and Management Personnel	Other Administrative Personnel-CAPCO Receptionist	\$5,522	To pay the salary of 1 position; the Agency Receptionist. Answers phones, greets visitors, assisting with copying, postage and ordering of supplies on behalf of Early Head Start. This is a full time position, 52 weeks per year, and is shared with Head Start.	\$0	N/A
Early Head Start	b.1	Fringe Benefits		Social Security (FICA), State Disability, Unemployment (FUTA), Worker's Compensation, State Unemployment Insurance (SUI)	\$72,542	To pay the costs of 47 employees Social Security, State Disabilities, Worker's Compensation, and State Unemployment. These are shared costs with Head Start.	\$0	N/A
Early Head Start	b.2	Fringe Benefits		Health / Dental / Life Insurance	\$107,414	To pay the costs of the Health and Dental Insurance plans for those employees participating in the agency plans.	\$0	N/A
Early Head Start	b.3	Fringe Benefits		Retirement	\$15,131	To pay retirement benefits of the employees who participate in the Agency retirement plan.	\$0	N/A
Early Head Start	b.4	Fringe Benefits		Other Fringe-Accrued Leave Earned	\$53,003	To pay the Early Head Start portion of staff to designate towards their fringe on accrued leave earned.	\$0	N/A
Early Head Start	c.1	Travel		Staff Out-Of-Town Travel	\$12	Administrative allocation for staff out of town travel.	\$0	N/A
Early Head Start	e.1	Supplies		Office Supplies	\$4,436	Funds are made available to purchase office supplies necessary to support services to children and families. This includes pens, paper, pencils, post stickers, tape, laminating materials, printer toners, and other office supplies. The office supplies are utilized by all Early Head Start staff.	\$0	N/A
Early Head Start	e.2	Supplies		Child and Family Services Supplies	\$10,000	These funds are education supplies and program materials which are needed to support the children and families enrolled in Early Head Start. These supplies include trucks, dolls, appropriate multicultural resources for classrooms, construction paper, paints, computers, games, curriculum materials, and materials needed each year in the classrooms whether buying new or replacing old worn out materials such as cots, chairs, tables, etc.	\$0	N/A
Early Head Start	e.4	Supplies		Other Supplies-Medical Supplies	\$750	These funds pay the costs for medical supplies such as gloves for the classrooms, scales, thermometers, materials for first aid kits, and other medical items needed for classroom utilization.	\$0	N/A
Early Head Start	e.4	Supplies		Other Supplies-Disabilities Supplies	\$974	To pay for program supplies needed in the classrooms such as developmentally appropriate supplies for children who may need specific supplies to improve skills such as larger crayons, rocking chairs, timers, and other supplies deemed necessary.	\$0	N/A

CAPCO Early Head Start Budget and NFS and Justifications

Program Type	Line Item #	Budget Categories	Budget Category Section	Line Item Description	Program Operations	Program Operations Justification	Non-Federal Share	Non-Federal Justification
Early Head Start	e.4	Supplies		Other Supplies	\$0	N/A	\$0	N/A
Early Head Start	f.1	Contractual		Administrative Services (e.g., Legal, Accounting)	\$7,109	This is for payroll processing and financial audit fees on behalf of Early Head Start. This is the portion of anticipated costs resulting from agency wide external audit procedures such as internal controls, agency legal fees, and Early Head Start's portion for payroll processing of checks.	\$0	N/A
Early Head Start	f.2	Contractual		Health / Disabilities Services	\$1,000	This is used for the speech screenings for Early Head Start children provided by the local SUNY Cortland College, as well as any necessary dental follow-up needed for Early Head Start children.	\$0	N/A
Early Head Start	f.5	Contractual		Training and Technical Assistance	\$0	N/A	\$0	N/A
Early Head Start	f.8	Contractual		Other Contracts	\$6,412	This is the Early Head Start portion to pay for the Employee Assistance Program (EAP), as well as parking lot rental for staff to be able to park during work days.	\$0	N/A
Early Head Start	h.2	Other		Rent	\$26,507	This portion of funds are utilized to pay rent for 6 Early Head Start classrooms located throughout Cortland County.	\$11,796	This is the Early Head Start portion of rent for the Cortlandville II classroom operated at the First United Methodist Church. Cinquant Real Estate completed a Broker Price opinion for HS and EHS. This analysis is based on commercial square footage values, current market conditions and locations. Also included are inclusions of amenities such as parking, kitchen use, and playground use for properties in similar locations. This was completed on 8/21/2015 and is done every three years.
Early Head Start	h.4	Other		Utilities, Telephone	\$19,561	These funds are used for the utility costs for 6 Early Head Start classrooms, as well as the main office space. In addition, it is telephone usage costs for all Head Start classrooms, the main office, and the Early Head Start Director's cell phone. This line also supports all internet services throughout all the Early Head Start classrooms and main office.	\$0	N/A
Early Head Start	h.5	Other		Building and Child Liability Insurance	\$3,220	To pay the cost of the commercial and child accident insurance required by the agency to conduct activities according with regulations and standards.	\$0	N/A
Early Head Start	h.6	Other		Building Maintenance / Repair and Other Occupancy	\$24,218	These funds are utilized for the main office trash removal, janitorial maintenance of all Early Head Start centers and the main office. This includes carpet cleaning, janitor cleaning, snow plowing, as well as building allocation which includes a percent of the main office space in the building based on the HS square footage.	\$0	N/A

CAPCO Early Head Start Budget and NFS and Justifications

Program Type	Line Item #	Budget Categories	Budget Category Section	Line Item Description	Program Operations	Program Operations Justification	Non-Federal Share	Non-Federal Justification
Early Head Start	h.8	Other		Local Travel	\$2,000	To provide mileage reimbursement for staff to conduct teacher and social services home visit, training, and other activities within the service areas. The reimbursement rates shall be consistent with the agency travel policies which is \$0.565/mile.	\$0	N/A
Early Head Start	h.11	Other		Volunteers	\$0	N/A	\$18,454	Reviewed for the last 12 months of actual charges from 10/14 through 10/15 and applied the 74% to Head Start and 26% to Early Head Start for parents, community members, paraprofessionals, and professionals. Early Head Start's 26% portion is equal to \$18,454.00. Parent rate is \$10.00/hour and the paraprofessional rate is \$12.50/hour and professionals are generally \$30.00/hour unless the professionals set their own rate. In addition, Policy Council members are considered professionals and their rate is set at \$20.00/hour.
Early Head Start	h.13	Other		Parent Services	\$2,500	To provide families the opportunity to participate in the Parent Action Group (PAG) meetings, as well as the Family Engagement activities at the center level. Funds will be used for child care, food, supplies/materials for activities. This will also be utilized for recruitment efforts in the county.	\$0	N/A
Early Head Start	h.15	Other		Publications / Advertising / Printing	\$6,000	These funds are designated for printing in the offices and centers, anticipated costs for recruitment of personnel and children, postage, and dues and subscriptions on behalf of the Head Start Program. Funds are also used for printing materials.	\$0	N/A
Early Head Start	h.16	Other		Training or Staff Development	\$1,000	This is for Teachers to be able to receive the necessary trainings/classes they need to fulfill their job responsibilities.	\$0	N/A
Early Head Start	h.17	Other		Other-Staff Vehicles maintenance, registrations, fuel, and insurance	\$5,800	This is the costs for maintenance, repairs, and oil changes for staff vehicles, as well as fuel for staff vehicles, and costs for vehicle registrations and insurances. This is for four staff vehicles and is shared with EHS.	\$0	N/A
Early Head Start	h.17	Other		Other-Policy Council Expenditures	\$1,000	For monthly Policy Council meetings on roles and responsibilities, food for meetings, and day care expenses for families. There is funds for transportation to and from meetings, if needed and this is a shared cost with Head Start.	\$0	N/A
Early Head Start	h.17	Other		Other-Staff Immunizations	\$500	This is an allocated line for mandated TB shots and staff physicals required of all staff to retain their current positions, as well as for any new hires in the future.	\$0	N/A

CAPCO Early Head Start Budget and NFS and Justifications

Program Type	Line Item #	Budget Categories	Budget Category Section	Line Item Description	Program Operations	Program Operations Justification	Non-Federal Share	Non-Federal Justification
Early Head Start	h.17	Other		Other-Permits/Fees/Rentals	\$2,500	This is Early Head Start's portion of anticipated administrative permits, fees, rentals such as permits to repair office building, rentals of equipment used by administrative personnel, and permits to operate food at the Early Head Start centers.	\$0	N/A
Early Head Start	h.17	Other		Other-Computers & Software	\$4,000	This is for computers, computer software for designated computers in the offices and classrooms which need annual upkeep and maintenance, as well as new programs.	\$1,300	This is an average of donated non federal share for the computers and software programs purchased through Tech Soup who applies a generous donation each time EHS orders each program year.
Early Head Start	h.17	Other		Other-Background Checks	\$1,000	This is for required background checks through Albany for new hires in regard to maltreatment and neglect.	\$0	N/A
Total					\$972,486		\$31,550	

CAPCO Early Head Start 2016-2017 Training and Technical Assistance Plan

Training Need	Source for Need Identification	Training Strategy	Budget Amount	Justification
Annual pre-service training requirements, Head Start goals, and philosophy, performance standards, OSHA, shaken baby, and identifying and reporting child abuse and neglect.	Performance Standards	Pre-service training. Use of community organization resources; local DSS for mandated reporting. Use child care solutions consultant for CPS, shaken baby, and daycare regulations training. Use Dept. of Health consultant for OSHA/Sanitation training. Use the local Red Cross for First Aid training.	\$250.00	Materials for mandated reporting training.
			\$250.00	Materials for Red Cross training, and cost of consultant.
			\$500.00	Consultant fees for OSHA/Sanitation training.
			\$500.00	Consultant fee for daycare regulations, shaken baby trainings.
Teacher-Child Interactions and the CLASS	Reauthorization Act, Professional Development, and CLASS Scores	Hire a consultant to train staff on the significance of Teacher-Child interactions and the positive impact it has on child outcomes and school	\$1,000.00	Consultant/Trainer Fee
			\$1,000.00	Per Diem/Travel Costs
			\$1,000.00	Material Fees
Continuity of Services: What is the benefit?	Self-Assessment, On-going monitoring	Train all staff in EHS and HS on the transition plan and how continuity of services will ensure smooth transitions from EHS to HS and from HS to	\$1,000.00	Consultant/Trainer Fee
			\$1,000.00	Per Diem/Travel Costs
			\$500.00	Material Fees

Early Learning Framework	CLASS, Child Outcomes	Hire a consultant to train staff in understanding the new Office of Head Start Early Learning Outcomes framework.	\$500.00	Consultant/Trainer Fee
			\$1,000.00	Per Diem/Travel Costs
			\$250.00	Material Fees
National Parenting Conference	T & TA Plan	To send two EHS staff and one Policy Council member to the National Parenting Conference. The staff is attending the training to learn new strategies and techniques necessary to implement School Readiness activities to children and families.	\$1,200.00	Travel Fees
			\$1,300.00	Registrations
			\$2,250.00	Hotel Costs
			\$750.00	Out of Town Travel
Region II Head Start Annual Conference	T & TA Plan	Send three staff to the Region II Annual Head Start Conference. Staff will participate in conference sessions, hear updates from OHS, and network with other programs from Region II.	\$1,200.00	Travel Fees
			\$1,000.00	Registrations
			\$1,500.00	Hotel Costs
			\$1,000.00	Out of Town Travel
Annual Birth-Three Institutes in Washington, DC	T & TA Plan	Send 3 EHS staff to the Annual birth to three institute. The staff is attending the training to learn new strategies and techniques necessary to implement School Readiness activities for children and families.	\$500.00	Travel Fees
			\$1,300.00	Registrations

			\$2,000.00	Hotel Costs
			\$750.00	Out of Town Travel
Breastfeeding Training	Performance Standards, CACFP breastfeeding friendly requirement	WIC Breastfeeding Coordinator will train all staff on the importance of breastfeeding and our breastfeeding policy.	\$100.00	Resources/Handouts
Prenatal Services/Postpartum Depression training	Performance Standards	Train all staff on prenatal services, as well as the signs, symptoms and effects of postpartum depression.	\$300.00	Consultant Fees
			\$100.00	Resources/Handouts
Total Head Start T & TA Budget:			\$24,000.00	

NOTE: The training and technical assistance plan will be utilized throughout the program year to determine further trainings and if budgeted amounts should be re-allocated based on training needs. If programmatic issues do not change throughout the program year, the training and technical assistance plan will stay as is.

Policy Council Approval:

Board Development

February 16, 2016

In attendance: Rama Haidara, Pat Snyder Staff: Eden Harrington-Hall

Excused: Mary Ann Discenza Absent: Cheryl Michales

Meeting to order at 8:08 a.m.

Board Self-Assessment

The members reviewed the proposed Board Self-Assessment tool to be used to distinguish possible training needs. Pat had noted a couple items which he was not able to answer, so the tool can be beneficial in identifying those areas which the Board might need additional information on. Both Rama and Pat agreed that the Assessment would be a useful tool, so Eden will use Survey Monkey to gather the information.

Board Seat Update

Shelley Warnow from Marathon has shown interested in serving on the Board representing William McGover, Mayor for the Village of Marathon. A Board application has been sent to her and we hope to have her meet with the committee in March. We are also looking into possible replacements for Janet's seat and we hope to have that resolved by the March meeting as well. Rama also said she would reach out to Pastor Ryan whose church is located on Jewett Avenue.

New Board Member Orientation Policy/Procedure

In preparation for the upcoming TRACS, we have development a written process for Board Member orientation. Although this is the process we have been following, it was never a written policy/procedure. Motion made by Rama and seconded by Pat to recommend to the full Board the Board Member Orientation Policy/Procedure. Motion carried.

There being no further business, meeting adjourned at 8:35 a.m.

Resolution of the Board of Directors

of

Cortland County Community

Action Program, Inc.

Resolution No.16-06

WHEREAS, the Cortland County Community Action Program, Inc. Board Development Committee has reviewed the Board Member Selection and Orientation Policy/Procedure and has recommended accepting as presented, and

WHEREAS, the Cortland County Community Action Program, Inc. Board of Directors has reviewed the Policy/Procedure and accepts as presented.

IT IS HEREBY RESOLVED that on February 25, 2016 the Board of Directors adopts for acceptance the Board Member Selection and Orientation Policy/Procedure.

President

Date

New Board Member Selection and Orientation

New members to the Cortland County Community Action Program, Inc, (CAPCO) Board of Directors are selected and approved in the following manner.

The Board Development Committee of the Board of Director recommends potential Board members. The candidate completes the Board application. This is reviewed by the Board Development Committee and the Committee meets with the perspective candidate. This meeting is a time to provide the candidate with an Agency overview, description of the roles and responsibilities of the Board members, and allow the Board Development Committee to learn more about the candidate.

If the Board Development Committee determines the candidate would be an appropriate addition to the Board, the Committee presents the candidate to the full Board for approval.

Once the Candidate has been approved by the full Board, the Executive Director meets with the new Board member for orientation to the Board and the Agency. If possible, this meeting will occur prior to the new Board member's first Board meeting, but no later than within the first 3 months on the Board). The New Board member also receives information about access to the Board only section of the Agency website, complete and signs the Board Conflict of Interest and Whistleblower policies.

The orientation meeting with the new Board member and the Executive Director will include:

- Review of the Board Bylaws, overview of the Board of Directors, requirements, committees, etc.
- Overview of Agency programs and priorities
- Review of the fiscal process, reports and budgets
- Review of the Board only section of the Agency website where all pertinent documents can be found. These are electronic documents. If the Board member prefers, hard copies will be provided. The documents include (but are not limited to):
 - Bylaws
 - Certificate of Incorporation
 - CAPCO current strategic plan
 - Current community assessment
 - CAPCO current Personnel Policies and Procedures
 - CAPCO current Fiscal Policies and Procedures
 - CAPCO current Annual Budget
 - Board packets including minutes of Board meetings and all committee meetings (archived back to 2006)

New Board members will sign a memo to verify orientation was completed and that they have access to the documents as described above.

CAPCO Program Planning & Evaluation Committee

February 16, 2016, 12 noon

The PP&E meeting attendance was Shawn Allen, Gary Dallaire, Elizabeth Haskins, Lindy Glennon, Eden Harrington-Hall

Excused: Miranda Greene

Committee Chair

With Janet Hansen's retirement from the Board, the committee need to assign a new chair of the committee. It has been the practice that aside from the officers, the Chair of a committee is also a part of the Executive Committee. At this point the members wanted some time to think about it and will take action at the next meeting.

Early Head Start & Head Start Dec. 2015 Monthly Reports

Head Start

- HS Dental/Incident Report - Dental screenings – 32% (by end of year need 85%). Currently, 148 have received their dental screening. Shawn inquired what constitutes an "incident"- which is just small accidents occurring in the classroom.
- Attendance for December was 89%
- Mental Health report 11 for behavior concerns.
- Special needs 37 receiving services (33 for speech) (20 received more than 1 service). We need to at least serve 10% of the children which we have never had an issue achieving. Elizabeth inquired who does the speech screenings for the program – we currently use the Franziska Racker Center, SUNY Cortland, and DSS. We would be interested in doing a longitudinal study on the effects of the early intervention HS/EHS provides as children move onto elementary school.
- HS fully enrolled, 200, Waiting list is small and the staff is working diligently to improve that.
- Family Engagement has improved significantly – the parents even have a Facebook page. The Regional office had called to inquire what we are doing to make it so successful.

Early Head Start

- Family Services Report – 72 enrolled with attendance at 97%. As with HS, the waiting list is very small. Shawn inquired what constitutes homelessness – which could be families living at a hotel, etc.
- Mental Health Report – there were no concerns noted in December
- Special Needs – 8 children receiving services – of those, all 8 received speech.

Motion to recommend Dec. 2015 HS/EHS Monthly Reports to the full Board made by Gary Dallaire; seconded by Elizabeth Haskins. Motion carried.

Community Assessment

- The Assessment is just a yearly update based on the full Assessment conducted in 2013.
- The updates included recent poverty trends, currently unemployment rates.
- Highlighted areas included in the assessment were priority areas that from both a HS/EHS family's perspective as well as the community were areas which need to be addressed and included:
 - Lung Health
 - Dental Health
 - Food Security
 - Income/poverty
 - Family/emotional well-being
 - Parenting
- We are looking at doing a more comprehensive and broader Needs Assessment – NYSCAA is currently working on an assessment tool which will help capture those broader areas which effect the community as a whole as well as using community surveys, focus groups, etc.. This would also allow for more quantitative and qualitative data to be gathered.
- It was also noted that the Resource Page included many agencies which although might serve Cortland County the focus wouldn't be on the community, so it was suggested that those agencies be removed from the list

Motion to recommend the Community Assessment to the full Board made by Elizabeth Haskins; seconded by Gary Dallaire. Motion carried.

Head Start & EHS Refunding Application

- We are currently in year 3 of a 5 year grant cycle.
- Head Start's proposal is for \$1,673,815.00 in federal funds, CAPCO will leverage \$418,454.00 in non-federal funds and \$22,400.00 in training and technical assistance funds totaling \$2,114,669.00.
- Early Head Start's proposal is for \$972,486.00 in federal funds, and CAPCO will leverage \$243,122.00 in non-federal funds and \$24,000.00 in training and technical assistance funds totaling \$1,239,608.00.
- There were no significant changes made from the 2014-2015 application.
- The T&TA are funds specific for staff development, training, national conference. A plan was developed for the use of funds based upon things noted on the outcome reporting data.
- The budgets will then be presented to the Finance Committee for their approval

Motion to recommend the HS/EHS refunding application to the full Board made by Gary Dallaire, seconded by Elizabeth Haskins. Motion carried.

CSBG 1st Quarter PPR

- We are waiting for the amendment package which we anticipate a 5-6% increase in funding the amendment will also include the actual carryover.
- Based upon the 1st quarter numbers the committee discussed making adjustments to the planned number achieving an outcome in the following areas:
 - HSE/Tutoring Program – changed from 35 enrolling to 50 - currently there are 35 enrolled. Adjusted the number of individuals receiving math/literacy tutoring from 2 to 20 – currently 6 achieving have achieved the goal.
 - Family Success Centers – changed from 100 utilizing the centers from 100 to 400 – currently there have been 355 utilizing.
 - Parent's with Hope – changed from 30 to 40 enrolling – currently there are 15 enrolled.
 - Healthy Lifestyle Initiatives – changed from 15 to 30 – currently 24 have achieved the goal.
 - Snack Packs for Kids – changed from 150 to 210 children receiving Snack Packs and changed the number of times a Snack Pack was distributed throughout the year from 5550 to 7770. During the 1st quarter 205 children received Snack Packs and 2555 packs were distributed.
 - All other outcomes are on target.
 - Any final adjustments will be made once we receive the amendment.

With the growing demand for the literacy tutoring, we are applying for grants through the First Niagara Foundation, United Way, and the Cortland County Youth Bureau. We are hopeful with the change in the leadership at the United Way we will be able to secure funding through them.

Motion to recommend the 1st quarter CSBG PPR to the full Board made by Elizabeth Haskins; seconded by Gary Dallaire. Motion carried.

There being no further business, meeting adjourned at 1:15 p.m.

December 2015

December 2015

Classroom	Dental Rcvd	30 Days	60 Days	90 Days	90+ Days	F/U Needed	F/U Not Started	F/U Started	F/U Completed	Refusals	Incidents
C'Ville 1	10	0	1	2	0	2	2	0	0	0	0
Homer 1	14	0	0	1	0	2	1	0	1	0	0
Homer 2	10	0	0	4	0	3	2	0	1	0	3
Johnson 1	10	1	0	3	0	2	1	0	1	0	0
Johnson 2	8	1	1	4	0	1	1	0	0	0	1
Marathon	8	1	0	5	0	1	1	0	0	0	0
McGraw	15	0	0	1	0	5	3	1	1	0	3
Parker	10	0	1	3	0	3	1	0	2	0	1
Randall	14	0	1	1	0	3	1	0	2	0	1
Smith	11	2	1	3	0	4	4	0	0	0	0
YMCA 1	13	0	0	5	0	4	2	0	2	0	0
YMCA 2	15	0	0	0	0	4	4	0	0	0	2
YMCA 3	10	0	0	3	0	0	0	0	0	0	1
Totals	148	5	5	35	0	34	23	1	10	0	12
Total %	32%										
Comments											

HEAD START

CLASSROOM HAPPENINGS

December 2015

Johnson 1: This month we learned about friendship and family. We made snowflakes and even pizza that we ate for snack. The kids loved it. We didn't have a PAG meeting because it's a short month. On Wednesday we had pajama day and watched a movie. Wally talked about how to be nice friends and continued to talk about feelings.

Johnson 2: In our classroom this month we have continued with our feelings unit for Dina. We also finished our family and friends unit for Acelero. The children are beginning to use scissors and glue sticks more, and we have been working more with shapes and colors.

Marathon: For the month of December we enjoyed talking about our families and what we love to do with our families. Children enjoyed creating their family books and showing us the different people that they have in their family. Also, this month children created a collage showing and learning about different foods. We also read a variety of books and practiced what we should wear when it is cold out and why we should protect our skin. Children worked on learning and creating patterns. Children continue to work on writing their names daily.

McGraw: December has come and gone so quickly with many days off and the holiday break coming to our month. The students have been learning a lot about problem solving, problem solutions, and alternative ways of apologizing. Many different problem solving strategies during outside times and work times are used throughout the day, using a timer and taking turns. The students have also been helping each other find different strategies to utilize during different problematic situations. Most of the students are identifying the problem and working together to strategize an appropriate solution.

During the month of December students have been continuing to practice name recognition and learning the second letter of their first name, which has been accomplished by most of the students. During small group we have been practicing using scissors and cutting out projects, which has been a significant emergence for some who didn't quite have the fine motor skills to cut properly last month and are now cutting without any assistance.

Parker: This month we learned the letters Q, G, and S. Our RIF was Stone Soup. Practicum students finished their time with us and incorporated fun lessons into family area. We had family seasonal craft day. Dina the Dinosaur talked about problem solving and in math we learned geometry and shapes.

Randall: This month we have been learning about humans and animals and what protects us. Our class discussed the 3 basic needs to survive. We have been sequencing and learning to put events in chronological order. The kids have also been learning about separating syllables. We have been clapping beats to many different familiar items and names. We continue to learn our shapes, numbers and colors and have worked hard on writing our names and recognizing the letters in our names. Rainbows were made to teach sorting and classifying by color. This month Wally talked about role playing and taking turns. We have also discussed problem solving solutions a lot as a class. We did not have a PAG this month. The kids read about Curious George going to the hospital and what can make us sick. We did an activity with them on spreading germs.

Smith: In December we talked about families and communities. We also discussed different problem solving skills. We started rhyming and children were introduced to Q, G, and S. We talked about dressing for cold weather, and made a special snow ball snack.

YMCA-1: This month we had a dental assistant come in and talk about how to keep our teeth healthy and clean. Mr. Mott talked to us about bees and how they help us and the environment, and Mr. Brian came in to read a book to the classroom.

YMCA-2: In the classroom we have been continuing to learn our letters, numbers, colors, and shapes. We also have been introducing sorting, rhyming, measuring, and sequencing. We finished the "Community" unit and began to learn about animals. The students had a hard time believing me I wasn't kidding when I told them humans were animals too! They really enjoyed the animal x-rays we were able to use in the "veterinarian office".

Dina has been helping us discover how to solve problems and discussing many different solutions.

We said "goodbye" to Ms. Sarah and have welcomed Mr. David into our room. The students have welcomed Mr.

David with open arms. Our PAG activity salt dough decorating. We had many families who were able to decorate and visit with Ms. Sarah before our long break. We also had "career week". During this time, we had one father come in to share his love for music. We also were able to recruit Matt from the YMCA to talk about how he keeps his bees.

YMCA-3: We started learning about people and family members, separating the adults, children and siblings. We talked about our feelings, sad and frustrated, and what to do. We had a show and share and went swimming for our PAG. We learned about mixing different color playdough and made blue and yellow. We made a classroom book about our feelings and friendship bracelets. We learned about vegetables and how to make dough for pizza and we made picture frames.

Homer 1: We started a new unit-animals and habitats. We turned the kitchen into a vet's office for this unit. We have been practicing the letters S, G, and Q. Our health lesson was exploring nature and the environment. We did a family engagement activity on December 18th, the kids enjoyed making their own gingerbread houses. There was no PAG this month.

Homer 2: During the month of December, we finished up our Family and Friends unit. We did not have a PAG for this month but we had a special snack. We did a mouse tail snack. We had a new group of parents come to the event. We had 4 new parents attend.

Cortlandville 1: Since there has been no snow in this month, the children have been enjoying the extra time outside with just coats. Our unit about family and friends is wrapping up and to celebrate we made pizza. Wally has been teaching us so many feelings from happy to frustrated and what to do when we are feeling that way. We learned about the relaxation thermometer and how red means frustrated or tense and blue is happy or relaxed. Take 3 deep breaths, Wally says, to get from red to blue. We handed out RIF books and children enjoyed being able to pick the one they wanted.

EARLY HEAD START CLASSROOM HAPPENINGS December 2015

Cosimo 1: This month we had family pictures as our PAG and prints were free to families. On the 15th, we made a healthy snack that had grapes, bananas, strawberries, and mini marshmallows, all put on a toothpick. Children did this working together with their parent. On the 23rd we had Pajama Day with a parent activity in the afternoon. We made a snack and read a snowman story with our families and we were able to take a book home.

Cosimo 2: For this month we did pine branches painting and made pine trees. We made bells and played our instruments and sang. On December 7th we had a good turnout at our PAG, we had free family pictures taken. On December 15th, we had Parent Engagement. We made a funny health snack and had a nice turnout. December 23rd, we had pajama day and we frosted cookies together with their parents.

Cosimo 3: We had a short month in December. On December 7th our PAG was taking family photos with Cos 1 and 2. Big thank you to Amanda Amedeo for taking the pictures and to all the teachers and family advocates, Crickett and Heather. We had a wonderful turn out. December 16th, we had a family activity making snow globes and everyone had a great time. This month we worked on sorting toys that are similar and the color green.

South Main 1: Our PAG was December 10th, and 7 families attended for picture night. Parent Involvement was on December 18th and 8 adults attended. We enjoyed making snowflakes made out of popsicle sticks. We decorated them with their children and ate a winter trail mix that the children made earlier in the day. Our shape this month was triangle and we learned the color green. We created snow storms with cotton balls and worked in groups to color large triangles. We introduced "Row, Row Your Boat", rowing slow and fast, "Frosty the Snowman" after seeing snowmen on a walk. And learned the "Icky, Sticky Bubble Gum Song" with body parts.

South Main 2: We have been working on color recognition and counting objects (1-10). We have been talking about how to dress ourselves for the cold winter weather and working on dressing ourselves on our own, putting on our own coats and hats. We made our own snowflakes and classroom snowman. We also welcomed a new friend to our classroom. Our PAG is family picture night and family engagement was hot cocoa and decorating gingerbread people together.

Cortlandville 2: We have been struggling a lot with sickness and families continuing to bring them in before they are better. We did an "I CAN" PAG in November to see if that would help with this situation, but hasn't improved. Joy and I have done extra cleaning to try to stop it from going through the classroom. No PAG for this month, canceled Parent Activity due to so much illness. Babies are moving around more, almost all are crawling. We are hearing a lot more babbling and cooing. Some are copying hand motions to songs. Three are eating at the table now. We have seen improvement in parents doing the picture sign in/out board with their children. We had great reviews from Susan and Angela.

HEAD START/ EARLY HEAD START PROGRAM OF CORTLAND COUNTY**...a service of the Cortland County****Community Action Program, Inc.****MONTHLY MENTAL HEALTH REPORT EHS**

Employee Name: Katherine E. Shaw

Month: December 2015

	Behavior Concerns observed by Mental Health Consultant	Meeting with Classroom Staff Regarding Behavior Concerns	Referral to Mental Health Agency	Total # of Behavior Plans in Place	Behavior Plans Implemented this Month	# of Meetings with Family or HV		Curriculum
						Face to Face	Telephone	
Cortlandville	0	1	0	0	0	0	0	0
Cosimo I	0	0	0	0	0	0	0	0
Cosimo II	0	0	0	0	0	0	0	0
Cosimo III	0	0	0	0	0	0	0	0
South Main I	0	0	0	0	0	0	0	0
South Main II	0	0	0	0	0	0	0	0
Home Based I	0	0	0	0	0	0	0	0
Home Based II	0	0	0	0	0	0	0	0
TOTALS	0	1	0	0	0	0	0	0

HEAD START/ EARLY HEAD START PROGRAM OF CORTLAND COUNTY

...a service of the Cortland County
Community Action Program, Inc.

MONTHLY POLICY COUNCIL REPORT HS

Special Needs

Employee Name: Bethann Fischer

Month: December 2015

	# of Children Receiving Services	# of Children Receiving more than one service	Speech	OT Fine Motor	PT Gross Motor	SEIT Special Ed Itinerant Teacher	Couns. Play Therapy	1;1 Aide	# of Evals	# of Children CPSE Mtg	# of Children Declassified	Refused Referral
Randall	6	3	5	3	0	0	2	0	0	1	0	0
Smith	2	0	2	0	0	0	0	0	0	1	0	0
Parker	3	1	3	1	0	0	1	0	2	2	0	0
YMCA I	3	2	2	2	0	1	2	0	0	0	0	0
YMCA II	5	2	5	1	1	0	1	0	1	0	0	0
YMCA III	2	1	1	1	0	0	1	0	1	0	0	0
McGraw I	4	3	4	3	0	2	0	0	0	2	0	0
Homer I	3	0	3	0	0	0	0	0	1	2	0	0
Homer II	2	2	2	2	1	2	0	0	0	0	0	0
Marathon	1	0	1	0	0	0	0	0	3	4	0	0
Johnson I	2	2	1	2	1	0	1	0	0	0	0	0
Johnson II	2	2	2	0	0	1	1	0	1	2	0	0
Cortlandville	2	2	2	1	0	2	1	0	0	0	0	0
TOTALS	37	20	33	16	3	8	10	0	9	14	0	0

HEAD START/ EARLY HEAD START PROGRAM OF CORTLAND COUNTY

...a service of the Cortland County
Community Action Program, Inc.

MONTHLY MENTAL HEALTH REPORT HS

Employee Name: Katherine E. Shaw

Month: December 2015

	Behavior Concerns observed by Mental Health Consultant	Meeting with Classroom Staff Regarding Behavior Concerns	Referral to Mental Health Agency	Total # of Behavior Plans in Place	Behavior Plans Implemented this Month	# of Meetings with Family or HV		Curriculum
						Face to Face	Telephone	
YMCA I	1	0	0	1	0	0	0	0
YMCA II	1	0	0	0	0	0	0	0
YMCA III	3	1	0	0	0	0	0	0
Smith	0	0	0	0	0	0	0	0
Parker	1	0	0	0	0	0	0	0
Randall	3	0	0	0	0	0	0	0
Homer I	0	0	0	0	0	0	0	0
Homer II	0	0	0	0	0	0	0	0
McGraw I	1	1	0	0	0	0	0	0
Johnson I	0	0	0	0	0	0	0	0
Johnson II	1	1	0	0	0	0	0	0
Marathon	0	0	0	0	0	2	1	0
Cortlandville	0	0	0	2	0	0	0	0
TOTALS	11	3	0	3	0	2	1	0

HEAD START/ EARLY HEAD START PROGRAM OF CORTLAND COUNTY

...a service of the Cortland County

Community Action Program, Inc.

MONTHLY POLICY COUNCIL REPORT HS

Special Needs

Employee Name: Bethann Fischer

Month: December 2015

	# of Children Receiving Services	# of Children Receiving more than one service	Speech	OT Fine Motor	PT Gross Motor	SEIT Special Ed Itinerant Teacher	Couns. Play Therapy	1;1 Aide	# of Evals	# of CPSE Mtg	# of Children Declassified	Refused Referral
Cortlandville	0	0	0	0	0	0	0	0	0	0	0	0
Cosimo I	1	1	1	0	1	1	0	0	0	0	0	0
Cosimo II	1	1	1	0	1	0	0	0	0	0	0	0
Cosimo III	1	0	1	0	0	0	0	0	0	1	0	0
South Main I	2	1	2	1	1	0	0	0	0	1	0	0
South Main II	2	1	2	1	1	1	0	0	0	1	0	0
Home Based I	0	0	0	0	0	0	0	0	0	0	0	0
Home Based II	1	1	1	1	0	1	1	0	0	0	0	0
TOTALS	8	5	8	3	4	3	1	0	0	3	0	0

HEAD START/EARLY HEAD START PROGRAM OF CORTLAND COUNTY

...a service of the Cortland County

Community Action Program, Inc.

MONTHLY FAMILY SERVICES REPORT (EARLY HEAD START)

Employee Name: Trudy Happel Month: December 15

Center	Enrolled	Entered	Withdrew	Accepted (but not enrolled)	% of Daily Attendance	# of Home Visits	# of Over Income	# of Under 130%	# of Goals that have been formalized	# of Goals that have been achieved	# of Homeless Children
C'ville 2	8	8	0	0	98	1	0	0	5	0	0
Cosimos 1	8	8	0	0	100	0	0	0	0	0	0
Cosimos 2	8	8	0	0	99	4	0	0	3	0	0
Cosimos 3	8	7	0	0	91	0	0	0	3	0	0
South Main 1	8	8	0	0	96	2	0	0	3	0	0
South Main 2	8	8	0	0	98	1	0	0	2	0	0
Home Based 1	12	10	0	0	13 70	21	0	0	0	0	0
Home Based 2	12	11	0	0	18 66	25	0	0	1	0	1
TOTAL	72	68	0	0	97%	54	0	0	17	0	1

of Children on the Waiting List:

Expectant
Over Income
Under 130%
Under 100%

3
1
1

Children
Over Income
Under 130%
Under 100%

24
11
31

Comments: _____

HEAD START/EARLY HEAD START PROGRAM OF CORTLAND COUNTY

...a service of the Cortland County

Community Action Program, Inc.

MONTHLY FAMILY SERVICES REPORT (HEAD START)

Employee Name: Trudy Happel Month: December 15

Center	Enrolled	Entered	Withdrew	Accepted (but not enrolled)	% of Daily Attendance	# of Home Visits	# of Over Income	# of Under 130%	# of Goals that have been formalized	# of Goals that have been achieved	# of Homeless Children
YMCA 1	20	19	0	0	86	2	3	3	1	1	1
YMCA 2	16	16	0	0	91	2	3	1	6	1	0
YMCA 3	14	12	0	0	88	1	0	1	4	0	0
Parker	16	15	0	0	89	1	2	1	0	0	0
Randall	16	16	0	0	94	2	2	2	0	0	0
Smith	16	16	0	0	86	0	3	1	0		
Homer 1	16	16	1	0	93	2	3	2	0	0	0
Homer 2	14	14	0	0	90	0	0	3	0	0	0
McGraw	16	16	0	0	96	1	1	7	0	0	0
Marathon	14	14	0	0	85	4	1	4	6	1	1
Johnson 1	14	14	0	0	86	0	0	0	0	0	0
Johnson 2	14	14	0	0	82	1	1	3	0	0	0
C'ville 1	14	14	0	0	89	1	1	0	1	0	0
TOTAL	200	196	1	0	89%	17	20	28	18	3	2

of Children on the Waiting List:

3 Year Olds
Over Income
Under 130%
Under 100%

22
3
8

4 Year Olds
Over Income
Under 130%
Under 100%

16
0
1

Comments: _____

Resolution of the Board of Directors
of
Cortland County Community
Action Program, Inc.

Resolution No.16-06

WHEREAS, the Cortland County Community Action Program, Inc. PP&E Committee
has reviewed the Community Needs Assessment Update for the program year
2015-2016 and has recommended accepting as presented, and

WHEREAS, the Cortland County Community Action Program, Inc. Board of Directors has
reviewed the Assessment and accepts as presented.

IT IS HEREBY RESOLVED that on February 25, 2016 the Board of Directors adopts for
acceptance the 2015-2016 Community Needs Assessment Update.

President

Date

CAPCO Head Start

2015-2016 Community Assessment Update

1/5/2016

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Introduction

Overview

The Cortland County Community Action Program, Inc. (CAPCO) is a community based; not-for-profit 501(c)(3) corporation located in Cortland, New York and is the second largest human service provider in the county. CAPCO was incorporated in 1974 and designated as Community Action Agency under the provisions of the Economic Opportunity Act of 1964 signed by President Lyndon Johnson in his famous declaration of the “War on Poverty”. In 2014, CAPCO celebrated 40 years of dedicated service to the community. During its 40 years, CAPCO has worked extensively with disadvantaged persons across the broad range of programs, and provides assistance to over 4,500 participants annually.

CAPCO is governed by a 15 member tripartite board. One third of the members of the board are elected public officials or their representative. At least one third of the members are representatives of the low-income community with the remainder of the seats being representatives from the private sector to be chosen from “business, industry, labor, religious, law enforcement, education or other major groups and interests in the community served.” The board structure reflects and promotes the unique anti-poverty leadership, action, and mobilization responsibilities assigned by law to community action agencies. CAPCO’s board is responsible for assuring the agency continues to assess and respond to the causes and conditions of poverty in our community, achieve anticipated family and community outcomes, and remain administratively and fiscally sound.

Currently, the agency operates the following programs and is located at 32 North Main Street, Cortland, New York 13045:

- *Head Start:* Head Start is a comprehensive program designed to foster the healthy development of pre-school aged children (3-5 years old) from low-income families. Head Start provides children with daily nutritious meals and many opportunities for social, emotional, and intellectual growth which can prepare them for success in school and life. The program also connects children to a health care source and provides vital support services to their families. The cornerstone of the program is parent and community involvement which has made it one of the most successful pre-school programs.
- *Early Head Start:* The Early Head Start Program is for low-income infants, toddlers, expectant mothers, and their families. This program is in its second year and is relatively new to the agency, as well as the community. The Early Head Start Program enhances the children’s physical, social, emotional, and intellectual development; assist expectant mothers to access comprehensive prenatal and

- postpartum care; support parents' efforts to fulfill their parental roles and help parents move towards self-sufficiency.
- Energy Services:** The Energy Services department utilizes a staff of highly trained individuals to install energy saving measures for income eligible households. This program offers install insulation in floors, walls, and attics; repair and replace heating systems (clean and tune); air sealing to reduce drafts (caulking and weather stripping); repair and replace water heater tanks; inspect and adjust other combustion appliances (i.e. stoves, dryers, and space heaters); cooling such as an air conditioner for a medical condition prescribed by a doctor; replace inefficient refrigerators; install CO detectors and smoke detectors; minor repairs, and health and safety check of the home. **The Weatherization Assistance Program (WAP)** has income guidelines which is the gross income before taxes and deductions. This is a free service to eligible clients. Furthermore, renters must check with their landlord first. Make sure he/she is willing to upfront the money. Tell them this program will benefit them, as well as you. Have them call the program if they are unsure about how the program operates. Landlords will submit a non-refundable upfront audit fee of \$100.00 - \$200.00 for 1-4 units. This will be collected and applied toward their landlord contribution of 25%-35% of the total costs which is required on rental property. For 5 or more units, the actual cost of the audit will be collected. You must have 50% of your tenants be income eligible in order for us to weatherize your building. This program is free to income eligible landlords. The guideline charts are provided by this department in their brochures or on-line at capco.org. **EmPower New York:** The focus of EmPower New York is on cost-effective electric reduction measures, particularly lighting and refrigerator replacements, as well as other cost-effective home performance strategies such as insulating and draft reduction measures. This is a free service to those that meet the programs eligibility requirements. **Electrical Reduction (ER):** Energy-efficient lighting, refrigerators and freezers, change-out of electric dryers and hot water tanks to natural gas, DHW tank wraps, pipe insulation, water bed mattress replacement, and other electric reduction measures. In some situation, families may be provided exclusively with energy reduction services. **Home Performance (HP):** Insulation, draft reduction and heating system repair/replacements and other shell measures. Homes referred for HP services will also be serviced with ER measures. Eligibility requirements are the utility bills must be in the name of the customer in need, customer must reside in a 1-4 unit building, customers must be HEAP/WAP eligible, and HP services are targeted to homes with high heating costs.
 - WIC:** WIC is a free program for Women, Infants, and Children which helps families who have nutritional needs. In doing so, WIC prevents more serious medical problems caused by poor nutrition. WIC screens potential participants to see if they have nutritional problems. If they do, WIC provides special supplemental food for their families. The program is funded by the U. S. Department of Agriculture. WIC

is a service for low-income families, but it is not a welfare program. Most WIC participants work, yet are still able to qualify for WIC services based on their incomes. The benefits of the WIC program is participants will receive free health and nutrition screening, supplemental foods such as fresh vegetables, peanut butter, bread, milk, and cereal as long as you are eligible. In addition, WIC participants receive free nutrition education and one can choose from several classes offered monthly. WIC also refers you to clinics where you can get immunizations and medical care for your child. Furthermore, Peer Counselors are another benefit of being on WIC. They are women who have breastfed their babies and are trained to help other women learn to breastfeed. They provide support at local WIC clinics where you can share your stories with other moms and find solutions to problems. Peer Counselors also help breastfeeding mothers in other ways. They work with new moms one-on-one and are available in clinics. Breastfeeding moms also receive more foods from WIC. The more you breastfeed, the more food choices you receive. In addition to other foods, you may also receive whole grains, baby foods, and more fresh produce. If women do not choose to breastfeed, WIC provides infant formula. In order to be eligible for WIC, you must be a pregnant, breastfeeding, or postpartum woman, infant or child under 5 years old; be a resident of this county; have a nutritional need (determined at your first WIC appointment); and fall into our liberal income guidelines. Contact WIC for the location nearest to you. Lastly, one will need to bring specific information and documents to apply for WIC. Identification for all applicants such as a birth certificate, driver's license, baptismal certificate, Medicaid card, etc.; proof of residency will be requested so you will need to bring a recent utility bill, business mail, or rent/lease receipt; and papers providing participation on AFDC food stamps, or Medicaid that contain your name and your child's name OR, must recent paycheck stubs for the past 30 days, income tax forms: W-2 or 1040 for everyone in the household who works, or unemployment records.

- *Consumer Directed Personal Assistance Program (CDPAP)*: In 1973, a group of individuals with severe disabilities, joined together to find a solution to the way they were receiving care. At that time, these individuals had not suitable alternatives available other than the traditional approaches of institutionalization, such as a nursing home or hospital. Others could go home with no support, with the help of a family member willing to care for them. From this group of disabled individuals, a model for what is now referred to as the Consumer Directed Personal Assistance Program (CDPAP) was developed. It would be the cornerstone of a program which recognizes that disabled individuals have the ability to choose their own caregivers and to direct their own home care services. CDPAP helps promote independence and Consumer Empowerment. The personal care aides hired by participants provide support including health and daily care and a wide range of services which can include basic housekeeping, personal care or high level of nursing services. In 2010,

CAPCO CDPAP made it possible for over 50 participants to stay in their homes free of the constraints imposed by traditional home care and institutional settings. Without the support of CDPAP, many of these individuals would most likely remain in a nursing home situation. Thirteen families received support and care for their disabled family members through CDPAP, allowing them to continue to be employed and over 100 individuals obtained employment and received the necessary skills and training to increase their employability in the home care industry. CDPAP fosters independence and consumer empowerment by affording more control over identifying and acquiring personal care needs. This control makes consumers less reliant on a medical service model to obtain the daily assistance they need to fully participate in their own communities. The Consumer benefits by being able to live independently in the community, giving them a sense of empowerment to make decisions on how and when their care is provided. The Consumer's Family benefits by allowing them to maintain/obtain employment if they were providing care to their loved ones.

Family Development: Family Development works with people in the community to develop and provide resources and supports to encourage strong, healthy families. The programs within Family Development are categorized under Parent Support Groups, Economic Resources, and Community Action Angels. Under **Parent Support Groups**, the following resources are available to participants. **Parents with Hope:** Family life education where you decide what you want to learn and strengthen. Topics range from communication, step-parenting, addiction, discipline, child safety and much more. **Resource Centers:** Develops and provides resources and support within rural communities. Encourages strong, healthy families in your own community. Resource Centers are currently located in McGraw and Marathon. **Happiest Baby on the Block:** Are you ready to be a parent? Sleepless nights, crying baby, marital stress? All of this happens and learning step-by-step methods on how you can approach these issues is the first step to improvement. **Monday Moms:** A support group for moms. Meet other mothers in the community to share ideas with. There is a strong focus on promoting healthy eating habits at home. The group includes recipe sharing and preparing, information on community resources and meeting other moms. **Incredible Years:** Parenting education classes that are based on promoting social competence and prevents, reduce, and treat aggressive and related conduct problems in toddlers and school-aged children. This class can give you some great ideas to try at home. **Cooking Classes:** Individual and group classes to assist busy families in preparing healthy home cooked meals at home with little time and money. Under **Economic Resources**, the following are provided to participants. **Individual Budget Counseling:** Assistance with developing and maintaining a household spending plan, keeping records, tracking expenses, setting goals and managing money. **Financial Education:** Workshops help parents and individuals manage money, save for goals, build credit, avoid scams, and shop for

bargains. After school programs help children learn basic money management skills. Individual and Group Math Tutoring: Available for consumer math and TABE and GED testing. Family Essentials: Clothes, shoes, and household goods available at no cost. Donations are accepted during business hours. Family Essentials is open Tuesday from 9:00 a.m. to 2:00 p.m., Thursday from 9:00 a.m. to 6:00 p.m., and Friday from 9:00 a.m. to noon. VITA: Trained volunteers with the Volunteer Income Tax Assistance program provide free tax return assistance to low to moderate income individuals and families. Under **Community Action Angels**, the following are provided to participants. Coat Drive: In early November, donated coats, boots, hats, gloves, and snow pants are distributed to people in need of these items. Nickel Store: In early December, a small shop is set up for local nursing home residents to buy items for themselves and their family for the holiday. All items are a nickel and the money collected will provide a special event for the residents. School Supply Giveaway: School supplies are distributed to families in need at back to school time. Everybody's Baby Shower: This event provides necessities to parents of infants and toddlers in our community. Through donations we are able to help those too little to ask. Snack Packs for Kids: Back packs of healthy foods sent home on the weekends with children who depend on school breakfasts and lunches for the majority of their meals. Holiday Assistance: Assistance to families in need during the holiday season.

Cortland County Profile

Cortland County: Geography

Cortland County is located in the Central New York region. It borders Tompkins and Cayuga Counties to the west; Tioga and Broome Counties to the South; Chenango and Madison Counties to the east, and Onondaga County to the North. The county encompasses 498.76 square miles of land. There is one city (Cortland) and there are 15 towns in the county. Towns include:

Cincinnatus, Cortlandville, Cuyler, Freetown, Harford, Homer, Lapeer, Marathon, Preble, Scott, Solon, Taylor, Truxton, Virgil, and Willet. In addition, there are three villages: Homer, McGraw and Marathon. The county is served by five school districts: Cincinnatus Central, Cortland City, Homer Central, Marathon Central and McGraw Central. Cortland County's lush farmlands and central location make it attractive for business and tourism alike.



Cortland County: Population

According to the U.S. Census Bureau's 2014 population estimates, the estimated population of Cortland County is 49,024 residents¹, which is down from the 2013 estimate of 49,149 residents and represents a one percentage point decline since 2011. The population density is 98.2 persons per square mile. The most dense area of the county occurs in census tract 9708, which occurs within the southwestern portion of the City of Cortland. The American Community Survey (ACS) 5-year Demographic & Housing Estimates reference the median age in the county at 36 compared with a median age of 35.8 reported in the 2010 Census². These estimates also show that 51.4 percent of the county's residents are female and 48.6 percent are male. The county has 2,435 residents (4.9%) who are under the age of 5. Of those claiming one race, the large majority (93.9%) of Cortland County residents consider themselves to be white. The next greatest share (1.9%) reports being African American. A little more than two percent of the population of the county reports being more than one race, most often white and African American or white and Native American. Some 2.5 percent of Cortland residents identify with a Hispanic or Latino race.³

Of the 18,045 households in the county, 59.8 percent are families. The average family size is 3.16.⁴ About 74.8 percent *of households that are families* are husband-wife families, while 17 percent are female-headed households with no husband present, and 8.2 percent are male-headed households with no wife present.⁵

Cortland County: Education

While the majority (90.1%) of Cortland County residents over age 25 have a high school diploma or higher, just 22.7 percent of them have attained a bachelor's degree or higher, compared with 33.7 percent across New York State. Some 36.5 percent have a high school diploma or equivalent, while 18.4 percent have some college but no degree and another 12.5 percent have an associate's degree. The remaining 10 percent has less than 9th grade education or some high school (grades 9 – 12) with no degree. Unsurprisingly, median income levels rise with levels of educational attainment in the county and poverty is concentrated among those with lower levels of education.⁶ An estimated 11 percent of

¹U.S. Census Bureau Annual Population Estimates 2010-2014 retrieved from <http://factfinder2.census.gov>

²U.S. Census 2010 – 2014 American Community Survey 5-Year Estimates, Demographic & Housing, retrieved from <http://factfinder2.census.gov>

³ ibid

⁴ U.S. Census Bureau 2010-2014 American Community Survey 5-Year Estimates, Selected Social Characteristics, retrieved from <http://factfinder2.census.gov>

⁵ ibid

⁶ U.S. Census Bureau 2010-2014 American Community Survey 5-Year Estimates, Educational Attainment, retrieved from <http://factfinder2.census.gov>

Cortland County adults lack basic prose literacy skills, according to the 2003 National Assessment of Adult Literacy (the most recent study available)⁷.

There are five school districts serving Cortland County. Cincinnatus Central School District operates one elementary school, one middle school and one high school. Cortland City School District operates five elementary schools (K-6), and one junior-senior high school (Grades 7-12). Homer Central School District operates one K – 6 elementary school, one primary school (Grades K-2), one intermediate school (Grades 3-5), one junior high school (Grades 6 - 8) and one senior high school (Grades 9 – 12). Marathon Central School District operates one Pre-K – 6 elementary school and one high school serving grades 7 through 12. McGraw Central School District operates an elementary school serving grades K through 5 and a secondary school serving grades 6 through 12. Enrollment has declined in recent years throughout the county. Selected enrollment and performance accountability information are summarized in Table 1 below⁸

DISTRICT	Enrollment 2013-2014	Enrollment 2011-2012	+/- Enroll 2011-2014	Graduation Rate 2013-2014 (4-yr, 5 yr)	Grad Rate makes AYP? (4-yr, 5-yr)	Lower Than Statewide % of Students Proficient on State Exams in 2014
Cincinnatus Central School	601	637	6%	91%, 98	Y	ELA Gr. 3, 4, 5, 6, 7, 8; MATH Gr. 3, 4, 5, 6, 8
	<i>PreK-12</i>	<i>PreK-12</i>				
Cortland City School District	2737	2825	3%	75%, 72%	Y	ELA Gr. 3, 4, 5, 6, 7, 8; MATH Gr. 3, 4, 6, 7, 8
	<i>PreK-12</i>	<i>PreK-12</i>				
Homer Central School District	2055	2149	-4%	85%, 90%	Y	ELA Gr. 3, 4, 6, 7; MATH Gr. 3, 4, 6, 7
	<i>K-12</i>	<i>K-12</i>				
Marathon Central School District	736	735	0%	82%, 87%	Y	ELA Gr. 3, 4, 5, 6, 7; MATH Gr. 3, 4, 5, 6, 7
	<i>PreK-12</i>	<i>PreK-12</i>				
McGraw Central School District	518	540	-4%	92%, 79%	Y	ELA Gr. 3, 4, 5, 6, 7; MATH Gr. 3, 4, 5, 6, 7
	<i>K-12</i>	<i>K-12</i>				
TOTAL	6647	6886	-3%			

Table 1: Selected Enrollment and Performance Accountability Data for Cortland County School Districts

Most cohorts in grades three through eight in Cortland County Schools demonstrated ELA and Math proficiency at rates lower than the statewide rate in 2014. In some cases, the rates were drastically lower than the state rates. Even with changed educational standards coming into play, these figures present a red flag given the comparison is with other students across the state who were faced with the same changed standards.

⁷ National Center for Education Statistics, retrieved from: <http://nces.ed.gov/naal/estimates/StateEstimates.aspx>

⁸ NYSED District Report Cards Cortland County, retrieved from <http://data.nysed.gov/state.php>

Cortland County: Employment, Income and Poverty

Employment

As of October 2015, the U.S. Bureau of Labor Statistics (BLS) reports that the unemployment rate in Cortland County is 4.7% percent, compared with 7.3% in October of 2012. Between October 2012 and October 2015, unemployment peaked at 10.1% in January 2013⁹. These rates are not seasonally adjusted.

In 2013, the most recent data year, the greatest share (52.2%) of primary jobs in the county is held by people between the ages of 30 and 54. The greatest share of jobs (39.3%) pays between \$1,251 per month and \$3,333 per month¹⁰. Jobs are spread relatively evenly across a few sectors as follows: health care and social assistance (15.6%); manufacturing (14.5%); educational services (13.5%); retail trade (12.1%); and accommodation and food services (11.3%). *There has been a slight uptick in the share of manufacturing, retail and food service jobs since the last update of this report.*

The mean travel time to work by residents of Cortland County is 19.5 minutes. The large majority (73.7%) drive to work alone. Of families in Cortland County with children under the age of six, 65.5 percent have both parents in the labor force, *down from 69.1 percent since the last update of this report, however this is a 5-year versus a 3-year estimate.*¹¹

Major employers in the county include, along with the approximate number of employees: SUNY Cortland (1,000 +); Cortland Regional Medical Center (750 +); Pall Trinity Micro / Pall Trinity (750 +); Cortland County Government (650 +); Marietta Corporation (600 +); Cortland School District (600 +); J.M. Murray Center (250 +); Intertek Testing Services (250 +); Crown Center for Nursing and Rehabilitation (250 +); Tops Friendly Markets (250 +); Cortland Asphalt / Suit Kote (250 +); City of Cortland Government (250 +); Greek Peak Ski Resort (200 +); Gutchess Lumber (200 +); Wal-Mart (200 +); Cortland County Community Action Program (150 +); Manpower (150 +); Albany International (150 +); Auxiliary Services Corp. (100 +); Onondaga-Cortland-Madison BOCES (100 +); NBT Bank, NA (100 +); Family Health Network (100 +); Lowes Home Improvement (100 +).¹²

⁹ U.S. Dept. of Labor, Bureau of Labor Statistics, Local Area Unemployment Statistics, retrieved from http://data.bls.gov/pdq/SurveyOutputServlet;jsessionid=B7351DCBEA26DE90F43D36851CB884F0.tc_instance4

¹⁰ U.S. Census Bureau, Local Employment Dynamics Cortland County Work Area Profile Report, retrieved from <http://onthemap.ces.census.gov/>

¹¹ American Community Survey 5-Year Estimates 2010-2014, Table S0804 Means of Transportation and Table B23008 Age of Own Children www.factfinder2.census.gov/

¹² Cortland County Business Development Corporation, retrieved from: <http://cortlandbusiness.com/major-employers/>

The New York State Department of Labor makes the following net employment growth or reduction projections in the Central New York region by 2022 (compared with a base year of 2012):¹³

NAICS	Industry Title	Employment		Net Change	Percent
		2012	2022		
71	Arts, Entertainment, and Recreation	4,890	5,990	1,100	22.5%
72	Accommodation and Food Services	28,350	34,350	6,000	21.2%
62	Health Care and Social Assistance	50,060	58,210	8,150	16.3%
1024	Professional and Business Services	34,140	39,240	5,100	14.9%
23	Construction	13,870	15,840	1,970	14.2%
11	Agriculture, Forestry, Fishing and Hunting	2,840	3,200	360	12.7%
81	Other Services (except Government)	14,720	16,320	1,600	10.9%
48	Transportation and Warehousing	10,210	11,120	910	8.9%
61	Educational Services	51,040	53,640	2,600	5.1%
44	Retail Trade	41,320	42,190	870	2.1%
000671	Total Self Employed and Unpaid Family Workers, All Jobs	22,720	23,180	460	2.0%
42	Wholesale Trade	16,590	16,740	150	0.9%
52	Finance and Insurance	17,750	17,430	-320	-1.8%
31	Manufacturing	30,930	30,010	-920	-3.0%
9	Government	31,880	30,650	-1,230	-3.9%
22	Utilities	3,560	3,340	-220	-6.2%
51	Information	5,030	4,590	-440	-8.7%
21	Mining	230	190	-40	-17.4%
000000	Total All Industries	382,540	408,740	26,200	6.8%

Figure 1: Long-term employment projections

Looking at the total for all industries, there is a projected net gain of jobs in the region between 2012 and 2022 of 26,200, a gain of 6.8 percent over the 2012 total number of jobs.

Income and Poverty

The 2010-2014 ACS reports that the median household income in Cortland County is \$48,404 and that the estimated per capita income is at \$23,581, *with neither figure representing much change since the last report*. The same report listed the percentage of all Cortland County residents with incomes below the Federal Poverty Level (FPL) at 13.5 percent, compared with 15.6 percent statewide and a national rate of 15.6 percent. Cortland County families with children under the age of five are faring worse. The poverty rate among these families was 24 percent, down more than four percentage points from the 3-year estimate of 28.5 percent reported last year, and higher than the U.S. rate of 18.6 percent and the state rate of 17.1 percent. **Single women with children under the age of five had the highest rate of poverty in the county at 69.1 percent, down slightly from 72.3 percent but still astonishingly high. This rate, too, is much higher than for similar families in the U.S. (47.0%) and New York (40.7%)**¹⁴.

¹³ NYS Department of Labor, Long-term Employment Projections 2008-2018, retrieved from

<http://www.labor.ny.gov/stats/lspoj.shtm>

¹⁴ American Community Survey 5-Year Estimates 2010-2014, Selected Economic Characteristics, retrieved from http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_14_5YR_DP03&src=pt

According to Cortland County Department of Social Services (DSS) data, the number of Public Assistance (TANF) cases has grown from 494 in November 30, 2012, to 580 as of November 30, 2015, an increase 17.4 percent.

The following table summarizes the percentage of students eligible for free or reduced lunch in the five school districts served by CAPCO Head Start¹⁵. Eligibility for free or reduced lunch is another way to assess the level of poverty in a geographic area. Eligibility has grown in four of the five districts since the 2011-2012 school year. In Cincinnatus and Marathon, the rate of eligibility for free or reduced lunch is two percentage points higher than the statewide rate of 51 percent.

AGENCY NAME- MOST RECENT YEAR (DISTRICT)	Local Free or Reduced 11-12	Local Free or Reduced 13-14	+/- Percentage Points 11 to 14	NYS Free or Reduced 13-14	Difference Local & NYS Free or Reduced 13-14
Cincinnatus Central School District	57%	53%	-4%	51%	2%
Cortland City School District	50%	51%	1%	51%	0%
Homer Central School District	31%	37%	6%	51%	-14%
Marathon Central School District	46%	53%	7%	51%	2%
McGraw Central School District	43%	48%	5%	51%	-3%

Table 2: School District Poverty Indicators

Cortland County: Health

Throughout this section of the report, reference is made to the county's ranking on certain public health indicators. These rankings come from an assessment in which the **NYS Department of Health (DOH)** orders the counties by rank from best to worst on each of the **County Health Assessment Indicators (CHAI)**. **Counties then are grouped into a ranking schema where "1st" is the most favorable ranking group and "4th" is the least favorable.**¹⁶

Infant and Young Child Mortality

Cortland County's infant (< 1 year) mortality rate for the period 2011-2013 was 7.8 per

¹⁵ NYSED School Report Cards, retrieved from <http://data.nysed.gov/index.php>

¹⁶ NYS DOH, County ranking methodology; <http://www.health.ny.gov/statistics/chac/chai/overview.htm#rank>

1,000 live births, compared with a statewide rate of 5.0. Cortland County ranked in the 4th group for infant mortality.¹⁷

Natality

Women experiencing the highest rate of pregnancy in Cortland County are in the age groups 25-29 (139.9 pregnancies per 1,000 females) and 30-34 (98.6 pregnancies per 1,000 females). These figures track pretty evenly with the statewide rates. The state's highest rate (131.2 per 1,000), occurs among aged 30 – 34, followed closely by its next highest rate (124.1 per 1,000) among women aged 25-29.¹⁸ With respect to teen pregnancy, the 2011-2013 CHAI tables show Cortland's teen pregnancy rate at 25.5 per 1,000 among those aged 15 – 19, compared with a regional rate of 36.4 and a state rate of 41.3. Cortland ranks in the 2nd ranking group on this measure. On the other hand, the report places Cortland County in the 4th ranking group for “percentage of births to teens age 15-19,” with Cortland's rate at 9.7 percent compared with a statewide rate of 5.2 percent. The CHAI data also report that the percentage of births within 24 months of a previous pregnancy is higher for Cortland County (21.6%) than for the state as a whole (18.5%), and the table shows Cortland in the 2nd ranking group on this indicator, which is interpreted here as a measure of unplanned pregnancy. **More than 52 percent of births in Cortland County are to out-of-wedlock mothers. The statewide percentage is 40.9 percent and Cortland ranks in the 4th ranking group on this measure.**

Maternal / Infant Health

Cortland County ranks in the 1st (best) CHAI ranking category for indicators related to prenatal care, implying that pregnant mothers are receiving adequate prenatal care. According to one indicator, 80.7 percent of pregnant women in the county received adequate prenatal care.¹⁹ At the time of this update, the county ranks in the 2nd ranking group in percentage of births to women 25 years and older without a high school education with 8.1 percent fitting that description compared with a statewide rate of 14.1 percent.

Whereas Cortland County placed in the 4th (worst) ranking group on seven indicators at the time this report was last updated, it now places in the fourth group on two indicators: infant mortality (< 1 year; 7.8 per 1000 live births); neonatal mortality (< 28 days; 5.7 per 1,000 live births);

In addition, the county ranked 4th on some indicators specifically tracked for women receiving assistance from the WIC program between 2010 and 2012: percentage of

¹⁷ NYS Dept. of Health County Health Assessment Indicators 2011-2013, retrieved from http://www.health.ny.gov/statistics/chac/chai/docs/mih_11.htm

¹⁸ NYS Dept. of Health Vital Statistics, retrieved from http://www.health.ny.gov/statistics/vital_statistics/2010/table27.htm

¹⁹ NYS Dept. of Health, 2010-2012 County Health Assessment Indicators, retrieved from http://www.health.ny.gov/statistics/chac/chai/docs/mih_11.htm

women in WIC who were pre-pregnancy obese (33.3%); percentage of women in WIC with a gestational weight gain greater than ideal (53.8%); percentage of women in WIC with hypertension during pregnancy (13.3%). The ranking system shows that at least 75% of New York counties had better health outcomes than did Cortland County on these indicators between 2010 and 2012.

Disease and Mortality

Young child hospitalizations (based on discharge rate per 10,000 population age 0-4 in 2011-2013) for the following conditions compare as noted in the chart below²⁰: The NYS Department of Health **ranked Cortland County in the 4th (least favorable) group for pneumonia hospitalization.** Notably, the county again improved its rank from the 3rd group to the 2nd group (after a prior year improvement from 4th to 3rd) for the incidence of confirmed high blood lead level. The rate has decreased from 8.9 per 1,000 tested reported in the 2010-2012 data to 6.6 per 1,000 tested as of the 2011-2013 data release). Please note the hospitalizations for otitis media could not be included in the chart because the data reported this cycle did not meet reporting criteria.

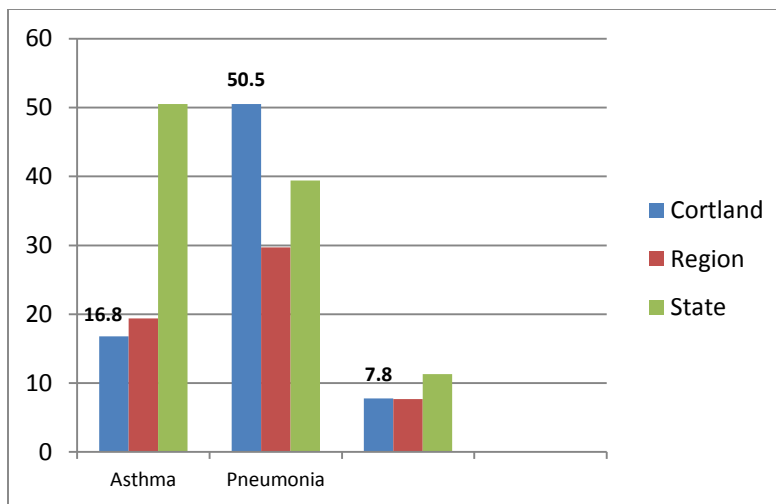


Figure 2: 2011-2013 Hospitalizations Among Children Birth Through Age 4 Based On Discharge Rate Per 10,000 Residents In Age Group.

²⁰ NYS Dept. of Health 2011-2013 County Health Assessment datasets, retrieved from http://www.health.ny.gov/statistics/chac/chai/docs/cah_11.htm

Hospitalizations for common conditions among those of all ages (based on a discharge rate per 10,000) in Cortland County compare with the region and state as presented in the following chart. The county is placed in the 4th Ranking group for cardiovascular disease stroke, coronary heart disease, and chronic lower respiratory disease.²¹

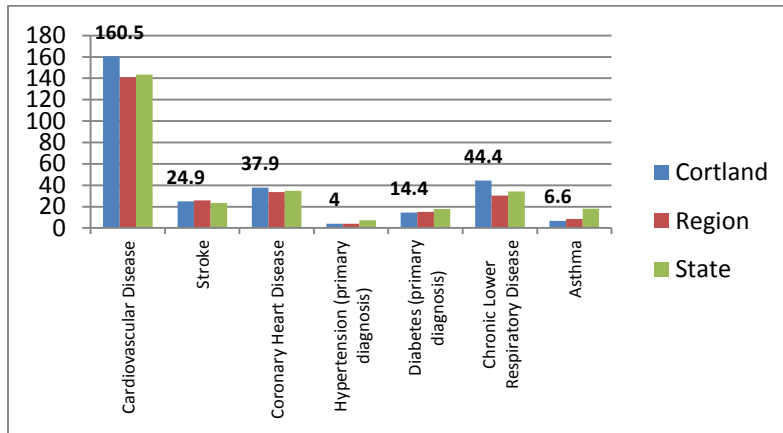


Figure 3: 2011-2013 Hospitalizations among residents (all ages) based on discharge rate per 10,000 residents.

Incidence of cancer among Cortland County residents occurs at a rate per 100,000 residents as presented in the following chart. Cortland County is placed in the 4th ranking group for the following individual cancer incidence rates: colorectal and breast. The county improved from the 4th to the 3rd ranking group on incidence of all cancers and on incidence of lung cancer since the prior year data release.²²

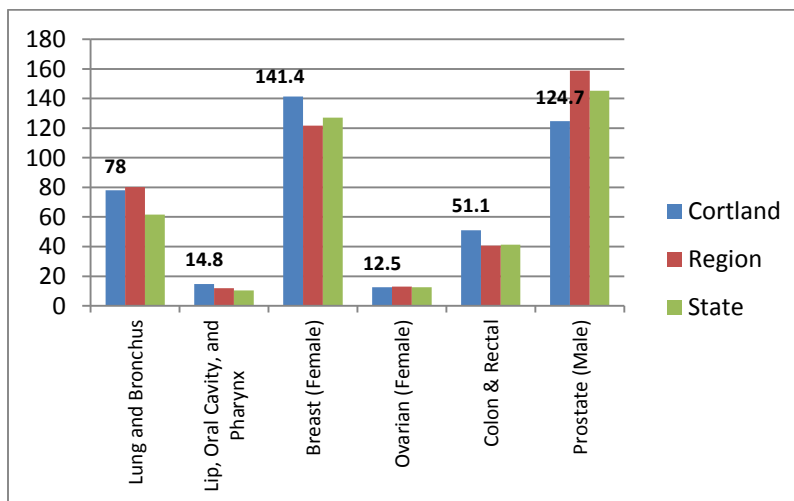


Figure 4: 2011-2013 Incidence of cancer per 100,000 residents

²¹ NYS Dept. of Health 2011-2013 County Health Assessment Indicators, retrieved from: http://www.health.ny.gov/statistics/chac/chai/chai_11.htm

²² NYS Dept. of Health 2011-2013 County Health Assessment Indicators, retrieved from: http://www.health.ny.gov/statistics/chac/chai/chai_11.htm

The leading causes of premature death in Cortland County are: (1) cancer, (2) heart disease, (3) chronic lower respiratory diseases, (4) unintentional injury, and (5) stroke.²³

Disability affects some 6,015 (12.3%), residents of Cortland County. Among the population under the age of 18, 464 or 4.7 percent of residents have a disability.²⁴ In 2013, 2.88 percent of Cortland County's children birth to age three were served by the Early Intervention Program.²⁵ Since the American Community Survey estimates there are 1,341 children under age 3 in the county, then approximately 39 children are being served by Early Intervention.

Health Care Capacity and Access

The New York State Department of Health reports that there is one hospital in Cortland County: Cortland Regional Medical Center, Inc. in Cortland (162 licensed beds). Cortland Regional Medical Center is designated by the State of New York as a Level 1 Perinatal Center. The following services are available at this hospital: Ambulatory Surgery - Multi Specialty; Clinical Laboratory Service; Coronary Care; Emergency Department; Intensive Care; Magnetic Resonance Imaging; Maternity; Medical Social Services; Medical/Surgical; Nuclear Medicine – Diagnostic; Pediatric; Psychiatric; Radiology – Diagnostic; Swing Bed Program, and Therapy - Physical O/P²⁶

The Center for Health Workforce Studies at University at Albany's School of Public Health publishes the *Health Workforce Planning Data Guide*²⁷. The 2014 edition of this publication shows that there are 74 physicians in Cortland County, or 151.7 per 100,000 population. Thirty-nine of these physicians, or 80.0 per 100,000, are primary care physicians. The concentration of primary care physicians in Downstate New York was 136.2 per 100,000 while the concentration in Upstate New York was 102.8 per 100,000. Cortland County is partially designated as Health Professional Shortage areas by the Health Resources and Services Administration for its Medicaid eligible population and one facility, the Family Health Network of Central New York.²⁸

The 2010-2014 American Community Survey reports that an estimated 10 percent of Cortland County residents between ages 18 and 64 are not insured, and 5.1 percent of those under age 18 are not insured. Among unemployed residents over age 18, the rate of

²³ NYS Dept. of Health, Leading Causes of Premature Death by County, New York State 2011-13, retrieved from https://www.health.ny.gov/statistics/leadingcauses_death/pm_deaths_by_county.htm

²⁴ U.S. Census Bureau, American Community Survey 5-Year Estimates, 2010-2014, Selected Social Characteristics, retrieved from http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_14_5YR_DP02&src=pt

²⁵ NYS Department of Health, Early Intervention Municipality Performance retrieved from: https://www.health.ny.gov/statistics/community/infants_children/early_intervention/local_program_performance/cortland.htm

²⁶ NYS Department of Health, Hospital Profiles, retrieved from: http://hospitals.nyhealth.gov/browse_search.php?form=COUNTY&rt=cortland

²⁷ Center for Health Workforce Studies, University at Albany, *Annual New York Physician Workforce Profile*, retrieved from <http://chws.albany.edu/index.php?nyphysicians>

²⁸ Health Resources and Services Administration, Find Health Professional Shortage Areas, retrieved from: <http://hpsafind.hrsa.gov/HPSASearch.aspx>

uninsured is 27.1 percent. Lack of health coverage occurs at the highest rates among those who worked less than full time (10.3% uninsured); those who earned between \$25,000 and \$49,999 annually (12.7% uninsured) and those with incomes between 138% and 199% of the Federal Poverty Level (14.9% uninsured)²⁹.

Since New York State has taken over Medicaid, county caseloads have steadily dropped but this does not reflect a change in demand for public health insurance. According to the American Community Survey, there are 6,168 Cortland County residents aged birth to 64 who rely on Medicaid as their only source of health insurance.³⁰

According to the *2014 Health Workforce Planning Data Guide* 28.6 per 100,000 dentists in Cortland County compared with rates of 60.2 per 100,000 Upstate and 76.2 per 100,000 Downstate.³¹ The Family Health Network of Central New York is designated as a Dental Health Professional Shortage Area by the HRSA.³² According to 2009 data presented in the *2015 Cortland Counts 2015 Report Card*³³, a little more than 61 percent of county residents over age 18 had a dental visit in the prior year, which was lower than the rates for Upstate (70.9%) and all of NYS (69.3%).

Cortland County Nutrition

Weight

Among a sample of elementary school students, 36.8 percent in Cortland County were classified as overweight or obese, based on having weights at the 85th percentile or higher. (The rate increased by two percentage points since the last report and the county went from being placed in the 2nd ranking group on this indicator to being placed in the 4th ranking group.) Among children aged 2 – 4 tested through the WIC program (Women Infants Children), 15.3 percent are obese, based on having a weight at the 95th percentile or higher, compared with a regional rate of 14.9% and a state rate of 14.3%. (No figures were reported for overweight in this age group; the county ranked in the 3rd ranking group on this indicator.) Approaching 18 percent of a sample of WIC mothers tracked between 2009 and 2011 breastfed their babies at six months. This figure has decreased from 21 percent at the last report. It is the same as the regional percentage of 17.6 but is a good bit lower than the state rate of 38.2 percent.

²⁹ U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates Health Insurance Coverage Status retrieved from: http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_11_3YR_S2701&prodType=table

³⁰ American Community Survey 5-Year Estimates 2010-2014 Types of Health Insurance Coverage by Age, retrieved from http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_14_5YR_B27010&prodType=table

³¹ Center for Health Workforce Studies, University at Albany, *Annual New York Physician Workforce Profile*, retrieved from <http://chws.albany.edu/index.php?nyphysicians>

³² Health Resources and Services Administration, Find Health Professional Shortage Area , retrieved from <http://hpsafind.hrsa.gov/HPSASearch.aspx>

³³ Cortland Counts 2015 Report Card, retrieved from http://media.wix.com/ugd/f06d2c_e67983053afb49b7ba9e37e0d89145ea.pdf

Among adults: more than 65 percent of adults are overweight or obese (3rd ranking group), 30.1 percent did not participate in leisure time physical activity in the past month (1st ranking group), and 29.3 percent eat five or more servings of fruit or vegetables daily (1st ranking group).³⁴

Food Security

The USDA Economic Research Service defines food security and food insecurity as follows:

“Food security for a household means access by all members at all times to enough food for an active, healthy life. Food security includes at a minimum: (1) the ready availability of nutritionally adequate and safe foods, and (2) assured ability to acquire acceptable foods in socially acceptable ways (that is, without resorting to emergency food supplies, scavenging, stealing, or other coping strategies).”

Food insecurity: “Limited or uncertain availability of nutritionally adequate and safe foods or limited or uncertain ability to acquire acceptable foods in socially acceptable ways.”³⁵

Feedingamerica.org presents county level food insecurity data and reports that Cortland County had an overall food insecurity rate of 13.6 percent in 2012 which is up about one percentage point since the last update of this report. **Among those with incomes below 200 percent of the Federal Poverty Level, the rate is 70 percent.** Among children in the county, the food insecurity rate is 22.6 percent, up more than a point since the last report. **Among children in households with incomes below 185 percent of the FPL, the rate is fully 81 percent.**³⁶

According to the Department of Social Services, use of Food Stamps in Cortland County has increased by 10.8 percent from 3,265 cases as of November 30, 2012 to 3,616 cases as of November 30, 2015.

³⁴ NYS Dept. of Health, 2011-2013 Community Health Assessment Indicators, retrieved from http://www.health.ny.gov/statistics/chac/chai/docs/obs_11.htm

³⁵ USDA Economic Research Service Web site: <http://www.ers.usda.gov/Briefing/FoodSecurity/measurement.htm#and>

³⁶ Feedingamerica.org Map the Meal Gap (2012 data) tool, retrieved from <http://feedingamerica.org/hunger-in-america/hunger-studies/map-the-meal-gap.aspx>

Cortland County: Social Services

The NYS KWIC profile for Cortland County child welfare shows that, in 2014, 39.8 per 1,000 children and youth (age 0-17) were involved in indicated reports of abuse or maltreatment, compared with a rate of 16.5 children per 1,000 across the state.³⁷ Data from the Office of Children and Family Services showed that the county had a 21.9 percent rate of recurrence of children involved in indicated reports of child abuse and maltreatment as of September 2013, compared with the state average of 11.7 percent in the same time period, and a national standard of 5.4 percent or less. Cortland had the 5th highest rate of recurrence among the 65 reporting counties. There were 236 indicated reports of child abuse and maltreatment in 2013³⁸

The NYS KWIC profile for Cortland County also shows that, in 2014, 43 children between the ages of zero and 17 were admitted to foster care in the county, for a rate of 3.3 per thousand, compared with a state rate of 2.0 per thousand. This figure represents a decrease of 46 children compared with the number admitted to foster care in 2010. A total of 70 children and youth (age 0 – 21) were in foster care during 2012 in Cortland County, compared with 145 children in 2010. The 2014 rate of children in foster care is 4.0 per thousand children compared with a statewide rate of 3.4 per thousand.³⁹

Some other noteworthy child welfare facts include:

- In 2013, 217 people were counted as victims of domestic violence in Cortland County. Of these, 162 were victims of intimate partner violence, including 22 males and 140 females. “Other family victims” accounted for the remaining 55 victims reported. *The number of domestic violence victims has gone down considerably since the last update of this report.*⁴⁰
- Cortland County DSS had 139 open Preventive Services cases at the end of November, 2015, representing a 27.1 percent increase over the number of cases (109) open at the end of November, 2012.
- There are an estimated 662 grandparents in the county living with their own grandchildren under age 18. Of these, 400 grandparents are responsible for the grandchildren. In 134 of the cases where the grandparents are responsible for the grandchildren, none of the children’s parents are present.⁴¹

³⁷ NYS Kids Wellbeing Indicators Clearinghouse (KWIC) Schuyler County Profile

http://www.nyskwic.org/get_data/county_report_detail.cfm?countyid=36023&profileType=1&Go.x=24&Go.y=13

³⁸ NYS Office of Children & Family Services (OCFS) Data Profiles retrieved from <http://ocfs.ny.gov/main/cfsr/counties.asp>

³⁹ NYS Kids Wellbeing Indicators Clearinghouse retrieved from

http://www.nyskwic.org/get_data/county_report_detail.cfm?countyid=36023&profileType=1&Go.x=24&Go.y=13

⁴⁰ NYS Division of Criminal Justice, 2014 Domestic Violence Victim Data, retrieved from

<http://www.criminaljustice.ny.gov/crimnet/oisa/domesticviolence/index.htm>

⁴¹ U.S. Census Bureau, American Community Survey 5-Year Estimates 2010-2014, Grandchildren Living with Grandparent by Responsibility and Presence of Parents, retrieved from:

http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_14_5YR_B10002&prodType=table

Cortland County: Transportation

The Cortland County Transportation Advisory Committee has updated its needs assessment and transportation plan for the county. The current plan is titled *Cortland County Coordinated Public Transit Human Services Transportation Plan* and dated August 2013⁴². (Note: This information has not changed since the last issue of this report.) It identifies five goals designed to meet needs the group identified during a 2013 study update:

1. Communication, Education, Marketing to increase use of existing services.
2. Regional Coordination to help fill the unmet need for public travel outside the county to Syracuse, Ithaca and Binghamton for work.
3. Coordination within the county among agencies to sustain the service.
4. Technology to facilitate service usage.
5. Service Development and Funding to ensure appropriately maintained vehicle fleet and service access.

As noted in the employment section of this report, the mean travel time to work by residents of Cortland County is 20.8 minutes. The large majority (75.2%) drive to work alone. Carpooling was a means of transportation to work for 11.4 percent of workers and 6.8 percent of workers walk to their jobs. Less than one percent used public transportation as a means of travel to work.⁴³

Cortland County: Substance Abuse

Drugs

NYS Department of Health statistics show that the rate of drug-related hospital discharges for 2011-2013 was 12.2 per 10,000 discharges compared with a regional rate of 18.1 per 10,000 and a state rate of 23.6 per 10,000.⁴⁴ This figure represents a positive downward trend in the 3-year average rate reported for Cortland County.

The NYS Division of Criminal Justice reports 99 felony and 110 misdemeanor drug-related arrests in Cortland County during 2014. In 2011, there were 49 felony drug arrests and 74 misdemeanor drug arrests. The numbers in both of these categories have fluctuated over the years, but a look at the trends in drug-related arrests as a percentage of all arrests since 2004 suggests that drug-related crime spiked a good deal in 2007,

⁴² Cortland County Coordinated Public Transit Human Services Transportation Plan, August 2013, retrieved from: <https://www.dot.ny.gov/divisions/policy-and-strategy/public-trans-respository/Cortland%20Plan.pdf>

⁴³ U.S. Census Bureau, 2011-2013 American Community Survey, Selected Economic Characteristics, Cortland County New York retrieved from <http://factfinder2.census.gov>

⁴⁴ NYS Dept. of Health Community Health Data Sets retrieved from <http://www.health.ny.gov/statistics/chac/hospital/drug.htm>

somewhat in 2011, and sharply again in 2013 and 2014. Drug-related crime was at its highest in 2014⁴⁵

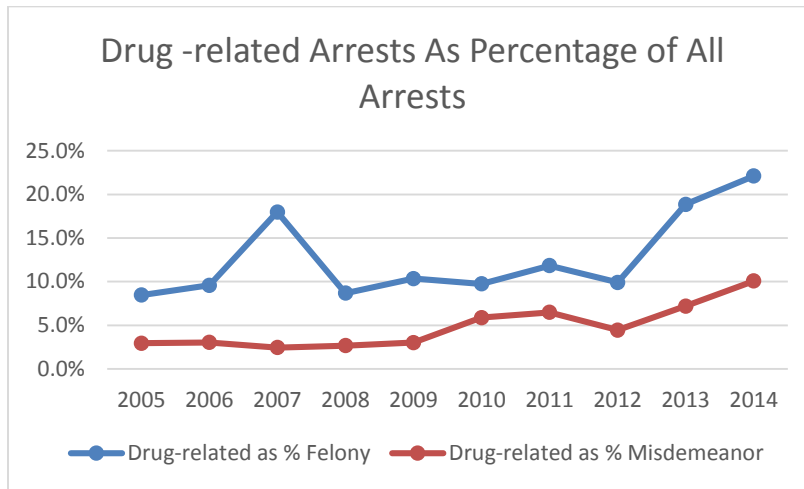


Figure 5: Trends in drug-related arrests since 2005

Alcohol

The NYS DOH Community Health data set for 2011-2013 reports a rate of alcohol-related motor vehicle deaths and injuries in Cortland County of 61.6 per 100,000 population. This rate is a good deal higher than the regional rate of 44.3 and the state rate of 33.3.⁴⁶ While the three-year average rate of alcohol-related motor vehicle deaths and injuries held steady the 40s and 50s since 2004 when it rested at 68.3 per 10,000, the rate calculation in 2012 rose to 61.6. There were a total of 205 DWI arrests during 2014 in the county, 177 of which were classified as misdemeanors. Trends over the past three years suggest DWI arrests account steadily for about 6 -7 percent of all felony and about 16-24 percent of all misdemeanor arrests in the county.⁴⁷ The Behavioral Risk Factor Surveillance System report for Cortland County (2013-2014 data) reports that 19 percent of the county's adult residents binge drink, defined as males having had more than five drinks and females more than four drinks on one or more occasions in a month. This compares with a state rate of 17.7 percent. Older data show that, in Cortland, the rate of binge drinking is highest (20.3%) among those earning between \$25,000 and \$49,999. For those earning less than \$24,999, the rate is 10.2 percent. Males tend to binge drink at higher rates (29.7%) than do females (13.4%).⁴⁸ The DOH assigned Cortland County to its third (with fourth being the lowest) ranking group for binge drinking.⁴⁹

⁴⁵ NYS Division of Criminal Justice statistics "Adult Arrests by County" retrieved from <http://www.criminaljustice.ny.gov/crimnet/ojsa/arrests/index.htm>

⁴⁶ NYS Dept. of Health

⁴⁷ NYS Division of Criminal Justice

⁴⁸ New York State Expanded Behavioral Risk Factor Surveillance System; Cortland County Final Report July 2008 - June 2009, retrieved from <http://www.health.ny.gov/statistics/brfss/expanded/2009/county/docs/cortland.pdf>

⁴⁹ NYS DOH County Health Assessment Indicators, retrieved from: http://www.health.ny.gov/statistics/chac/chai/docs/sub_11.htm

The older report showed that 7.5 percent of adults reported heavy drinking, compared with five percent statewide. This behavior, too, seems concentrated among males (11.3%) compared with females (4.1%). Data were not available on the concentrations of heavy drinking by income range.⁵⁰

Tobacco

In Cortland County, 21.5 percent of adults smoke, compared with 15.9 percent statewide. More than 77 percent of adults live in homes where smoking is prohibited (the state average is nearly 81%). The DOH assigned Cortland County to its second ranking category on both measures.⁵¹

Cortland County: Housing / Homelessness

In the 2014-2015 school year, some 79 students in Cortland County Public Schools were identified as homeless, down slightly from 81 students in the 2012-2013 school year. This figure represents 1.2 percent of the student body in the five school districts. There were 46 homeless students in the Homer Central School District, 16 in the Cortland City School District, 12 in McGraw schools, and there was insufficient reporting data in Cincinnatus and Marathon CSD.⁵²

The supply of quality housing in Cortland County is inadequate. Table 3, adapted from a sample used in the S2AY network's County Public Health System Assessment, shows that the prevalence of mobile homes as a percent of units is notably higher in the service area than in the state or the nation, as is the percentage of homes built before 1939 and the percentage without phone service.

The American Community Survey data further suggests that, for about 44.6 percent of renters in Cortland County, rent is unaffordable (more than 30% of income). In the nation as a whole and in New York State, about 52-54 percent of renters face unaffordable rent.⁵³

⁵⁰ New York State Expanded Behavioral Risk Factor Surveillance System; Cortland County Final Report July 2008 - June 2009, retrieved from <http://www.health.ny.gov/statistics/brfss/expanded/2009/county/docs/cortland.pdf>

⁵¹ NYS DOH County Health Assessment Indicators, retrieved from: http://www.health.ny.gov/statistics/chac/chai/docs/sub_11.htm

⁵² NYS TEACHS, Data and Statistics on Homelessness, retrieved from: <http://www.nysteachs.org/info-topic/statistics.html>

⁵³ U.S. Census Bureau, American Community Survey Three-year Estimates, Selected Housing Characteristics, retrieved from: <http://factfinder2.census.gov>

Characteristic	Cortland	State	US
Number of Units	20,554	8,153,309	132,741,033
Mobile homes as percent of total units	9.1	2.4	6.4
% built prior to 1939	45.2	32.8	13.3
Median rooms	5.8	5	5.5
% in home since 1989 or prior	25.2	22.9	147.3
% with no vehicles	9.9	29.3	9.1
% with 2 or more vehicles	54.6	38	57.1
% that lack complete plumbing	0.8	0.5	0.5
% that lack complete kitchen	2	0.9	0.9
% with no phone service available	6	2.5	2.5
Median value	105,200	283,700	175,700
% with mortgage	54.6	63.8	65.6
Median Selected Owner Cost w/ Mortgage	1,235	2,042	1,522
%Owners with mortgage paying 30% or more for "selected monthly owner costs"	25.4	39.3	34.2
Median rent	675	1,117	920
% of renters paying 30% or more of income for rent	44.6	53.9	52.3

Table 3: Cortland County Selected Housing Characteristics

Head Start Demographics

The following charts illustrate program characteristics and demographic composition of families enrolled in **Head Start** in the service area. The total number of funded enrolled children is 200 and the total cumulative enrollment is 221.

Figure 6: HS Enrollment by Program Type

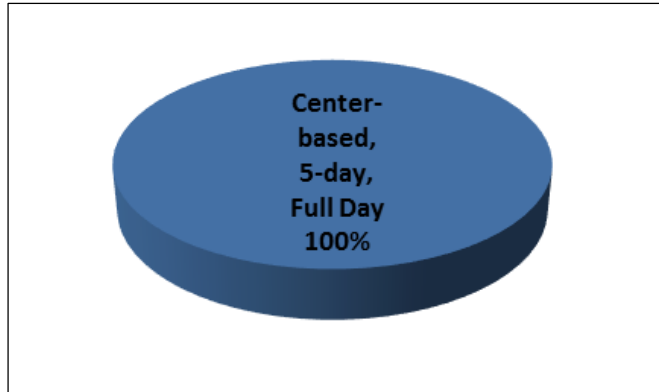


Figure 7: HS Enrollment by Age

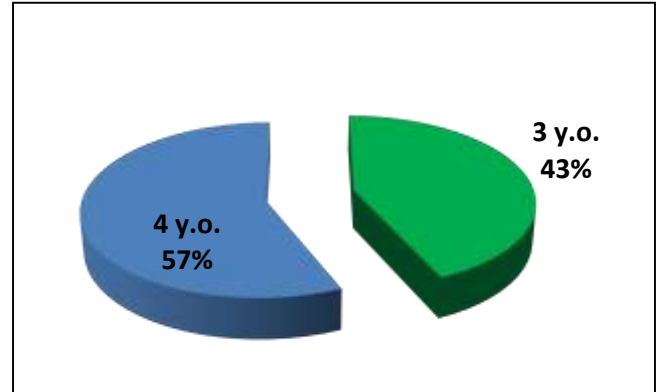


Figure 8: HS Enrollment by Primary Type of Eligibility

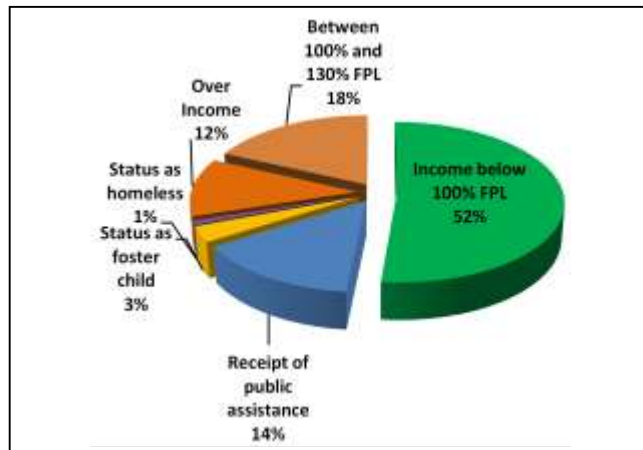


Figure 9: HS Family Health Insurance Distribution (End of Program Year)

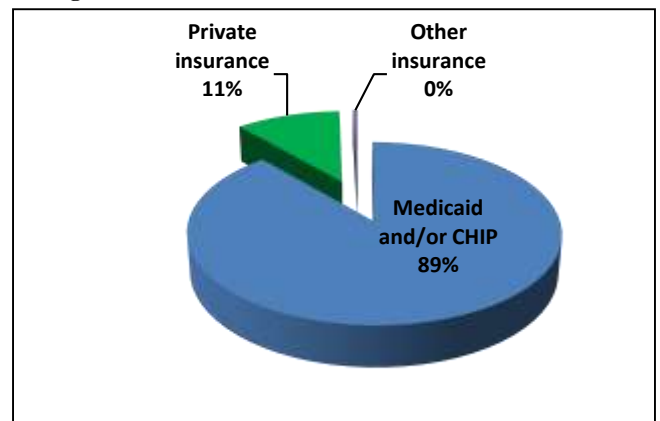


Figure 10: HS Highest Level of Parent Educational Attainment

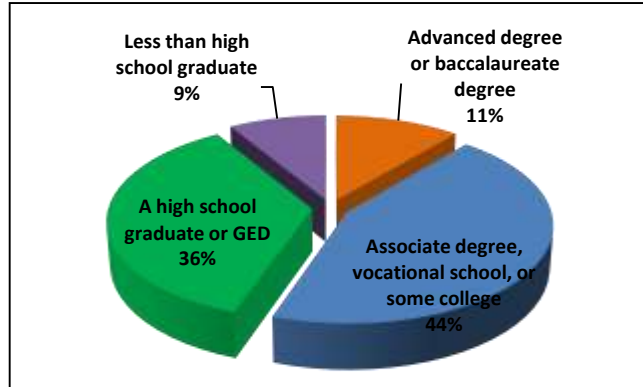
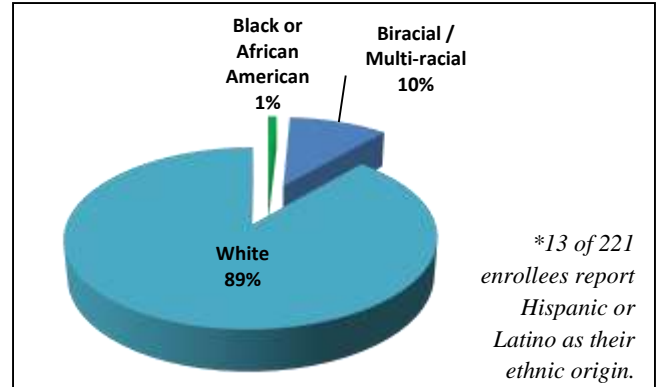


Figure 11: HS Race and Ethnicity*



Source: 2014-2015 Year-end PIR Data

Early Head Start Demographics

The following charts illustrate program characteristics and demographic composition of families enrolled in **Early Head Start** in the service area. The total number of funded enrolled participants is 72. The total cumulative enrollment is 90. There are 6 pregnant women enrolled.

Figure 12: EHS Child Enrollment by Program Type

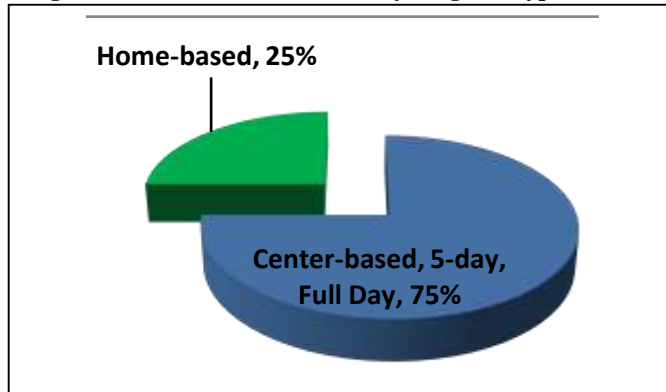


Figure 13: EHS Enrollment by Age

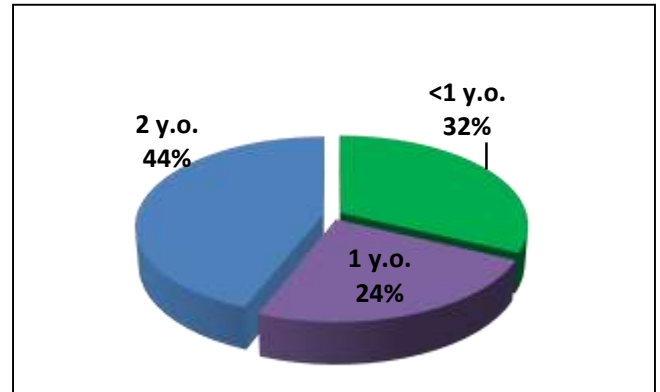


Figure 14: EHS Enrollment by Primary Type of Eligibility

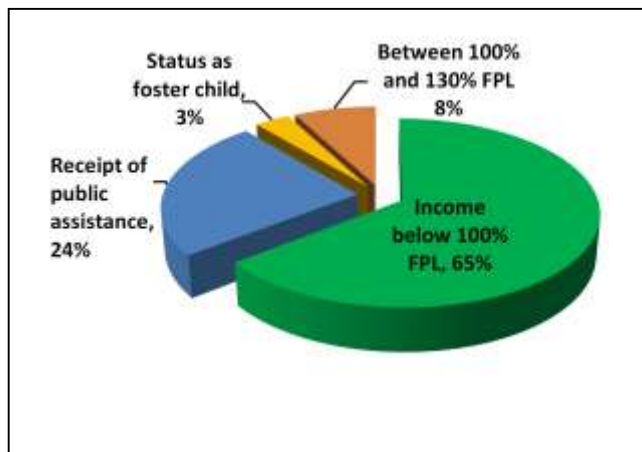


Figure 15: EHS Child* Health Insurance Distribution (End of Program Year)

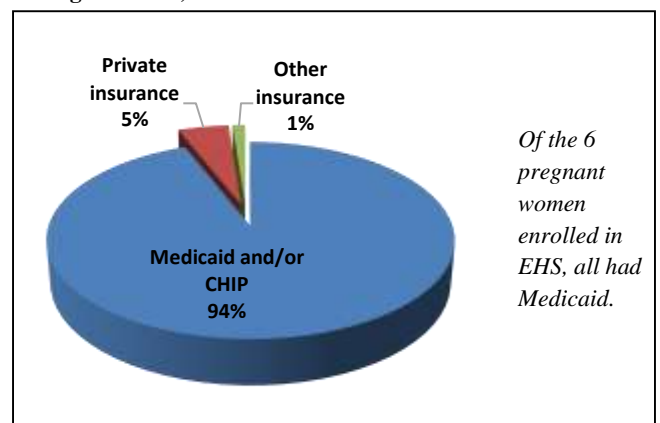


Figure 16: EHS Highest Level of Parent Educational Attainment

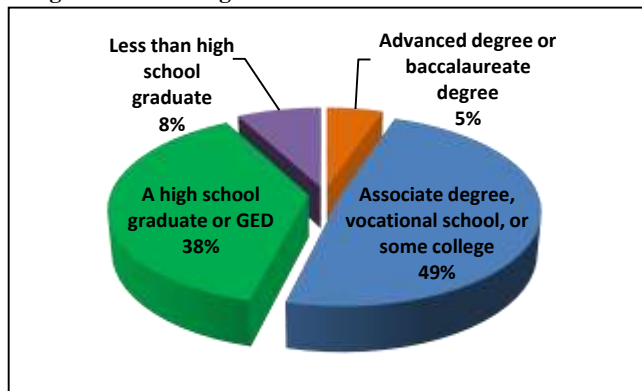
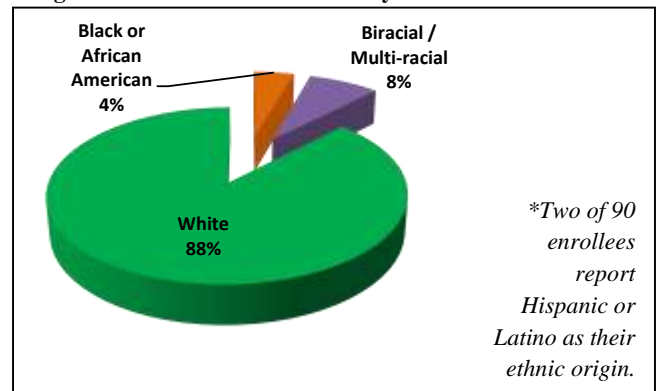


Figure 17: EHS Race and Ethnicity*



Source: 2014-2015 Year-end PIR Data

Early Education Need and Capacity

Child Care Need Among Head Start / Early Head Start Families

According to 2014-2015 PIR Data, nearly 53 percent of Head Start and Early Head Start families have all parents in the family working, showing that 149 of the 282 families enrolled in the programs rely on it for child care purposes. This data point shows that a smaller share of HS/EHS families have all parents in the family working compared with the general population. In the general population of children under the age of six in Cortland County, 66.3 percent have all parents in the family working. Head Start children from families with a stay-at-home parent, of course, experience the substantive benefits of participating in the program regardless of the family's ability to take advantage of its role as child care to facilitate workforce participation. The following table shows the breakdown of family employment based on program and family composition:

Table 4: Head Start Family Employment Information (Source: 2014-2015 PIR Data)

Information About Two-parent Families						
Program	families in program	That Are Two-Parent	parents working	working	not working	"need" child care
Head Start	113	55%	50	48	15	50
Early Head Start	48	63%	16	32	0	16
					<i>Sub_Need</i>	<i>66</i>
Information About One-parent Families						
Program	families in program	That Are One-Parent	working		parent not	"need" child care
Head Start	93	45%	67		26	67
Early Head Start	28	37%	16		12	16
					<i>Sub_Need</i>	<i>83</i>
TOTAL ENROLLED HEAD START	206					
TOTAL ENROLLED EARLY HEAD START	76					
TOTAL ENROLLED	282					
TOTAL ENROLLED WITH CHILD CARE "NEED"						149

Other Child Care Programs Serving Young Children

Head Start Eligible Children Aged Three and Four

In Cortland county, an estimated 376 three- and four-year-olds are eligible for Head Start as of 2015 based on 2013-2014 enrollment figures from the five main school districts served by the program. The program is funded to serve 200 children in this age group, meaning some 176

eligible children cannot be served by the program as it is currently funded. *The following table shows the eligibility estimates.*⁵⁴

Estimated Head Start Eligible 3 & 4 year olds: Cortland County						
School District	13-14 K Enroll.	13-14 Gr. 1 Enroll	13-14 Gr. 2 Enroll	Est 3 & 4 y.o.	Rate Free Lunch (13-14)	Estimated Eligible 3 & 4 y.o.
Cincinnatus Central School District	53	56	40	100	0.42	42
Cortland City School District	221	219	191	423	0.42	178
Homer Central School District	146	123	145	277	0.28	78
Marathon Central School District	64	60	55	120	0.41	49
McGraw Central School District	45	36	34	77	0.39	30
				997	Total Eligible	376
					Funded Enrollment	200
					Difference	-176

Table 5: Estimated Number of 3 & 4 Year-olds Eligible for Head Start in Cortland County

Early Head Start Eligibility

Since an estimated 37.8 percent of the county's three and four year-olds are eligible for Head Start, it is reasonable to estimate that the same share of the county's children under age three would be eligible for Early Head Start. The U.S. Census Bureau estimates there are a total 1,341 children under age three living in the county⁵⁵. Applying the 37.8 percent rate to this total, we arrive at an estimate of 506 young children who are potentially eligible for the Early Head Start program. The program is funded to serve 72 children, meaning 434 potentially eligible young children cannot be served by the program as it is currently funded.

Public Pre-kindergarten

A total of 187 four-year-olds (of all incomes) attended public PreK in the service area during the 2013 – 2014 school year⁵⁶. There are 55 four-year-olds attending public PreK who are also served by Head Start because the two programs combine to serve children for a full day in the Cortland City School District. *These children are counted only once as being served by public programs.*

⁵⁴ NYS Education Department, School District Report Cards, retrieved from: <https://reportcards.nysed.gov/view.php?schedist=district&county=11&year=2011>

⁵⁵ U.S. Census Bureau, ACS 3-year Estimates, Population Under 18 Years of Age, retrieved from http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_13_3YR_B09001&prodType=table

⁵⁶ *ibid*

Child Care Needs – General Population Cortland County

Children Under Age Five Not Served In Public Programs

According to the calculations presented above, there are an estimated 997 children **aged three and four** in the county. Subtracting from this total the number of children served by Head Start (200) and public Prekindergarten (187 less 55 counted in Head Start total = 132) results in a difference of 665, or, the estimated number of children in this age group not served by public programs. While all 665 of these children would benefit from early childhood education programming, about **441 children aged 3 & 4 have all parents in the labor force (based on 66.3% rate⁵⁷) and therefore “need” child care.**

The U.S. Census Bureau estimates that there are 1,341 children **under age of three** in Cortland County.⁵⁸ Subtracting the number served by center-based Early Head Start (48) and applying the rate of parents with children under 6 in the workforce (66.3%) yields a **potential 857 infants and toddlers needing child care.**

Based on data from the Cortland Child Development Council, this report estimates regulated child care programs in the county offer a total of **773** slots for children under the age of five *other than those licensed to CAPCO and private child care centers for Head Start and/or Universal Prekindergarten.* The Child Development Council does not estimate how many of these slots serve Infants (birth to 2) and Preschoolers (2-4). So it is not possible to calculate a deficit of slots by age group. However, the total number of children under age five needing child care (1,293) exceeds the private, regulated child care capacity by 475 slots.

If Cortland County trends mirror those in nearby counties, many children needing child care are being served by an informal network of friend, family and neighbor care. If enrolled to receive subsidy fee assistance, these providers are known as “Legally Exempt.”

⁵⁷ U.S. Census Bureau, 2010 -2014 American Community Survey 5-Year Estimates, Selected Economic Characteristics, retrieved from: <http://factfinder2.census.gov>

⁵⁸ U.S. Census Bureau, Population Under Age 18, retrieved from: <http://factfinder2.census.gov>

Needs of Head Start Children and Families as Defined by Data

Head Start and Early Head Start Families: Education

Among the 221 children enrolled in Head Start throughout the year, 60 have Individualized Education Plans, up from 48 children last program year. Of these 60 children, 32 (53.3%) have a diagnosed primary disability of “**speech or language impairments,**” while 21 others have “multiple disabilities” and five other children have been classified with a “health impairment.” In the Early Head Start program, none of the 84 enrolled children have an Individualized Family Service Plan or were eligible to receive early intervention services.

Of the parents from the 282 families involved with Head Start and Early Head Start last year, 103 (36.5%) have a high school diploma or GED as their highest level of educational attainment, which is the same concentration as the general population over age 25 in the county fitting this description. A healthy 45.4 percent of Head Start & Early Head Start parents have an associate degree, vocational school or some college, which is higher than the slightly less than 31 percent fitting this description in the general population. **However, in the general population, 22.7 percent have a bachelor’s degree or higher, while just 9.6 percent of Head Start / Early Head Start parents have attained this level of education.** This figure does represent an increase of 2.6 percentage points since last year’s report. The concentration of Cortland Head Start parents who have less than a high school diploma is 8.5 percent, compared with 10 percent of the general population with less than a high school diploma. Thirty-three (14.9%) *Head Start* families and seven (8.3%) *Early Head Start* families received adult education services during the 2014-15 program year. **Compared with the general population, a much smaller concentration of parents involved with Head Start and Early Head Start obtain bachelor or advanced degrees.**

Head Start Families: Income and Employment

It goes without saying that all families enrolled in Head Start programs are subsisting on very low incomes or living in poverty. But it might not be obvious that in 81.2 percent of Head Start families at least one or the only parent is employed (up from 74 percent last year). It is notable that about one in 5.3 Head Start families has nobody employed, while one in 8.3 families in the general population had no workers in the past 12 months⁵⁹. More families in both the Head Start and the general population have work as of this report⁶⁰, however **Head Start families do face unemployment at higher rates than do families in the general population.** In addition, a large share (52% HS/65% EHS) of enrolled families are admitted to the program based on having incomes below 100% of the Federal Poverty Level. Only 13.5 percent of Head Start and Early Head Start families receive TANF. **Despite working, many Head Start families are**

⁵⁹ U.S. Census Bureau 2010-2014 5-Year Estimates, Employment Characteristics of Families, retrieved from: <http://factfinder.census.gov/>

⁶⁰ There was an error in the calculation used in last year’s report for the number of families in the general population with no workers in the past 12 months. It should have reported one in 7.7 families in the general population had no workers, but it mistakenly reported that one in 29 fit that description.

living in poverty. Despite probable eligibility, only 13.5 percent of families involved with Head Start receive TANF.

Head Start Families: Health

Health Care Coverage

At the end of the 2014-2015 enrollment year, all children participating in the Head Start program had health insurance, as did all children and pregnant women enrolled in Early Head Start. In both cases, the large majority of participants were insured through Medicaid and/or CHIP. Throughout the county, 5.1 percent of those under the age of 18 are uninsured, up from 3.4 percent as of the last report. **The Head Start population seems to be faring better than the general population when it comes to health insurance coverage.**

Preventive Care

At the end of the 2014-2015 enrollment year, PIR data show that all children participating in Head Start and all but 5 participating in Early Head Start throughout the year had a medical home (one through the Indian Health Service or a migrant community health center.) Five of the six pregnant women enrolled in Early Head Start had received prenatal care and 4 had received postpartum care. All (100 %) of Head Start enrolled children were up-to-date on preventive and primary health care milestones (including lead toxicity screening) while 59 of 84 (70.2%) of children enrolled in Early Head Start were up-to-date. In the general population of Cortland County children aged birth to 15 months with government sponsored insurance, 90.1 percent have received the recommended number of well-child visits and, among children aged three to 6 years with government sponsored insurance, the figure is more than 83 percent. In addition, 100 percent of Head Start and Early Head Start enrollees were determined by a health care professional to be up-to-date on all applicable or possible immunizations for their age at the end of the enrollment year. Twenty-four (28.5%) *Early Head Start* families received health education services last program year. **Some Early Head Start families are not accessing preventive care for their young children in accordance with the recommended schedule.**

Chronic Conditions

Fifteen *Head Start* enrollees (6.8%) and 7 *Early Head Start* enrollees (8.3%) received medical treatment for a chronic condition during the last program year, many fewer than reported last year (32 HS & 18 EHS). The chronic condition for which the greatest share of Head Start enrollees (46.7% HS & 100% EHS) received medical treatment was **asthma**. The NYS Department of Health assigned Cortland County a ranking of 2nd out of 4 for its outcomes with respect to asthma hospitalizations for young children (16.8 per 10,000 discharges). **Although hospitalization and treatment figures do not directly compare, asthma appears to be a problem experienced in higher concentrations among children involved in Head Start compared with their peers in the general population.**

An additional 33 percent of *Head Start* children treated for a chronic condition were treated for **vision problems** and 20 percent for **hearing** problems. **Hearing** and **vision** problems also affected 1 *Early Head Start* child each.

Neither the NYS Department of Health nor the NYS Education Department report on any childhood vision or hearing indicators to draw a comparison between the vision health of children in Head Start and that of children in the general population. There is a comparable national figure, although it is drawn from a study which collected its data in 2004. A report prepared for the National Commission on Vision and Health cites another study showing that, “Over 29% of preschool children from families with lower incomes in Head Start programs had one or more vision disorders including: amblyopia, 6%; strabismus, 4%; significant refractive error, 21%, and reduced visual acuity, 10%.” **Vision appears to be compromised for a considerable concentration of children participating in Head Start programs.** The report, entitled Building a Comprehensive Child Vision Care System goes on to discuss studies that have shown the effects of poor vision on a child’s ability to learn, one of which suggests that “visual factors are better predictors of academic success than race or socioeconomic status.” The report encourages early detection and treatment of pre-school children to prevent visual impairments that lead to poor academic outcomes and high remediation costs.

Dental

At the end of the enrollment year, 197 (89.1%) of *Head Start* enrollees had continuous accessible dental care provided by a dentist. One hundred seventeen children (52.9%) in the *Head Start* program had completed a professional dental examination since the last PIR filing. Of these, 37 were diagnosed as needing treatment and 27 received it. In the *Early Head Start* program, only 42 children (50%) had a dental home yet 69 children (82.1%) had received age-appropriate preventive dental services. None of the 6 pregnant women in the program had received a dental exam during the program year. As noted in the county profile section of this assessment, Cortland County has a much lower ratio of dentists to the general population than the average for Upstate New York and all of New York. In addition, the Family Health Network of Central New York is a designated Dental Health Professional Shortage Area. In the general population, smaller percentages of adults have had a dental visit in the prior year than peers in Upstate and all of New York. **All of these facts, coupled with dental service figures for HS/EHS families, suggest that access to dental health services is very limited for both the general population and lower income residents of the county. Perhaps this is the reason that 47 percent of *Head Start* children did not complete a dental exam despite many more having access to a practitioner, and that 73 percent of those needing treatment did not actually receive it. Because access to dental providers is low, especially for the youngest children, many Early Head Start children receive their professional dental screening from their primary care physicians.**

Head Start Families: Nutrition

According to the program's PIR report for the 2014 – 2015 school year, no children in the *Head Start* or *Early Head Start* program were diagnosed with a nutrition-related chronic condition. The *Head Start* program tracks Body Mass Index for enrolled children and reports that a healthy majority (63.3%) falls in the healthy weight range according to the measures used by the CDC. More than 18 percent of children in the program are overweight and an additional 13.6 percent are obese. In the *CAPCO Head Start* program, the rate of overweight and obesity is *lower* by nearly five percentage points than the rate in a sample of county elementary school students. The obesity rate among children in *Head Start* is lower than the rate in the elementary school sample, and lower than the rate among children aged 2 – 4 participating in the WIC program. **Therefore, children in Head Start exhibit healthier weights than their peers in the general population and in other programs serving low-income children.**

Head Start Families: Social Services

Thirty-one children in the *Head Start* program were the subject of three or more consultations between the program staff and the mental health (MH) professional (up from 25 last year.) The Mental Health professional spends an average of 142 hours per month on-site. Of these 31 children, 17 were the subject of three or more consultations between the parents or guardians and the MH professional, compared with 8 the prior year. Two children in the *Early Head Start* program were the subject of three or more consultations between the program staff and the MH professional. None were the subject of three or more such consultations with parents.

The most commonly used family services throughout the *Head Start* program was child abuse and neglect services, used by 206 families (93.2%). Throughout the *Early Head Start* program, parenting education was the most commonly used service, accessed by 52 families (61.9%). The next most commonly used services among *Head Start* families were housing assistance and emergency / crisis intervention, with 36 and 35 *Head Start* families, respectively, using them. In the *Early Head Start* program, the next most commonly used services were health education and child abuse and neglect services, with 24 and 21 families, respectively, using them. Several *Head Start* families accessed mental health services (27) and parenting education (27) as well. Several *Early Head Start* parents (13) accessed child support assistance.

During the program year, seven *Head Start* enrollees (3.2%) experienced foster care and 4 *Early Head Start* enrollees (4.8%) experienced foster care. Cortland County has rates that are considerably higher than the statewide average on two key measures of family well-being: rate of children involved in indicated reports of abuse and the rate of recurrence of indicated reports of abuse. On a positive note, the number of Cortland County children admitted to foster care and currently receiving foster care has begun declining since 2010. **If the services used by families involved with Head Start are a valid indication, then these families experience the same distress that has manifested itself in the family outcomes of the general population of the county.**

Head Start Families: Transportation

The *Head Start* program provided transportation to 34 of the 221 children served throughout the program year.

Head Start Families: Substance Abuse

None of 206 families involved with the *Head Start* program received substance abuse prevention or treatment services during the 2014-2015 program year, nor did any of the 76 families involved with *Early Head Start*. Cortland County has a higher rate of both alcohol-related motor vehicle deaths and binge drinking than the state and has been assigned the 3rd (second lowest) ranking by the NYS Department of Health on this indicator. Drug-related hospitalizations are beginning to decline, while drug-related crime seems to have spiked in recent years.

The rate of smoking among parents involved with Head Start is not known, but smoking among adults throughout the county is higher than the state rate.

Head Start Families: Housing / Homelessness

According to 2014-2015 PIR data, five families (six children, 2.7%) enrolled in *Head Start* experienced homelessness during the enrollment year and all five acquired housing during the program year. Two children were eligible for the program based on a homeless status. In the *Early Head Start* program, one family experienced homelessness then acquired housing during the program year, and no children were admitted to the program based on homelessness status. **A slightly higher percentage of Head Start children experience homelessness (2.7%) compared with their peers in public schools (1.2%)** *Note: Head Start reports homelessness experienced at any point during the year, while schools report homelessness at a single point in time (BEDS Day).*

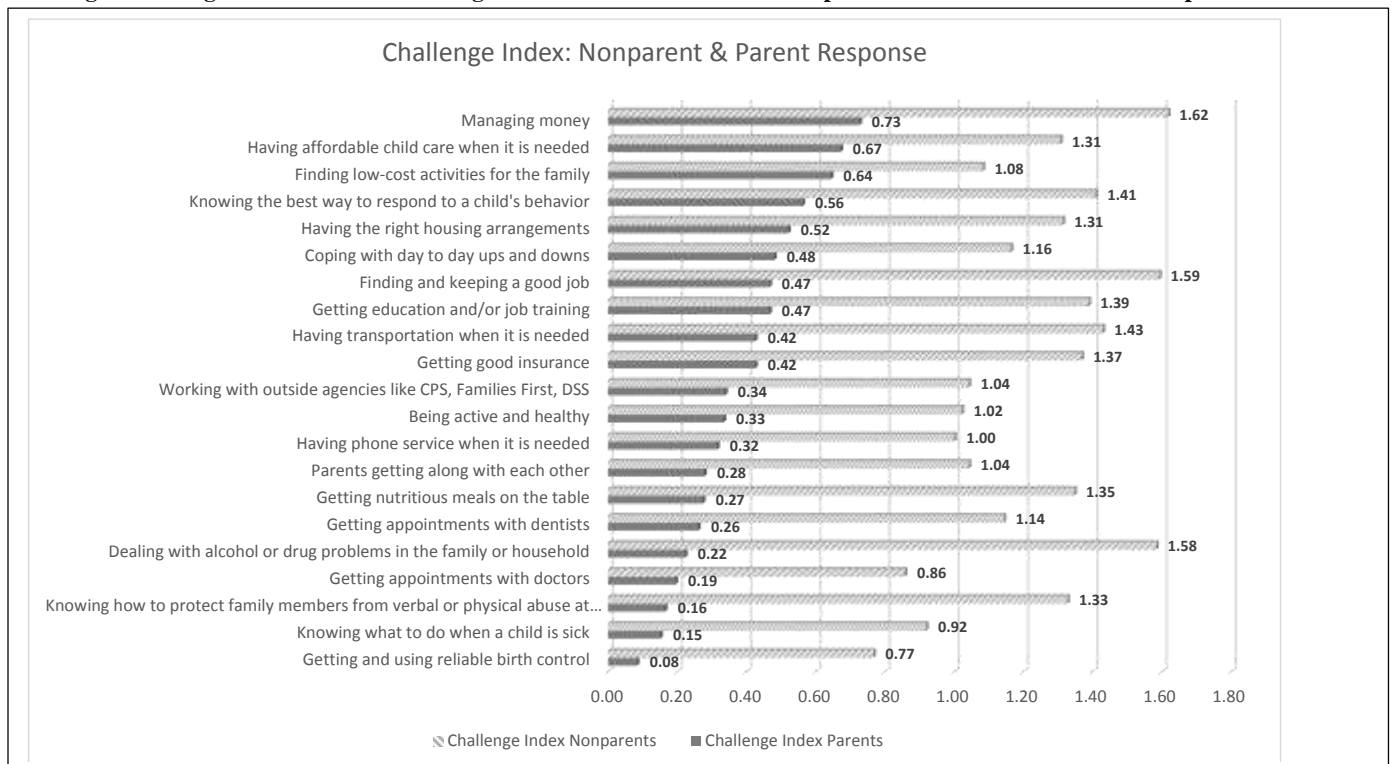
Needs of Head Start Children and Families as Observed by Non-parent Stakeholders

Staff and other non-parent stakeholders from the CAPCO *Head Start* programs were asked to answer the same questions as *Head Start* and *Early Head Start* parents concerning the needs and challenges facing parents of young children. Responses received from these stakeholders are summarized in the Tables that follow. Forty-nine of 154 survey recipients responded, for a response rate of 31.8 percent. Generally speaking, the non-parent respondents perceived the challenges as affecting families far more intensely than did families themselves. Eighteen of the 21 factors received a rating of one or higher among non-parent respondents, meaning staff viewed these factors as being “manageable” to “major” challenges for parents of young children. Conversely, the parents from the *Head Start* programs rated **nothing** higher than a one, meaning they view these factors as “not a challenge” to just approaching a “manageable challenge.” Perhaps most telling is that the parent stakeholders’ highest rated challenge (managing money, 0.73) received a lower index score than the non-parent stakeholders’ lowest rated challenge (getting and using reliable birth control, 0.77.) *The chart in Figure 17 highlights the contrasting perceptions between families and staff about challenges facing parents of young children.*

Question 1: Challenges Facing Parents of Young Children

Survey takers rated the degree to which each factor was a challenge for parents of young children. Weighted average was used to calculate the overall degree of challenge perceived by respondents. In this calculation, no value was assigned to, “not a challenge,” “a manageable challenge” was worth one, and “a major challenge” had a value of two. Therefore, the weighted average scale ranges from zero to two. The results for both parents and staff appear in Figure 17.

Figure 18: Degree Of Perceived Challenge For Selected Life Factors: Non-parent and Parent Stakeholder Responses



Question 2: Conditions Impacting Families the Most

Both staff and parents most frequently selected “Behavioral Issues” as a condition impacting families the most. They also had in common the following conditions ranked in the top five as impacting families the most: Overweight / Obesity, ADD, and Asthma / Breathing

NON-PARENTS	
Condition	Frequency
Behavioral Issues	45
Dental hygiene or health	24
Overweight / Obesity	24
ADD	19
Asthma / Breathing	17
Language problems	14
Autism	9
Allergies	9
Sensitivities to certain smells, tastes, sights and sounds	4
Hearing / Vision problems	2

Table 6: Conditions Perceived To Be Impacting Families The Most: Nonparent Stakeholder Responses

Question 3: Problems Facing Families of Young Children and Proposed Solutions

Non-parent respondents had the opportunity to respond to an open-ended prompt requesting their opinion on three big problems facing families of young children, and what would help. These open-ended responses were coded. The greatest frequency of responses (19) cited health-related problems ranging from, “health issues,” to “dental hygiene and health,” to, “asthma and breathing,” and “childhood obesity.” Another 17 responses cited problems relating to parenting or child behavior, using phrases like “behavioral problems,” “learning how to be a good, effective parent if you don’t feel your skills are sufficient,” and, “parenting skills.” The next most frequently cited problems related to jobs, income and expenses (13 mentions). Representative comments included, “fair wages for all,” “steady employment,” “having money for food,” and “poverty.” Transportation and problems associated with substance abuse each came up in a handful of responses as well. When it comes to solutions, 21 responses suggest providing families with education while 20 responses suggest providing better access to services that would help with specific problems, either by expanding existing services or adding new services. Another popular solution involved policy changes or improved opportunities (16 mentions). Examples of improved opportunity or policy changes included, “entice and keep manufacturing companies,” “raise income guidelines for SNAP,” and “Landlords need to be held accountable for taking care of their properties. Local government needs have concerns for more than college student housing, grants and money needs to be allotted for low income families too.”

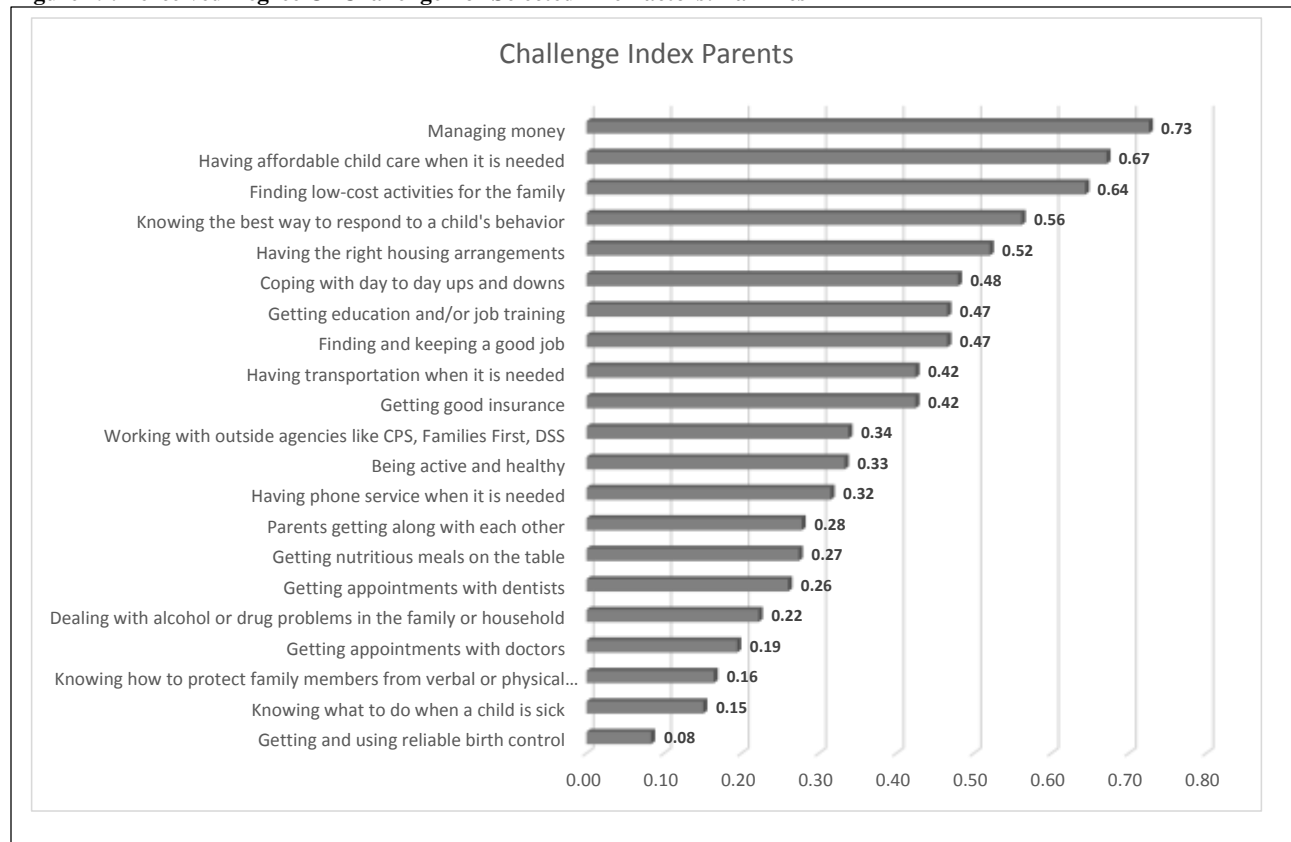
Self-described Needs of Head Start Children and Families

A survey of Head Start eligible families was conducted for the purpose of gathering data for the Community Assessment. A total of 74 out of 248 Head Start and Early Head Start enrolled families responded to the survey, for a response rate of 29.8 percent. A summary of the descriptive survey data follows:

Question 1:

Survey takers rated the degree to which each factor was a challenge for parents of young children. Weighted average was used to calculate the overall degree (on a scale of zero to two) of challenge perceived by respondents. The results appear in Figure 18. It is notable that every factor averaged a rating of one or below, meaning parents view it as “not a challenge” to approaching a “manageable challenge.” In other words, to the extent that *Head Start* parents even perceive these factors as challenges, they view them as largely manageable. Meanwhile, staff rated these challenges as more intense, in the range of manageable-to-major (See Figure 17, previous section). This difference may reflect a sense of resourcefulness and confidence on the part of parents that it is within their power to address these challenges. It may also reflect a divergent sense of normalcy between the parent and staff groups with respect to addressing these factors regularly. There was some similarity between the perceptions of the two groups in that both rated, “*Managing money*,” as the most challenging life factor and both included in the top five most challenging factors, “*Knowing the best way to respond to a child’s behavior*.”

Figure 19: Perceived Degree Of Challenge For Selected Life Factors: Families



Respondents were asked to select three childhood conditions impacting families the most. Table 7 summarizes the frequency of their selections. Both staff and parents most frequently selected “Behavioral Issues” as a condition impacting families the most. They also had in common the following conditions ranked in the top five as impacting families the most: Asthma / Breathing and Overweight / Obesity

PARENTS	
Condition	Frequency
Behavioral Issues	47
Asthma / Breathing	24
Overweight / Obesity	22
ADD	20
Language problems	19
Allergies	17
Dental hygiene or health	16
Autism	8
Hearing / Vision problems	6
Sensitivities to certain smells, tastes, sights and sounds	5

Table 7: Conditions Perceived To Be Impacting Families The Most: Parent Stakeholder Responses

Question 3: Problems Facing Families of Young Children and Proposed Solutions

Parent survey-takers had the opportunity to respond to an open-ended prompt requesting their opinion on three big problems facing families of young children, and what would help. These open-ended responses were coded. The most frequently cited *problem* was resource scarcity (21 mentions) using terms like, “No food,” “Managing money,” “Heating bills,” “Finances,” and “Choosing between food and bills.” The topic of health came up as a *problem* in 17 comments that covered topics including dental health, respiratory health, nutritional health and healthcare access. The next most often stated *problem* was behavior with 15 mentions, usually stated simply as “behavioral issues,” or, “discipline.” Family functioning and substance use each were cited 8 times as problems. With respect to family functioning, representative comments most often pointed to issues associated with split families.

When it comes to *solutions*, most responses (33) call for education or information such as, “Offer classes to teach how to budget,” “Ways to manage co-parenting effectively,” “Offer handouts from local training schools/colleges and how to apply for funding,” “Lists of apartments and homes to rent.” Access to community services was another popular solution offered in 22 responses. Suggestions included, “Free or low cost child care for students,” “Food Stamps,” “Counseling,” and “Possibly more CAPCO initiatives for free dental check-ups and cleanings (or another agency).” Policy change or generally improved opportunities / external conditions were also popular solutions (19 mentions). Proposed solutions included, “Better paying jobs,” “Lower rent,” “Things should be cheaper,” “Increase minimum wage,” and “Would have daycare provided by jobs.”

Summary of Observed and Perceived Needs

In this assessment, a number of conditions emerge as needs in both the general population and among families involved with Head Start based on data. If these conditions were also perceived as needs either by Head Start families or by community stakeholders, the condition is highlighted in this section to reflect its status as both a perceived and an observed need. The following table presents the conditions that emerged as both observed needs and perceived needs.

Table 8: Summary of Observed & Perceived Needs

HEALTH				
Condition / Outcome Area	Observed in General Population	Observed in Head Start Population	Perceived Need Among CAPCO Head Start Participants	Perceived Need Among Non-parent CAPCO stakeholders
Educational Attainment	<ul style="list-style-type: none"> Rate of bachelor's or higher (22.7% Cortland, 33.7% NYS) Long list of grade levels with lower % of students proficient on state tests 	<ul style="list-style-type: none"> Rate of bachelor's or higher much lower than County (9.6 HS, 22.7 Cortland) 	<i>Education cited as a solution to problems noted on open ended survey questions, but this was not exclusive to formal education or higher levels of educational attainment</i>	<i>Education cited as a solution to problems noted on open ended survey questions, but this was not exclusive to formal education or higher levels of educational attainment</i>
Early Childhood Care & Education	<ul style="list-style-type: none"> Regulated care capacity not sufficient to meet demand 	<ul style="list-style-type: none"> Head Start received child care subsidy for 6 children 	<ul style="list-style-type: none"> "Having affordable child care when needed" rated 2rd in intensity of challenge among 21 life factors 	<i>Did not emerge as a perceived need.</i>

HEALTH				
Condition / Outcome Area	Observed in General Population	Observed in Head Start Population	Perceived Need Among CAPCO Head Start Participants	Perceived Need Among Non-parent CAPCO stakeholders
Lung Health	<ul style="list-style-type: none"> Cortland rates of child pneumonia hosp. much higher than region and state. 4th ranking group. More than 21 percent of adults smoke, compared with 15.9 percent in NYS Leading causes of premature death include cancer, heart disease, chronic lower respiratory disease 	<ul style="list-style-type: none"> Asthma is the condition for which the greatest share of HS & EHS children was treated 	<ul style="list-style-type: none"> Asthma/Breathing ranked 2nd for conditions affecting families the most Respiratory health cited on open-ended survey questions as a big problem facing families 	<ul style="list-style-type: none"> Asthma/Breathing ranked 5th for conditions affecting families the most Respiratory health cited on open-ended survey questions as a big problem facing families
Dental Health	<ul style="list-style-type: none"> Cortland County has 28.6 dentists/100,000 residents compared with 60.2 / 100,000 in Upstate NY Rate of Cortland residents over age 18 with a recent annual dental visit 10 points lower than state rate 	<ul style="list-style-type: none"> 47% of HS enrollees w/o professional dental exam 73 % of those needing treatment didn't receive it 50% of EHS enrollees have a dental home 	<ul style="list-style-type: none"> Dental Hygiene / health came close to ranking in top 5 conditions affecting families the most Dental health cited on open-ended questions as a big problem families 	<ul style="list-style-type: none"> Dental Hygiene / health ranked 2nd among conditions affecting families the most Dental health cited on open-ended questions as a big problem
Substance Abuse	<ul style="list-style-type: none"> Alcohol-related motor vehicle deaths (61.6/100,000) higher than region & state (44.3 & 33.3/100,000) % of adults who binge drink (19%) higher than state rate (17.7%). 3rd ranking group Drug-related crime up 	<i>Not observed as a concerning condition among Head Start enrollees</i>	<ul style="list-style-type: none"> Substance abuse mentioned 8 times as a big problem in response to open-ended survey question 	<ul style="list-style-type: none"> "Dealing with alcohol or drug problems in the family" rated as the 3rd most challenging life factor for families with young children
Healthcare Access	<ul style="list-style-type: none"> Fewer primary care physicians in Cortland (80 / 100,000) than in Upstate NY (136.2 / 100,000) 10% of residents age 18-64 uninsured; 5.1% of children are uninsured 	<ul style="list-style-type: none"> 30% of EHS children not up to date on preventive health care 	<ul style="list-style-type: none"> For dental health in particular, access was cited in open-ended survey responses as a big problem 	<ul style="list-style-type: none"> For dental health in particular, access was cited in open-ended survey responses as a big problem
Disabilities	<ul style="list-style-type: none"> 2.8% of Cortland Children under age 3 served by Early Intervention 4.7% of residents under age 18 have a disability 	<ul style="list-style-type: none"> 27.1% of Head Start children have an IEP (53.3% of these speech; 35% multiple disabilities) 12 more children with IEP this year 	<ul style="list-style-type: none"> Parents ranked "language problems" as 5th among 10 conditions impacting families the most 	<i>Did not emerge as a perceived need</i>

NUTRITION				
Condition / Outcome Area	Observed in General Population	Observed in Head Start Population	Perceived Need Among CAPCO Head Start Participants	Perceived Need Among Non-parent CAPCO stakeholders
Overweight & Obesity	<ul style="list-style-type: none"> County placed in the 4th ranking group for the rate of overweight or obese among elementary students and in the 3rd ranking group for the rate among adults 	<i>Not observed as a concerning condition among Head Start enrollees</i>	<ul style="list-style-type: none"> Overweight/Obesity rated 3rd of 10 conditions impacting families Nutritional health and affording health food cited as big problems in responses to on open-ended survey questions 	<ul style="list-style-type: none"> Overweight/Obesity rated 3rd of 10 conditions impacting families Nutritional health cited as a problem in open-ended questions
Food Security	<ul style="list-style-type: none"> 22.6% Cortland children food insecure; 81% in HH with incomes below 185% FPL Use of SNAP in the county has increased 10.8% in the last 3years 	<ul style="list-style-type: none"> About 63.1% of HS households and 71.1% of EHS receive SNAP About 56.8% of HS households & 82.9% of EHS households use WIC 	<ul style="list-style-type: none"> Parents cited resource scarcity to meet basic needs as a problem on open-ended questions in a survey, and specifically cited not being able to afford enough food and healthy food 	<ul style="list-style-type: none"> "Getting nutritious meals on the table" ranked as 8th most challenging life factor Stakeholders cited expenses as a problem on open-ended questions and specifically cited having money for food

SOCIAL SERVICES				
Condition / Outcome Area	Observed in General Population	Observed in Head Start Population	Perceived Need Among CAPCO Head Start Participants	Perceived Need Among Non-parent CAPCO stakeholders
Income / Poverty	<ul style="list-style-type: none"> Greater than state & U.S. poverty rate for families with children under age 5 (24% Cortland; 17.1% NYS; 18.6% U.S.) Single mother families with children under age 5 especially high poverty rates (69.1%) compared with NYS (40.7%) and U.S. (47%) Cortland TANF cases up 17.4% in past 3 years 	<ul style="list-style-type: none"> 52% HS and 65% EHS eligible at 100% FPL 42.9% are one-parent families Large majority HS/EHS children insured through Medicaid Only 13.5 % receiving TANF despite probable eligibility among many more families 	<ul style="list-style-type: none"> "Managing money," rates as the greatest challenge from among 21 life factors Resource scarcity cited as big problems in open-ended survey question 	<ul style="list-style-type: none"> "Managing money," rates as the greatest challenge from among 21 life factors Resource scarcity cited as a problem in open-ended survey questions
Employment	<i>Not observed as a concerning condition among general population in Cortland County</i>	<ul style="list-style-type: none"> 81.2% of HS families have the only or at least one parent working Nearly 53% have the only or both parents working 	<ul style="list-style-type: none"> "Finding & keeping a good job," ranked as the 8th most challenging life factor by HS parents Better jobs, wages and benefits cited as solutions to resource scarcity problem on open-ended survey questions 	<ul style="list-style-type: none"> "Finding and keeping a good job," rated as the 2nd most challenging life factor for families Jobs, income & expenses cited as a big problem on open-ended survey questions
Housing / Homelessness	<ul style="list-style-type: none"> There are 79 homeless school children in the CAPCO Head Start service area, or 1.2% of students in the 5 districts Rent unaffordable for 44.6 % of renters Higher than NYS & U.S. % of mobile homes, homes built before 1939 & homes without phone service 	<ul style="list-style-type: none"> HS children experience homelessness @ higher rates (2.7%) than school students (1.2%) in the county 	<ul style="list-style-type: none"> "Having the right housing arrangements" ranked 5th most challenging among 21 life factors 	<i>Did not emerge as a perceived need</i>

FAMILY/EMOTIONAL WELL-BEING				
Condition / Outcome Area	Observed in General Population	Observed in Head Start Population	Perceived Need Among CAPCO Head Start Participants	Perceived Need Among Non-parent CAPCO stakeholders
Family / emotional well-being / parenting	<ul style="list-style-type: none"> Cortland rates for recurrence of child maltreatment (21.9%) are much higher than recommended standard (5.4%) and higher than state rate (11.7%). Cortland's is 5th highest rate in state. Cortland has a much higher rate of children in indicated reports of abuse or maltreatment 39.8 per 1,000) than the state (16.5 per 1,000) More Cortland children in foster care than in the state but numbers going down 	<ul style="list-style-type: none"> 3.6% of HS / EHS children experience foster care 227 HS & EHS families used child abuse and neglect services 79 HS & EHS families used parenting education More children this year subject of 3 or more MH consultations 	<ul style="list-style-type: none"> Parents rated, "Knowing the best way to respond to a child's behavior," as the 4th most challenging life factor of 21 factors presented on a survey Parents rated, "Behavioral issues" as the top condition affecting families Parents cited both child behavior and family functioning as big problems in open-ended survey questions. Family function mostly related to split families Coping with day-to-day ups and downs ranked as 6th most challenging life factor 	<ul style="list-style-type: none"> Non-parent stakeholders rated, "Knowing the best way to respond to a child's behavior," as the 5th most challenging life factor of 21 factors presented on a survey HS stakeholders rated, "behavioral issues" as the top condition affecting families Non-parents cited child behavior and parenting skills as big problems in open-ended survey questions

CAPCO HEAD START & EARLY HEAD START PROGRAM
Continuation Grant for 02CH3062
EXECUTIVE SUMMARY TO CAPCO BOARD AND POLICY COUNCIL

Program Introduction:

This proposal from Cortland County Community Action Program, Inc. (CAPCO) Head Start is to continue to serve a total enrollment of 200 children in Cortland County which is centrally located in the State of New York. This proposal is requesting \$1,673,815.00 federal funds from the Office of Head Start for a 12 month grant period from June 1, 2016 through May 31, 2017. CAPCO will leverage \$418,454.00 in non-federal funds and \$22,400.00 in training and technical assistance funds totaling \$2,114,669.00.

This proposal from Cortland County Community Action Program, Inc. (CAPCO) Early Head Start is to continue to serve a total enrollment of 72; 8 infants, 40 toddlers, 24 home based, and up to 10 expectant mothers in Cortland County which is centrally located in the State of New York. In addition, the expectant mothers are counted in the home based program option in the program approach. This proposal is requesting \$972,486.00 federal funds from the Office of Head Start for a 12 month grant period from June 1, 2016 through May 31, 2017. CAPCO will leverage \$243,122.00 in non-federal funds and \$24,000.00 in training and technical assistance funds totaling \$1,239,608.00.

The major change is the newly created long range goals with objectives. The following information pertains to both Head Start and Early Head Start:

Organization's programmatic and fiscal long range goals and short term objectives to be accomplished during the five year grant period including the school readiness goals.

Goal #1: CAPCO Head Start/Early Head Start will increase the level of Family Engagement participation.

Rationale: The following issues have been identified in the recent Community Assessment (CA) and Program Planning Committee Meetings:

- Decrease in parent participation at Parent Action Groups (PAG) meetings
- Need to improve the school to home connection
- To have actively engaged families which will help children move toward school readiness

Year 2 Objectives	Year 3 Objectives	Year 4 Objectives	Year 5 Objectives
<p>Increase staff awareness and knowledge of PFCE framework.</p> <p>-Training agendas and staff surveys</p>	<p>All staff will utilize the program wide database to document all contact with families, including, but not limited to child/family goals, referrals, and Family Engagement activities.</p> <p>-CAP60</p>		
<p>At least 80% of all families will participate in at least one Family Engagement activity throughout the program year.</p> <p>-PA sign-in sheets, Family Engagement monthly report</p>	<p>At least 80% of families will participate in at least two Family Engagement activities throughout the program year.</p> <p>-PAG sign-in sheets, Family Engagement monthly report</p>	<p>At least 80% of families will participate in at least three Family Engagement activities throughout the program year.</p> <p>-PAG sign-in sheets, Family Engagement monthly report</p>	<p>At least 80% of families will participate in at least three Family Engagement activities throughout the program year.</p> <p>-PAG sign-in sheets, Family Engagement monthly report</p>
<p>At least 90% of all families will participate in at least one Family Engagement home visit and complete the Family Partnership Assessment.</p> <p>-CAP60, Visit Record, Family Advocate/Home Visitor monthly reports</p>	<p>At least 80% of all families will participate in at least two Family Engagement home visits.</p> <p>-CAP60, Visit Record, Family Advocate/Home Visitor monthly reports</p>	<p>At least 80% of all families will participate in at least three Family Engagement home visits.</p> <p>-CAP60, Visit Record, Family Advocate/Home Visitor monthly reports</p>	<p>At least 80% of all families will participate in at least four Family engagement home visits.</p> <p>-CAP60, Visit Record, Family Advocate/Home Visitor monthly reports.</p>

Determine the actual number of child education goals that are set and worked on by parents in the home. -CEP goal sheets, PT conference report, family surveys.	The actual number of child education goals that are set and worked on by parents in the home will increase at least 10% from the previous year. -CEP goal sheets, PT conference report, family surveys.	The actual number of child education goals that are set and worked on by parents in the home will increase at least 10% from the previous year. -CEP goal sheets, PT conference report, family surveys.	The actual number of child education goals that are set and worked on by parents in the home will increase at least 10% from the previous year. -CEP goal sheets, PT conference report, family surveys.
	Of the number of families that set family goals, at least 70% will achieve these goals. -CAP60, Family Advocate/Home Visitor monthly reports.	Of the number of families that set family goals, at least 80% will achieve these goals. -CAP60, Family Advocate/Home Visitor monthly reports.	
Year 2 Outcomes	Year 3 Outcomes	Year 4 Outcomes	Year 5 Outcomes
Staff knowledge and implementation of PFCE Framework/activities will allow all families to become actively engaged within the program.	Families will become active participants both program wide and with the home/school connection.	Families will increase their participation both program wide and with the home/school connection.	Family participation will have increased throughout the program which will lead to increased school readiness for the children.

Goal #2: CAPCO Head Start/Early Head Start will improve targeted and intentional recruitment efforts throughout Cortland County.

Rationale: The following issues have been identified in the recent Community Assessment (CA) and Self-Assessment (SA).

- Decrease in the number of income eligible children on the waiting list. (SA)
- Decrease in the number of over income eligible children on the waiting list. (SA)
- Discrepancy in the difference of eligible children within the community versus the waiting list. (CA & SA).

Year 2 Objectives	Year 3 Objectives	Year 4 Objectives	Year 5 Objectives
<p>Program staff will attend at least 4 community events to promote outreach efforts.</p> <p>-Recruitment binder, parent communications binder</p>	<p>Program staff will attend at least 6 community events to promote outreach efforts.</p> <p>-Recruitment binder, parent communications binder</p>	<p>Program staff will attend community events every other month to promote outreach efforts.</p> <p>-Recruitment binder, parent communications binder</p>	
<p>Families will complete the intake process for at least 70% of all applications returned to the program.</p> <p>-Application tracking book, family engagement monthly reports</p>	<p>Families will complete the intake process for at least 80% of all applications returned to the program.</p> <p>-Application tracking book, family engagement monthly reports</p>	<p>Families will complete the intake process for at least 85% of all applications returned to the program.</p> <p>-Application tracking book, family engagement monthly reports.</p>	
<p>Community Agency referrals for applications will be tracked. At least 10% of total applications received for the year will be from Community Agency referrals.</p> <p>-Application tracking book, family engagement monthly reports</p>	<p>Community Agency referrals for applications will be tracked. At least 15% of total applications received for the year will be from Community Agency referrals.</p> <p>-Application tracking book, family engagement monthly reports</p>	<p>Community Agency referrals for applications will be tracked. At least 20% of total applications received for the year will be from Community Agency referrals.</p> <p>-Application tracking book, family engagement monthly reports</p>	
<p>One new collaboration will created with a local school district to determine age-eligible siblings for the program.</p>	<p>One new additional collaboration will be created with a local school district to determine age-eligible siblings for the program.</p>	<p>Written collaborations will increase to include at least 10% of the Pediatricians county wide.</p>	<p>Written collaborations will increase to include at least 25% of Pediatricians county wide.</p>

-Community partnership binder	-Community partnership binder	-Community partnership binder	-Community partnership binder
Year 2 Outcomes	Year 3 Outcomes	Year 4 Outcomes	Year 5 Outcomes
Applications will be tracked and completed leading to an increase in the program waitlist	There will be an increase in the number of apps. received through the community agencies/partners, which will increase the program waitlist	There will be an increase in the number of applications received through community agencies/partners, which will increase the program waitlist	CAPCO Head Start/Early Head Start will have an active waitlist for all age groups, prenatal to 4

Goal #3: CAPCO Head Start/Early Head Start will increase cognitive knowledge birth to 5 in the areas of Math and Science.

Rationale: Our end of the year outcomes of 4 year olds transitioning into kindergarten have consistently not met the program's goal to have 85% of children either meet or exceed our school readiness objectives listed in the cognitive domain, specifically in math and science.

Year 2 Objectives	Year 3 Objectives	Year 4 Objectives	Year 5 Objectives
60% of the children transitioning into Kindergarten will meet or exceed the areas of cognitive knowledge. -Lesson plans, TS Gold, Brigance, Teacher conferences	70% of the children transitioning into Kindergarten will meet or exceed the areas of cognitive knowledge. -Lesson plans, TS Gold, Brigance, Teacher conferences	80% of the children transitioning into Kindergarten will meet or exceed the areas of cognitive knowledge. -Lesson plans, TS Gold, Brigance, Teacher conferences	85% of the children transitioning into Kindergarten will meet or exceed the areas of cognitive knowledge. -Lesson plans, TS Gold, Brigance, Teacher conferences
The math curriculum Numbers Plus will be fully implemented in 50% of Head Start 4 year old classrooms.	The math curriculum Numbers Plus will be modified to be fully implemented in 100% of Head Start 4 year old classrooms.	The math curriculum Numbers Plus will be modified to be fully implemented in 50% of Head Start 3 year old classrooms. Curriculum will be modified to include age appropriate concepts which are taught intentionally for Early Head Start children.	The math curriculum Numbers Plus will be modified to be fully implemented in 100% of Head Start 3 year old classrooms.
The science curriculum ECHOS will be purchased	The science curriculum ECHOS will be piloted in one 3 year old and one 4 year old classroom	The science curriculum ECHOS will be implemented in 50% of Head Start classrooms	The science curriculum ECHOS will be implemented in 100% of Head Start classrooms
Year 2 Outcomes	Year 3 Outcomes	Year 4 Outcomes	Year 5 Outcomes
Through intentional teaching and implementation of a math curriculum, teachers will provide all children with concrete concepts which increase outcome expectations.	Children will become engaged in a high level of thinking and reasoning in math and science skills as demonstrated through outcomes.	Younger children will increase their participation and knowledge in math and science concepts increasing the percentage of students meeting or exceeding the expectation in the cognitive domain.	Children 0-5 will have a stronger set of math and science skills that will better prepare them to transition into kindergarten.

The highlights of the grant we are proposing are listed below in regard to each functional area:

Sub-Section B: Service Delivery

1. **Needs of Children and Families:** The CAPCO Head Start/Early Head Start Program has no significant updates or changes since last year's application.
2. **Service Area:** The CAPCO Head Start/Early Head Start Program is not proposing any changes to the service area.
3. **Justification of Proposed Funded Enrollment and Program Options:** The CAPCO Head Start/Early Head Start Program has completed the Program Schedule in the HSES system. At this time, there are no changes in regard to enrollment reduction, expansion, or conversion.
4. **Centers and Facilities:** The CAPCO Head Start/Early Head Start Program has completed the Program Schedule in the HSES system. Furthermore, we did transition our Sports Complex classroom to the new CAPCO facility where our Johnson I and Johnson II centers are now located. In addition, our program is not applicable to any centers with federal interest.
5. **Recruitment and Selection:** The outreach and recruitment process is on-going throughout the year. The goal of the recruitment process is to obtain in a number of applications during this process that is greater than the enrollment opportunities. This will allow us to select those with the greatest need for Head Start/Early Head Start services.
The Selection Committee reviews each application and determines priority based on the age of the child, selection criteria and intake date. Income eligible and categorically eligible children will be selected first. Once all of the income eligible/categorically eligible children on the waitlist have been selected, the selection committee will, then, select from the children/pregnant mothers whose income is less than 130% of the poverty guidelines. Once all 200 slots have been filled in Head Start and all 72 slots have been filled in Early Head Start, a waiting list will be compiled by the Family Engagement Assistant. The waiting list will be ranked by eligibility, age and selection criteria points. Criteria points can be found on the selection form and are completed at intake.
6. **Transportation:** At this time, there are no proposed changes to transportation for the CAPCO Head Start/Early Head Start program.
7. **Educational Services:** In program Year, 2014-2015, the Family Enrichment Network, an agency which provides integrated preschool services, ended their collaborative partnership with a local daycare facility and pulled their agency from serving children and families in Cortland County. The impact of losing this agency caused our Head Start program to be solely reliant on the only other program operating in Cortland County, Franziska Racker Center for evaluations and integrated program settings. The impact of this closure is evident in the number of children we served with Special Itinerant Teacher services on a child's IEP.
At the end of the 2014-2015 program year, we were notified the Franziska Racker Center would be closing gone integrated classroom in their program, and restructuring their program to exclude 3 hour programming, thus only providing 5 hour programming. The elimination of the classroom, and 3 hour programming spots has caused several children that have been designated for an integrated classroom to be placed on a waiting list for a program spot to open. We continue to serve these children in our program. We have worked closely with school districts and county representatives on finding a solution to the rise in children that need an integrated program. CAPCO Head Start continues to see arise in children which attend our program and receive related services. The number of children receiving special needs related services has increased by 30% related to speech and 50% increase related to special education itinerant teacher services. To promote a better understanding of children with special needs, we plan to provide

professional development on Speech and Language and Individualization and Curriculum Modification Methods.

8. **Health:** This area has been broken down into 3 categories. The following are the updates for each area under health.

Dental: The CAPCO Head Start/Early Head Start Program strives to deliver and educate the families on the importance of dental hygiene, appropriate dental services and tracks families through the initial dental process. If we don't receive the required dental information, we send out 30, 60, and 90 day reminder letters to the families. This information is tracked using the CAP60 database system to ensure follow-up is being completed, phone calls are made to families for follow-up information and to remind them to send in the correct information needed for our program. Our Health Services staff works collaboratively with the Family Services and Education staff to continue communication with the families to receive the dental information needed. We have a valuable collaboration with a local dentist, Dr. Marisa Clifford, who participates on our Health Advisory Board. She works diligently with us to get the necessary follow-up dental work the children need on a consistent basis. We are working with Seven Valleys Health Coalition and the Cortland County Health Department on a dental/health initiative for Cortland County. This initiative is working to bring fluoridated water to our county, to educate the community on overall oral health and to obtain more local dentists that accept children under the age of 3 years. Our program is also working with WIC, as well as local pediatricians, to apply fluoride varnish through the WIC Smiles Program on children ages 1 to 6 years of age. All Head Start/Early Head Start staff has been trained on the "Cavity Free Kids" curriculum and we have implemented this curriculum into our entire program. The Cavity Free Kids curriculum educates the families and the children and the importance of brushing their teeth, how cavities form, and to continuously rinse with water to assist in the prevention of cavities. Furthermore, this curriculum promotes the healthy eating of more fruits and vegetables and to limit their consumption of sweets and processed foods.

Health: Our program tracks families through the initial and continuing physical and immunization process. We track this information through the CAP60 database and make sure all children's immunizations are current/comply with all NYS requirements on the NYS Immunization Registry. If physicals or immunizations are not current, letters are sent to families, as a reminder, to turn in all necessary information as soon as possible to our program. We continue to collaborate with the Lion's Club to complete vision screenings on all Head Start/Early Head Start children. Vision referrals are made, as needed, from these screenings, information is tracked on CAP60 database and reminder letters are sent if follow-up information is not received from families. The Lion's Club donates their time as in-kind for our program. We also work with the Cortland County Health Department on committees, such as Mothers & Babies-Maternal Child Health, Chronic Illness & Diseases, the Tobacco Coalition, and numerous other health education committee/topics. We have a certified Car Seat Technician on staff who attends Parent Action Group meetings to educate families how to properly install and use their children's car seats. Lastly, through these collaborations, the diversity and quality of our Health Advisory Board has allowed us to better serve our program. Our Health Advisory Board is a success because we have the input of a local dentist, a pediatrician, as well as a health educator from the County of Cortland.

Nutrition: The CAPCO Head Start/Early Head Start Program continues to education families and serve nutrition meals/snacks to children who follow the CACFP and USDA guidelines and recommendations. We serve food to 272 children during the program year daily. Since 2013, the CAPCO Kitchen at the Cosimo's location has provided breakfast and lunch to all centers not located in the elementary school. We have an established relationship with DeWitt's Produce to provide our program with NYS locally grown produce at a reduced cost, when possible. We continue our well-built collaboration with the JM Murray Center which is a

vocational/rehabilitation center for mentally and physically challenged clients. These volunteers shop, pack, and deliver necessary supplies to all centers. These services are donated as in-kind for our program. To help reduce childhood obesity, our program has eliminated fruit juices from all meals/snacks served, has helped educate families on the importance of increased water intake and decreased added sugar consumption. Along with these changes, we have implemented naturally infused water (infused with fresh fruits, vegetables, herbs and spices) daily to all centers. This infused water is available to children at all times during the day. Through yearly family surveys, we have noted an increase in the variety of fruits/vegetables eaten, water intake, and a decrease in juice consumption by family members and children. Head Start/Early Head Start family style meals have encouraged families to practice this in the home which, in return, has helped increase family communication at meal times. Therefore, families have “unplugged” from electronics while eating meals.

9. **Family Services and Social Services:** The CAPCO Head Start/Early Head Start is deeply committed to providing the highest quality services to families to helping families of all backgrounds achieve positive outcomes. At the core of this commitment is an integrated, carefully designed approach to family partnership agreements, based on the following:
 - Strong relationships, mutual trust and positive rapport with families, including interactions that respect the diversity of families’ culture and ethnic backgrounds.
 - Collaboration between staff and family to identify family strengths and needs; develop goals which reflect these; and access services and resources which will help families achieve their goals.
 - Standardized systems and forms to define document and track each family’s goals, related objectives and action steps, and progress in achieving them.
 - Timelines which enable this process to begin as early as possible (given the family’s readiness).
10. **Early Head Start Specific:**
 - a. Continuity of services (48 weeks per year): There are no significant changes to report.
 - b. Pregnant Women Services: There are no significant changes to report.
11. **Transition:** The CAPCO Head Start transition plans have been updated to include a 3 year old child, re-enrolling into a 4 year old classroom for the next program year. That plan reads as such: A transition event will be held in June of each year for all currently enrolled 3 year olds who will be returning the following year. This event will be planned and facilitated by the Family Engagement Specialist with the assistance of classroom teachers. This event will allow returning children and their families to visit their anticipated classroom, ask questions, and learn more about the four year old classroom routines.
12. **Coordination:** The CAPCO Head Start/Early Head Start Program has no significant changes or updates to report in regard to Coordination.

Sub-Section C: Approach to School Readiness

- 1a. **Any changes in child assessment since last year:** The CAPCO Head Start/Early Head Start Program continues to implement and assess children on the current school readiness goals. With the change in curriculum (Creative Curriculum from High Scope and corresponding assessment tool (Teach Strategies Gold), we have aligned our goals and objectives to correspond with the assessment TSG objectives.

- 1b: **Changes in curriculum:** The CAPCO Head Start/Early Head Start Program has no significant changes or updates to report.
- 1c: **Changes in staff-child interaction observation tools:** The CAPCO Head Start/Early Head Start Program has no significant changes or updates to report.
2. **Progress of children and the program towards achieving school readiness in each of the five domains:** The CAPCO Head Start/Early Head Start's program has made a successful transition from High Scope curriculum and Child Observation Report (COR) assessment to Creative Curriculum and Teaching Strategies Gold (TSG) online. The switch has allowed cohort preschool classrooms to teach the same concepts at the same time with preset lesson plans which give flexibility to teaching staff to follow children's lead, but also allows staff to share successes and suggestions in group meetings with each other. TSG was completed on paper last year, with two classrooms piloting the assessment solely online. The response from the pilot was so well received that we have eliminated the paper assessment and all classrooms are solely online. This accomplishment allows for classrooms to create reports from the inputted data which assists in creating individualized goals for children.

School Readiness Goal Reports are created three times per year for Head Start and four times a year for Early Head Start. The reports detail percentage of children within each classroom, each age group, and program wide which are meeting or exceeding the expectation of the school readiness goals in each domain area, with the outcome at the end of a program year of 90% of children meeting or exceeding goals in each domain. For the 2014-2015 program years, steady growth in all areas was documented. In regard to getting children ready for kindergarten, specific data was analyzed when looking at our 4 year old cohort.

4 year old cohort meeting or exceeding school readiness goal expectation 2014-2015 125 Children	Approaches to learning	Social Emotional	Cognitive Knowledge	Language Development	Literacy Development	Physical Development
Entrance Baseline	9%	7%	0	11%	2%	11%
Mid-Year	29%	25%	6%	37%	11%	38%
Exit Outcome	64%	66%	51%	73%	57%	85%

From this data, we recognize our expectation of 90% of children, who are ready to enter kindergarten will meet or exceed school readiness expectations is unrealistic. Impacting the inability to reach the 90% expectation could be attributed to the high percentage of preschool age children 25% (50 out of 200 children in the 2014-2015 program year) who received special education services which had the potential to impact their ability to learn. Thus, we have lowered the expectation to 85%.

3. **Describe program improvement implemented in response to the analysis of child assessment and other data.**

The education/special needs component staff and Brian, the HS/EHS Director, have looked at child assessment data (baseline, mid-year, exit reports), CLASS scores (past 4 years), Mental Health/Special Needs (4 year tracking report), TPOT (Teaching Pyramid Observation Tool), TPITOS (The Pyramid Infant Toddler Observation Scale) and classroom curriculum checklists. From assessing data and identifying trends, it is felt that professional development and program planning should be enlisted to provide staff with immediate professional development in the areas of managing challenging behaviors (PD in the Nurtured Heart Approach, the Pyramid model), teacher/child interactions and engagement, both, physically and verbally (CLASS training). In addition, we identify the need for professional development in early childhood cognition specifically identifying Math and Science so it is intentionally infused in daily lesson plans.

Math has specifically been singled out for improvement given it is an individually recognized component of The Creative Curriculum. Although Math was not previously a formal part of our programs curriculum, it was informally integrated into the day's events. With the creation of our 5 year goals, it now becomes a separate domain within our school readiness goals. Data is currently being tracked in this domain and will be added to our school readiness goal report going forward. With this goal, it is our intent to deliver to each four year old classroom the Numbers Plus Preschool Curriculum. The Numbers Plus Preschool Mathematics Curriculum is a comprehensive set of detailed plans for small and large group early childhood mathematics activities, with ideas for extending learning throughout the program day. What is special about Numbers Plus is that children's mathematical learning is sequenced within activities-each activity has a built-in progression so children of different developmental and ability levels can participate together and have a positive and meaningful learning experience. By actively engaging young children with materials and ideas, Numbers Plus builds on the latest knowledge from research and practice about early mathematics learning. Along with this curriculum, we will provide each four year old classroom with the materials and supplies needed to successfully implement the curriculum. We will also provide pre-service and ongoing professional development and monitoring so staff has the knowledge in the different mathematical components of the curriculum and confidence in implementing concepts on a regular basis. Educational staff will be given professional development in how to assess children's progress through formal assessment and observation, an understanding of data analysis and tips to share with families throughout the year. We believe through intentional teaching and implementation of a math curriculum, teachers will provide all children with concrete concepts which will increase outcome expectations.

Sub-Section D: Parent, Family, and Community Engagement

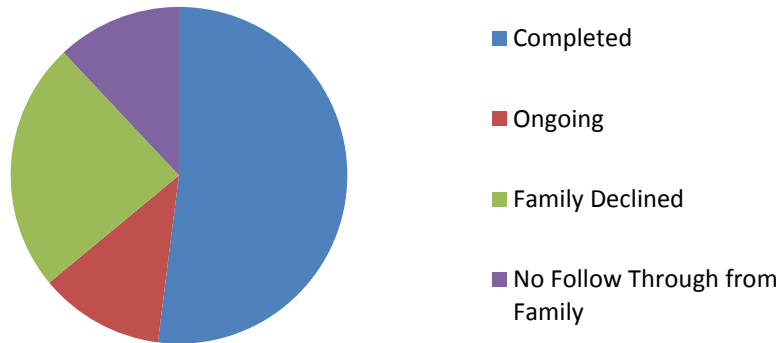
1. In regard to whether any changes involve program goals/ and/or objectives related to family outcomes, the CAPCO Head Start/Early Head Start Program is continuously working on enhancing the parent, family, and community engagement goals. This is the foundation for our long range Goal #1 with objectives for the 5 year plan.
2. The new data sources used since last year's application to support the implementation and evaluation of PFCE goals and/or objectives is as follows: In program year 2014-2015, there were 282 families served and 168 of those families completed 2 rounds of a family's strength assessment. Out of the 168 families completing the family's strength assessment, 105 of these families' increases in their overall score. 47 actually decreased in their numbers and 16 remained the same. As of December 31, 2015, in this current program year (2015-2016), 215 families have had home visits. This does not include the initial home visit with the teaching staff. Of those, 201 families have completed a family strength assessment. This will be reviewed at the end of the program year to determine increases and decreases in the progress achieved by the families.

3. The program data related to family progress which also supports children's school readiness has changed some from last program year. The addition of a Family Engagement Specialist position has allowed us to focus on family engagement and be more purposeful in all aspects regarding families and the services we offer to them. As of December 31, 2015, 247 families have participated in classroom activities and meetings designed to promote their role in the life of their child(ren) and allow them to become active community members. These 247 families have been involved in a total of 867 activities so far this program year.

The data on the family progress which supports individual children's school readiness: According to the OHS PFCE framework, families which are successful and make achievements in the family outcomes area will have children who are healthier and ready for school. The family outcomes support promising child outcomes such as enhanced school readiness skills, sustained learning and development gains. Please see the table below which demonstrates family goals set and the number which were achieved for program year 2014-2015, as well as the referrals graph which correlates with the goals set.



14-15 Family Referrals



These referrals and achieved goals means a healthier, more engaged family dynamic allowing the family to better support the children towards their school readiness goals

- 4. Describe how program progress toward PFCE goals and/or objectives is communicated to families. Provide specific examples as appropriate.** Program progress is communicated to families through Policy Council and Parent Action Group meetings.

Check one:

Work Plan

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Plan Amendment

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PPR #1

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PPR #2

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PPR #3

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PPR #4

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ATTACHMENT C

COMMUNITY SERVICES BLOCK GRANT

C-2a 2016 Work Plan and Program Progress Report (PPR)

FFY

2016

Budget Period

10/1/15-9/30/16

Contract #

C1000292

ContractorCortland County Community Action Program, Inc.

Agency needs identified in the needs assessment or strategic plan as summarized on C1b and C1c will form the basis for capacity building activities.

AGENCY CAPACITY BUILDING

Interventions Briefly describe the activities that will address the agency need or strategic plan objective:	Benchmarks List the expected outcome of the capacity building activity	NPI(s)	Method(s) of Measurement/Verification Briefly describe the tool or process to be used to verify progress on the outcome	Annual Projected	ACTUAL PROGRAM PROGRESS					
					PPR #1 Achieved	PPR #2 Achieved	PPR #3 Achieved	PPR #4 Achieved	YTD Total	YTD %
The agency will provide Poverty Simulations and invite policy makers, partner agencies, and educational institutions to learn about the day to day realities of life with a shortage of money and an abundance of stress. (Strategic Plan Goal 1(C))	225 community members will participate in 3 poverty simulations that will bring awareness about the barriers facing the low-income community.	2.3.A	sign in sheets	225	155				155	69%
The agency will apply for foundation grants and seek donations to support the agency's Family Development Component. (Strategic Plan Goal 1 (a) and 1 (b))	\$35,000 in new funding will be received to increase services provided through the agency's Family Development Component.		Grants approved by the Board of Directors/Foundation funding	\$35,000	4,237.38				4237.38	12%
	\$230,000 in in-kind goods will be received to increase services provided to support the agency's Family Development Component		Financial Software	\$230,000	63,959				63959	28%
Volunteer placement opportunities will be made available to improve condition in the community, community revitalization, and anti-poverty initiatives. (Strategic Plan Goal 1 C))	15 volunteers will donate 1,000 hours preparing taxes for the VITA Program	2.3.A								
	25 volunteers will donate 1,000 2000 hours to Family Development initiatives	2.3.A 2.3.B	VITA Report	1,000	0				0	0%
	100 volunteers will donate 5000 hrs. to Head Start/Early Head Start initiatives	2.3.A 2.3.B 3.1A	Volunteer Timesheets/In-kind Report	4000 2000	750				750	#VALUE!
			In-Kind Reports	5000	1737				1737	35%

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Check one:

Work Plan

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Plan Amendment

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PPR #1

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PPR #2

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PPR #3

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PPR #4

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ATTACHMENT C

COMMUNITY SERVICES BLOCK GRANT

C-2a 2016 Work Plan and Program Progress Report (PPR)

FFY2016

Budget Period10/1/15-9/30/16

Contract #C1000292

ContractorCortland County Community Action Program, Inc.

Agency needs identified in the needs assessment or strategic plan as summarized on C1b and C1c will form the basis for capacity building activities.

AGENCY CAPACITY BUILDING

Interventions Briefly describe the activities that will address the agency need or strategic plan objective:	Benchmarks List the expected outcome of the capacity building activity	NPI(s)	Method(s) of Measurement/Verification Briefly describe the tool or process to be used to verify progress on the outcome	Annual Projected	ACTUAL PROGRAM PROGRESS					
					PPR #1 Achieved	PPR #2 Achieved	PPR #3 Achieved	PPR #4 Achieved	YTD Total	YTD %
Provide professional development opportunities and skills training for agency staff to include, but not limited to: Staff training days, professional development conferences, workshops, etc. (Strategic Plan Goal 2 (a, c & d)	Staff members will participate in 1500 hours of anti-poverty related skills training in order to improve work performance.	5.1.G	Training logs	1500	750				750	50%
	10 Family Development TEPE certified trainers will be maintained to help strengthen, support, and educate parents.	5.1.C	Personnel Files	10	10				10	100%
	1 CCAP will be maintained and supported.	5.1.A	Personnel Files	1	1				1	100%
	1 ROMA Trainer will be maintained and supported for the provision of ROMA training to staff, board and outside organizations.	5.1.B	Personnel Files	1	1				1	100%
Staff will serve on committees and consortiums, various advisory boards, and be members of local business development consortiums in order to facilitate new program initiatives and provide linkages with the business community. (Strategic Plan Goal 2 (b))	The agency will have representation on 20 boards, committees, etc.		Meeting Minutes/Agendas	20	20				20	100%
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Check one:

Work Plan

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Plan Amendment

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PPR #1

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PPR #2

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PPR #3

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PPR #4

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ATTACHMENT C

COMMUNITY SERVICES BLOCK GRANT

C-2a 2016 Work Plan and Program Progress Report (PPR)

FFY

2016

Budget Period

10/1/15-9/30/16

Contract #

C1000292

ContractorCortland County Community Action Program, Inc.

Agency needs identified in the needs assessment or strategic plan as summarized on C1b and C1c will form the basis for capacity building activities.

AGENCY CAPACITY BUILDING

Interventions Briefly describe the activities that will address the agency need or strategic plan objective:	Benchmarks List the expected outcome of the capacity building activity	NPI(s)	Method(s) of Measurement/Verification Briefly describe the tool or process to be used to verify progress on the outcome	Annual Projected	ACTUAL PROGRAM PROGRESS					
					PPR #1 Achieved	PPR #2 Achieved	PPR #3 Achieved	PPR #4 Achieved	YTD Total	YTD %
Board training will be provided to ensure members of the Board are knowledgeable on issues including, but not limited to: Roles and Responsibilities, NFPCL, Fiduciary Responsibility, ROMA, etc. (Strategic Plan Goal 3 (a & b))	15 Board Members will improve skills and knowledge in governance to effectively carry out the mission of the agency.	5.1.F	Board Self-Assessment	15	0				0	0%
	15 board members will participate in 10 - 15 minute training events at board meetings in the coming year for a total of 30 hours.	5.1.H	Meeting Agenda	30	9				9	30%
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Work Plan

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Plan Amendment

PPR #1

PPR #3

PPR #2

PPR #4

ATTACHMENT C

COMMUNITY SERVICES BLOCK GRANT

C-2c 2016 Work Plan and Program Progress Report (PPR)

FFY

2016

Budget Period

10/1/15-9/30/16

Contract #

C1000292

Contractor

Cortland County Community Action Program, Inc.

Description of Need (Customer, Community, Agency) Briefly identify the need that documents the reason for the programs/ services/milestones and outcomes listed below (Corresponds to the needs/strategic objectives identified in C1b or C1c):	Families with low incomes are found to be at nutritional and health risk (F)
	Women, Infants and Children (WIC) (1 of 4)

Interventions Briefly describe the services, activities, and advocacy that will address the need and achieve the outcome:	Benchmarks or Milestones and Outcomes List the projected baseline number of customers to be enrolled (if applicable) and the expected benchmarks or milestones and outcomes to be achieved for the service or activity (Funnel). When possible, describe the outcome using language from the NPIs:	NPI(s)	Method(s) of Measurement/Verification Identify the tool or process to be used to verify progress on the outcome or milestone:	Annual Projected	ACTUAL PROGRAM PROGRESS					
					PPR #1 Achieved	PPR #2 Achieved	PPR #3 Achieved	PPR #4 Achieved	YTD Total	YTD %
The agency's WIC Program provides supplemental foods, health care referrals, and nutrition education for low-income pregnant, breastfeeding, and non-breastfeeding postpartum women, and to infants and children up to age five who are found to be at nutritional risk.	Of 1800 individuals seeking WIC assistance:		Intake form/caseload reports	1800	1299				1299	72%
	1800 of 1800 will improve their health and physical development as a result of access to nutritional foods and nutrition education.	6.3.B	Case files, food voucher records	1800	1299				1299	72%
	1650 of 1800 will be referred to other service providers for additional assistance.	6.5.E	Referral records (2x/year)	1650	0				0	0%
	100 infants will be healthier and will increase their ability to fight early childhood infections as a result of breastfeeding.		Peer Counselor Documentation	100-150	143				143	#VALUE!
	6 partnerships will promote the program, provide space, and funding (1 State Government, 1 Local Government, 1 faith based, 1 not-for-profit, 1 consortium, 1 State association)	4.1.A-M	MOU's, meeting minutes, association membership	6	6				6	100%

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ATTACHMENT C

COMMUNITY SERVICES BLOCK GRANT

C-2c 2016 Work Plan and Program Progress Report (PPR)

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2016

Budget Period

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Contract #

C1000292

Contractor

Cortland County Community Action Program, Inc.

Description of Need (Customer, Community, Agency)
Briefly identify the need that documents the reason for the programs/ services/milestones and outcomes listed below (Corresponds to the needs/strategic objectives identified in C1b or C1c):

Low income families who are at nutritional and health risk (F)

Program that addresses the need described above:

Snack Packs for Kids (2 of 4)

Interventions Briefly describe the services, activities, and advocacy that will address the need and achieve the outcome:	Benchmarks or Milestones and Outcomes List the projected baseline number of customers to be enrolled (if applicable) and the expected benchmarks or milestones and outcomes to be achieved for the service or activity (Funnel). When possible, describe the outcome using language from the NPIs:	NPI(s)	Method(s) of Measurement/Verification Identify the tool or process to be used to verify progress on the outcome or milestone:	Annual Projected	ACTUAL PROGRAM PROGRESS					
					PPR #1 Achieved	PPR #2 Achieved	PPR #3 Achieved	PPR #4 Achieved	YTD Total	YTD %
The agency's Snack Pack for Kids program provides nutritious foods for food insecure children throughout the county in an effort to help alleviate hunger.	150 210 children will be referred to the program:		Referrals from schools documenting need	150 - 210	205				205	#VALUE!
	150 210 of 210 150 children will be enrolled in the program		Referral form	150 -210	205				205	#VALUE!
	150 210 of 150 210 children's health and physical development will be improved as a result of adequate nutrition.	6.3.B	Backpack allocations	150 - 210	205				205	#VALUE!
	Of the 150 210 children receiving backpacks, 5550 7770 backpacks will be distributed	6.5.A	Backpack allocations	5550 -7770	2555				2555	#VALUE!
	8 partnerships, will support the program by donating funds, referring eligible children, and providing space. (5 school districts, 1 higher education, 1 financial institution, 1 collaboration)	4.1.A-M	MOU's , in-kind report	8	8				8	100%

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Contract #C1000292

ContractorCortland County Community Action Program, Inc.

Description of Need (Customer, Community, Agency)
Briefly identify the need that documents the reason for the programs/ services/milestones and outcomes listed below (Corresponds to the needs/strategic objectives identified in C1b or C1c):

Low income families who are at nutritional and health risk (F)

Program that addresses the need described above:

Health and Nutrition (3a of 4)

Interventions Briefly describe the services, activities, and advocacy that will address the need and achieve the outcome:	Benchmarks or Milestones and Outcomes List the projected baseline number of customers to be enrolled (if applicable) and the expected benchmarks or milestones and outcomes to be achieved for the service or activity (Funnel). When possible, describe the outcome using language from the NPIs:	NPI(s)	Method(s) of Measurement/Verification Identify the tool or process to be used to verify progress on the outcome or milestone:	Annual Projected	ACTUAL PROGRAM PROGRESS					
					PPR #1 Achieved	PPR #2 Achieved	PPR #3 Achieved	PPR #4 Achieved	YTD Total	YTD %
The agency's Health and Nutrition component introduces low-income families to a holistic approach to healthy lifestyles, including exercise classes, menu planning, and cooking classes, and improved access to fresh fruits and vegetables through Community Supported Agriculture (CSA) Shares and the Farmer's Market. Our aim is to raise awareness on the importance of healthy lifestyles and help to decrease the incidences of obesity.	Of 40 individuals seeking health and nutrition services:		Intake Form	40					0	0%
	10 will be enrolled in the CSA Program.		Intake Form	10	0				0	0%
	10 will improve their nutritional well being through access to nutritional foods.	6.3.B	Post Survey	10	0				0	0%
	Of those 10 receiving CSA Shares, 180 boxes of food will be distributed	6.3.A	Weekly sign-out sheets	180	0				0	0%
	15 30 will participate in exercise classes and improve their health and physical well being.	6.3.E	Attendance Sheets	15- 30	24				24	#VALUE!
	15 will participate in cooking classes and exhibit improved family functioning.	6.3.K	Pre/Post Survey	15	10				10	67%

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Contractor

Cortland County Community Action Program, Inc.

Description of Need (Customer, Community, Agency)
Briefly identify the need that documents the reason for the programs/ services/milestones and outcomes listed below (Corresponds to the needs/strategic objectives identified in C1b or C1c):

Low income families who are at nutritional and health risk (F)

Program that addresses the need described above:

Health and Nutrition (3b of 4)

Interventions Briefly describe the services, activities, and advocacy that will address the need and achieve the outcome:	Benchmarks or Milestones and Outcomes List the projected baseline number of customers to be enrolled (if applicable) and the expected benchmarks or milestones and outcomes to be achieved for the service or activity (Funnel). When possible, describe the outcome using language from the NPIs:	NPI(s)	Method(s) of Measurement/Verification Identify the tool or process to be used to verify progress on the outcome or milestone:	Annual Projected	ACTUAL PROGRAM PROGRESS					
					PPR #1 Achieved	PPR #2 Achieved	PPR #3 Achieved	PPR #4 Achieved	YTD Total	YTD %
The agency's Health and Nutrition component introduces low-income families to a holistic approach to healthy lifestyles, including exercise classes, menu planning, and cooking classes, and improved access to fresh fruits and vegetables through Community Supported Agriculture (CSA) Shares and the Farmer's Market. Our aim is to raise awareness on the importance of healthy lifestyles and help to decrease the incidences of obesity.	Families will receive 175 boxes of fresh fruits and vegetables using SNAP benefits	6.5.A	EBT Transactions	175	12				12	7%
	7 partnerships will support the goals of the health and nutrition program, through referrals, funding, space (2 school districts, 1 business, 1 NFP, 3 collaborations)	4.A-M	Partnership Agreements/MOU's	7	7				7	100%
									0	#DIV/0!
									0	#DIV/0!
									0	#DIV/0!
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Cortland County Community Action Program, Inc.

Description of Need (Customer, Community, Agency)
Briefly identify the need that documents the reason for the programs/ services/milestones and outcomes listed below (Corresponds to the needs/strategic objectives identified in C1b or C1c):

Accessibility of health care for families (C)

Program that addresses the need described above:

Community Health Worker (4 of 4)

Interventions Briefly describe the services, activities, and advocacy that will address the need and achieve the outcome:	Benchmarks or Milestones and Outcomes List the projected baseline number of customers to be enrolled (if applicable) and the expected benchmarks or milestones and outcomes to be achieved for the service or activity (Funnel). When possible, describe the outcome using language from the NPIs:	NPI(s)	Method(s) of Measurement/Verification Identify the tool or process to be used to verify progress on the outcome or milestone:	Annual Projected	ACTUAL PROGRAM PROGRESS					
					PPR #1 Achieved	PPR #2 Achieved	PPR #3 Achieved	PPR #4 Achieved	YTD Total	YTD %
Connect high need women and families to appropriate navigator sites for assistance with enrollment into public health insurance programs / family planning benefits programs or market place as appropriate. Provide one on one education and appropriate referral for health care services to women and their families. Assist to remove barriers to accessing care as appropriate. The medical, behavioral and psychosocial risk factors of high – need women and infants are identified and addressed through timely and coordinated counseling, management, referral, and follow – up.	Of 40 individuals seeking assistance.								0	#DIV/0!
	5 of the 40 will enroll in a health insurance plan.	1.2.G	Tracking Form	5	0				0	0%
	25 of the 40 will be referred to the appropriate health care services based upon their specific need.	6.5 E	Tracking Form	25	5				5	20%
									0	#DIV/0!
									0	#DIV/0!
									0	#DIV/0!

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Cortland County Community Action Program, Inc.

Description of Need (Customer, Community, Agency)
Briefly identify the need that documents the reason for the programs/ services/milestones and outcomes listed below (Corresponds to the needs/strategic objectives identified in C1b or C1c):

Children face barriers to school readiness (F)

Program that addresses the need described above:

Head Start/Early Head Start (2 of 2)

Interventions Briefly describe the services, activities, and advocacy that will address the need and achieve the outcome:	Benchmarks or Milestones and Outcomes List the projected baseline number of customers to be enrolled (if applicable) and the expected benchmarks or milestones and outcomes to be achieved for the service or activity (Funnel). When possible, describe the outcome using language from the NPIs:	NPI(s)	Method(s) of Measurement/Verification Identify the tool or process to be used to verify progress on the outcome or milestone:	Annual Projected	ACTUAL PROGRAM PROGRESS					
					PPR #1 Achieved	PPR #2 Achieved	PPR #3 Achieved	PPR #4 Achieved	YTD Total	YTD %
The agency's Head Start/Early Head Start program provides comprehensive pre-school activities which include classroom instruction, home base, health and nutrition, and social emotional development for children ages zero to four, as well as support services for their families	240 parents/caregivers will be engaged by HS/EHS staff through home visits.		Family worker notes	240	251				251	105%
	220 of 240 parents/caregivers will participate in HS/EHS family engagement services by completing a family strength assessment		Completion of Family Strength Assessment (FSA)	220	200				200	91%
	Of the 220, 200 will learn and exhibit improved family functioning	6.3 K	Documented achievement on a Family Strength Assessment	200	0				0	0%
	13 partnerships will support program, provide space, and in-kind paraprofessional services(4 school districts, 5 not-for-profit, 2 higher education, 2 faith based)	4.1 A-M	MOU's	13	13				13	100%
									0	#DIV/0!
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Cortland County Community Action Program, Inc.,

Description of Need (Customer, Community, Agency) Briefly identify the need that documents the reason for the programs/ services/milestones and outcomes listed below (Corresponds to the needs/strategic objectives identified in C1b or C1c):	Low income families lack essentials such as food, clothing household appliances, transportation assistance, utility assistance. (F)
Program that addresses the need described above:	Community Action Angels (1 of 2)

Interventions Briefly describe the services, activities, and advocacy that will address the need and achieve the outcome:	Benchmarks or Milestones and Outcomes List the projected baseline number of customers to be enrolled (if applicable) and the expected benchmarks or milestones and outcomes to be achieved for the service or activity (Funnel). When possible, describe the outcome using language from the NPIs:	NPI(s)	Method(s) of Measurement/Verification Identify the tool or process to be used to verify progress on the outcome or milestone:	Annual Projected	ACTUAL PROGRAM PROGRESS					
					PPR #1 Achieved	PPR #2 Achieved	PPR #3 Achieved	PPR #4 Achieved	YTD Total	YTD %
The agency's Family Development Component provides low-income families with clothing, household appliances, transportation assistance, utility assistance, etc.	Of 725 individuals seeking assistance:		Intake Form						0	#DIV/0!
	600 of 725 will receive clothing.	6.2 K	Database	600	473				473	79%
	25 of 725 will receive emergency car or home repair.	6.2 D	Intake Form	25	7				7	28%
	10 of 725 will receive emergency food.	6.2 A	Intake Form	10	2				2	20%
	25 of 725 will receive fuel or utility assistance	6.2 B	Intake Form	25	0				0	0%
	10 of 725 will receive emergency transportation	6.2 I	Intake Form	10	2				2	20%

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Cortland County Community Action Program, Inc.,

Description of Need (Customer, Community, Agency)
Briefly identify the need that documents the reason for the programs/ services/milestones and outcomes listed below (Corresponds to the needs/strategic objectives identified in C1b or C1c):

Low income families lack essentials such as food, clothing household appliances, transportation assistance, utility assistance. (F)

Program that addresses the need described above:

Community Action Angels (2 of 2)

Interventions Briefly describe the services, activities, and advocacy that will address the need and achieve the outcome:	Benchmarks or Milestones and Outcomes List the projected baseline number of customers to be enrolled (if applicable) and the expected benchmarks or milestones and outcomes to be achieved for the service or activity (Funnel). When possible, describe the outcome using language from the NPIs:	NPI(s)	Method(s) of Measurement/Verification Identify the tool or process to be used to verify progress on the outcome or milestone:	Annual Projected	ACTUAL PROGRAM PROGRESS					
					PPR #1 Achieved	PPR #2 Achieved	PPR #3 Achieved	PPR #4 Achieved	YTD Total	YTD %
The agency's Family Development Component provides low-income families with clothing, household appliances, transportation assistance, utility assistance, etc.	5 of the 725 will receive Emergency Medical Care	6.2 F	Intake Form	5	0				0	0%
	50 150 of the 725 will be referred to other service providers.	6.5 E	Referral Tracking Form	150	44				44	29%
	8 partnerships will be established to support services and in-kind resources (5 businesses, 2 NFP)	4.1 A-M	MOU's	8	8				8	100%
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Cortland County Community Action Program, Inc.,

Description of Need (Customer, Community, Agency)
Briefly identify the need that documents the reason for the programs/ services/milestones and outcomes listed below (Corresponds to the needs/strategic objectives identified in C1b or C1c):

Low income individuals lack the competencies and resources for achieving academic and employment goals. (F)

Program that addresses the need described above:

TASC Preparation/Tutoring (1 of 2)

Interventions Briefly describe the services, activities, and advocacy that will address the need and achieve the outcome:	Benchmarks or Milestones and Outcomes List the projected baseline number of customers to be enrolled (if applicable) and the expected benchmarks or milestones and outcomes to be achieved for the service or activity (Funnel). When possible, describe the outcome using language from the NPIs:	NPI(s)	Method(s) of Measurement/Verification Identify the tool or process to be used to verify progress on the outcome or milestone:	Annual Projected	ACTUAL PROGRAM PROGRESS					
					PPR #1 Achieved	PPR #2 Achieved	PPR #3 Achieved	PPR #4 Achieved	YTD Total	YTD %
Through the High School Equivalency (HSE) Program, provide tutoring, preparation for TASC testing, transportation to TASC test sites, and higher education counseling will be provided to low income individuals.	Of 35 50 enrolled in the HSE/Tutoring program:			35- 50	35				35	#VALUE!
	20 will have at least 12 hours of attendance.		Attendance Records	20	6				6	30%
	15 will have a grade level improvement in math or reading.		Grade level improvement on math TABE test, case notes.	15	2				2	13%
	8 will take the TASC exam, and pass from 1-4 of the five test.	6.3. I	Grade level improvement on math TABE test, case notes.	8	4				4	50%
	2 20 will have individual math/literacy tutoring to meet education or employment goals.	1.2. A	Attendance Records	2 20	6				6	#VALUE!
	8 will receive their HSE diploma.	1.2 B	Case Notes	8	3				3	38%

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New York State Department of State

Division of Community Services

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Cortland County Community Action Program, Inc.,

Description of Need (Customer, Community, Agency)
Briefly identify the need that documents the reason for the programs/ services/milestones and outcomes listed below (Corresponds to the needs/strategic objectives identified in C1b or C1c):

Low income individuals lack the competencies and resources for achieving academic and employment goals. (F)

Program that addresses the need described above:

Safe Sitter Certification (2 of 2)

Interventions Briefly describe the services, activities, and advocacy that will address the need and achieve the outcome:	Benchmarks or Milestones and Outcomes List the projected baseline number of customers to be enrolled (if applicable) and the expected benchmarks or milestones and outcomes to be achieved for the service or activity (Funnel). When possible, describe the outcome using language from the NPIs:	NPI(s)	Method(s) of Measurement/Verification Identify the tool or process to be used to verify progress on the outcome or milestone:	Annual Projected	ACTUAL PROGRAM PROGRESS					
					PPR #1 Achieved	PPR #2 Achieved	PPR #3 Achieved	PPR #4 Achieved	YTD Total	YTD %
Through the Safe Sitter Certification, provide youth the necessary skills to care for infants and children leading to employment opportunities.	Of 50 enrolled:		Intake Form	50	0				0	0%
	40 will attend the 7 hour course.		Attendance Records	40	0				0	0%
	40 will obtain skills and competencies required for successful employment	1.2 A	Certificates	40	0				0	0%
	5 partnerships will be established to support services, provide space, and referrals (2 Schools, 1 Higher Learning, and 2 NFP)	4.1 A-M	MOU's	5	5				5	100%
									0	#DIV/0!
									0	#DIV/0!

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Cortland County Community Action Program, Inc.,

Description of Need (Customer, Community, Agency)
Briefly identify the need that documents the reason for the programs/ services/milestones and outcomes listed below (Corresponds to the needs/strategic objectives identified in C1b or C1c):

Lack of community facilities in the rural areas of the community (C)

Program that addresses the need described above:

Family Success Centers (1 of 1)

Interventions Briefly describe the services, activities, and advocacy that will address the need and achieve the outcome:	Benchmarks or Milestones and Outcomes List the projected baseline number of customers to be enrolled (if applicable) and the expected benchmarks or milestones and outcomes to be achieved for the service or activity (Funnel). When possible, describe the outcome using language from the NPIs:	NPI(s)	Method(s) of Measurement/Verification Identify the tool or process to be used to verify progress on the outcome or milestone:	Annual Projected	ACTUAL PROGRAM PROGRESS					
					PPR #1 Achieved	PPR #2 Achieved	PPR #3 Achieved	PPR #4 Achieved	YTD Total	YTD %
The agency will operate Family Success Centers in the communities of Marathon and McGraw in an effort to provide services and activities in the rural areas of the county. The center provides opportunities for people in the community to access resources including emergency assistance, application for food stamps, parent support and education, activities for children, support with household finances, health and nutrition through cooking classes, filing income taxes through the Volunteer Income Tax Assistance Program (VITA), etc.	Increase in the availability of community resources in the rural communities of Marathon and McGraw. (2 Opp.)	2.2 B							0	#DIV/0!
	100-400 families will receive services in rural areas of the community	2.2 B	Sign in sheets/Intake Forms	100-400	355				355	#VALUE!
	2 school district partnerships will be maintained to support the FSC's by providing space.	4.1 A-M	MOU's	2	2				2	100%
									0	#DIV/0!
									0	#DIV/0!
									0	#DIV/0!

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Cortland County Community Action Program, Inc.,

Description of Need (Customer, Community, Agency)
Briefly identify the need that documents the reason for the programs/ services/milestones and outcomes listed below (Corresponds to the needs/strategic objectives identified in C1b or C1c):

Low income families lack the skills necessary for successful parenting. (F)

Program that addresses the need described above:

Parents with Hope and Focus on Fatherhood (1 of 1)

Interventions Briefly describe the services, activities, and advocacy that will address the need and achieve the outcome:	Benchmarks or Milestones and Outcomes List the projected baseline number of customers to be enrolled (if applicable) and the expected benchmarks or milestones and outcomes to be achieved for the service or activity (Funnel). When possible, describe the outcome using language from the NPIs:	NPI(s)	Method(s) of Measurement/Verification Identify the tool or process to be used to verify progress on the outcome or milestone:	Annual Projected	ACTUAL PROGRAM PROGRESS					
					PPR #1 Achieved	PPR #2 Achieved	PPR #3 Achieved	PPR #4 Achieved	YTD Total	YTD %
The agency's Parent's with Hope and Focus on Fatherhood groups are a 10 week course designed to provide parents/caregivers with the skills necessary to effectively parent. Topics include a large variety of issues facing today's parents/caregivers which include: communication, step-parenting, addiction, discipline, bullying, child safety, and much more.	Of 30 40 parents/caregivers applying to participate in parenting classes:		Intake Forms	30 40	15				15	#VALUE!
	30 of the 30 will enroll in the course.		Intake Forms/Pre Surveys	30	0				0	0%
	25 of 30 will complete the training course.		attendance sheets/ certificate of completion	25	0				0	0%
	25 of the 30 will learn and exhibit improved parenting skills.	6.3 J	Post Survey	25	0				0	0%
	1 local government partnership will promote the program, 1 State government	4.1 A-M	e-mails, referrals	2	2				2	100%
									0	#DIV/0!

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Cortland County Community Action Program, Inc.,

Description of Need (Customer, Community, Agency)
Briefly identify the need that documents the reason for the programs/ services/milestones and outcomes listed below (Corresponds to the needs/strategic objectives identified in C1b or C1c):

Low income families lack economic stability (F)

Program that addresses the need described above:

Volunteer Income Tax Assistance (VITA) (1 of 1)

Interventions Briefly describe the services, activities, and advocacy that will address the need and achieve the outcome:	Benchmarks or Milestones and Outcomes List the projected baseline number of customers to be enrolled (if applicable) and the expected benchmarks or milestones and outcomes to be achieved for the service or activity (Funnel). When possible, describe the outcome using language from the NPIs:	NPI(s)	Method(s) of Measurement/Verification Identify the tool or process to be used to verify progress on the outcome or milestone:	Annual Projected	ACTUAL PROGRAM PROGRESS					
					PPR #1 Achieved	PPR #2 Achieved	PPR #3 Achieved	PPR #4 Achieved	YTD Total	YTD %
Through the agency sponsored VITA program assistance will be given to low individuals in preparing and filing their federal and State personal income taxes at no cost and ensure that workers receive all the tax credits to which they are entitled.	600 individuals will qualify for free tax preparation assistance:		Income Verification						0	#DIV/0!
	Of those tax returns \$300,000 in Federal and State EITC tax credits will be applied	1.3 A	VITA Report	300,000	0				0	0%
	6 partnerships will promote the program, and provide volunteer services (1 financial, 4 NFP, and 1 higher education	4.a A-M	Agreements	6	0				0	0%
									0	#DIV/0!
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Work Plan

PPR #1

PPR #2

Plan Amendment

PPR #3

PPR #4

ATTACHMENT C

COMMUNITY SERVICES BLOCK GRANT

C-2c 2016 Work Plan and Program Progress Report (PPR)

Page

20

of

22

FFY

2016

Budget Period

10/1/15-9/30/16

Contract #

C1000292

Contractor

Cortland County Community Action Program, Inc.,

Description of Need (Customer, Community, Agency)
Briefly identify the need that documents the reason for the programs/ services/milestones and outcomes listed below (Corresponds to the needs/strategic objectives identified in C1b or C1c):

Individuals with a disability maintaining their independence while living in the community (F)

Program that addresses the need described above:

Consumer Directed Personal Assistance Program (CDPAP) (1 of 1)

Interventions Briefly describe the services, activities, and advocacy that will address the need and achieve the outcome:	Benchmarks or Milestones and Outcomes List the projected baseline number of customers to be enrolled (if applicable) and the expected benchmarks or milestones and outcomes to be achieved for the service or activity (Funnel). When possible, describe the outcome using language from the NPIs:	NPI(s)	Method(s) of Measurement/Verification Identify the tool or process to be used to verify progress on the outcome or milestone:	Annual Projected	ACTUAL PROGRAM PROGRESS					
					PPR #1 Achieved	PPR #2 Achieved	PPR #3 Achieved	PPR #4 Achieved	YTD Total	YTD %
The agency's Consumer Directed Personal Assistance Program (CDPAP) provides services to allow individuals with disabilities and other medical conditions more control over their personal assistance services. This allows an individual the ability to manage his or her care and make decisions based upon his or her own individualized needs and to live in the community as independently as possible.	Of 55 65 individuals applying for CDPAP Services								0	#DIV/0!
	55 65 of 55 will maintain a independent living situation	6.1.B	Assessment Tool	55 65	51				51	#VALUE!
	Of the 55 -65, 6 family caregivers will obtain/maintain employment	1.2 G	Assessment Tool	6	6				6	100%
	1 partnership will local government will promote the program and refer clients.	4.1 A-M	Contract	1	1				1	100%
									0	#DIV/0!
									0	#DIV/0!

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Check one:

Work Plan

0

x

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Plan Amendment

0

0

PPR #1

PPR #3

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PPR #2

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PPR #4

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2016

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10/1/15-9/30/16

Contract #

C1000292

Contractor

Cortland County Community Action Program, Inc.,

Description of Need (Customer, Community, Agency)
Briefly identify the need that documents the reason for the programs/ services/milestones and outcomes listed below (Corresponds to the needs/strategic objectives identified in C1b or C1c):

Lack of affordable child development placement opportunities for low income families (C)

Program that addresses the need described above:

Summer Day Camp (1 of 1)

Interventions Briefly describe the services, activities, and advocacy that will address the need and achieve the outcome:	Benchmarks or Milestones and Outcomes List the projected baseline number of customers to be enrolled (if applicable) and the expected benchmarks or milestones and outcomes to be achieved for the service or activity (Funnel). When possible, describe the outcome using language from the NPIs:	NPI(s)	Method(s) of Measurement/Verification Identify the tool or process to be used to verify progress on the outcome or milestone:	Annual Projected	ACTUAL PROGRAM PROGRESS					
					PPR #1 Achieved	PPR #2 Achieved	PPR #3 Achieved	PPR #4 Achieved	YTD Total	YTD %
Summer Day Camp slots will be created and subsidized for low-income children.	12 low income children will be served through 1 initiative.	2.1 F	Agreement	12	0				0	0%
	12 low income children will improve social/emotional development.	6.3 F	Attendance	12	0				0	0%
	2 partnerships will promote and financially support the program (1 non-profit, 1 civic organization)	4.1 A-M	Agreements, in-kind report	2	0				0	0%
									0	#DIV/0!
									0	#DIV/0!
									0	#DIV/0!

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New York State Department of State

Division of Community Services

2016 CSBG Contract

Highlights for February include:

- Changes in the Fiscal Department were the highest priority this month. After a thorough process that included first interviews, 2nd interviews with three candidates we were happy to offer the position and have Martha Allen accept. Martha started on February 17. This will give her 2 ½ weeks with Shelley before Shelley's last day on March 4. We have an internal candidate for the Assistant Fiscal Director position. Martha wants to move forward with that, interviews will happen the week of Feb. 22. If that works out, we would be able to have that person training with Shelly prior to her departure as well.
- We are continuing preparation for the TRACS review by the Department of State scheduled for July 11-12, 2016. This incorporates the new requirements in assessment with the Organizational Standards. Staff met with Theresa Walsh, Program Analyst with the Dept. of State for technical support. Good progress is being made in preparation for this review.
- In October 2015, all staff had the opportunity to complete an employee satisfaction survey. Those responses were compiled into one document and the management team spent several meetings reviewing and determining priority areas. These areas include Policies and Procedures, Communication, Safety/Facilities and Recognition/Affirmation/Voicing Concerns. The week of Feb. 15, all staff had the opportunity to participate in focus groups to give the opportunity for further input, more specifics and share ideas, thoughts and concerns. Fourteen non-management staff were recruited to facilitate these smaller groups. This information will be compiled and we are hopeful that it will provide numerous opportunities to improve and strengthen the structure and culture of CAPCO.
- On February 12, the Cortland Chamber of Commerce hosted a Breakfast with Elected Officials. Brandy Strauf, Brian Rozewski, Greg Richards and I attended to represent CAPCO. The elected officials present included Sen. Seward, Assemblypersons Gary Finch and Barbara Lifton, Mayor Brian Tobin and Legislative Chair Donnel Boyden. Each had the opportunity to give updates from their specific areas and the audience had the opportunity to ask questions.
- CAPCO received notification regarding the 2016 Medicaid reimbursement rate for CDPAP. It is \$15.97 per hour. This is a slight increase over last year. We were also approved for an Enhanced CDPAP rate at \$1.09. This means that those participants that we were the most concerned about in regards to covering costs may now be billed at \$17.06 per hour. We are working with Kristen Monroe and DSS to determine how to make those referrals and get that process started. This will help with many of our concerns about costs associated with CDPAP.

Family Development

February

- Implemented first one on one quarterly meeting with Family Advocates to review progress and goals and objectives for the next quarter. The process went well and well received by Family Advocates.
- Grants applications submitted for County Youth Bureau, Dollar General, and Community Foundation for GED program and expansion of Literacy Volunteers.
- Started planning for the CSA program. Looking to start planning early to include education. Met with Alan Gandelman from Main Street Farms and Kate Miller-Corcoran from Farmshare in Binghamton about expanding the program.
- Planning our second annual Pajama Party for early April. Books and Pajamas are provided to use through the Pajama Program.
- First food sense display was a success. We are planning on doing a monthly display to promote the program.
- Family Development Staff will be attending NYSCAA's Poverty Symposium on March 7.



Energy Services Directors Report

February 2016

- WAP 15.16- 3 units were completed this month. We have started work on an 8 unit building (landlord owned) that will complete our contract.
- WAP 16.17 - The budget package has arrived for the 16.17 contract year. I will be meeting with Lindy next week to go over some plans and submitting a draft to the Finance Committee in March.
- EmPower NY- 3 units have been completed and invoiced. (3-ER's)
- AO Smith – no activity.
- HEAP- No Heat emergencies – This program has closed. However, EmPower NY has picked up the No Heat emergencies.
- Energy Savers- 1 unit was completed and coordinated with the help of Action Angels.
- Training- N/A
- Meetings- Regional Task Force meeting will be held in Syracuse on the 3rd of March.
- Other Topics- N/A

**BOARD OF DIRECTORS MONTHLY REPORT
FROM HEAD START/EARLY HEAD START
MONTH: February 2015**

Enrollment:

- Fully Enrolled
 - 200 Head Start
 - 72 Early Head Start

Center/Office Updates/Policy Council Updates:

- Policy Council meeting was moved to February 23rd to allow time to complete and review grant for approval process.

Old Business:

- Self Assessment training was moved to March ?
- Working on finalizing the continuation grant for HS/EHS which is due on March 1st.
 - Executive Summary was be presented to PP&E Committee on 2/16
 - Budget was presented to Finance and Executive Committee on 2/17

New Business:

- Had all staff training day on February 19th. Trained staff on Program Goals, grant, and forecasted budget. Also provided staff with Office of Head Start updates.

Executive Session:

- N/A

CDPAP

- Current Caseload is 55.
 - 22 Fidelis
 - 6 ICircle
 - 27 Medicaid
- I have a few new referrals this month with services to start over the next week or so.
- Unfortunately, another participant has passed away. She was a wonderful person, but the battle with MS finally took its toll.
- The MLTC subcommittee continues to meet with the Managed Care agencies. Fidelis is in the process of have one representative as a Care Manager for the Cortland County area. This will make it much easier for the participants as well as other service providers.

Human Resources Report
February 2016
HR Director: Greg Richards



HR Happenings:

- **Fiscal Director Recruitment:** We have hired a Fiscal Director! CAPCO welcomes Martha Allen to the CAPCO family as our Fiscal Director. Martha brings valuable experience to our Agency, and we look forward to working with her as we maintain our strong fiscal position and expand on our processes.
- **S.A.F.E. Committee:** The CAPCO S.A.F.E. (Safety and Facilities Enhancement) Committee continues to meet on a monthly basis. We continue our quarterly safety audits of the CAPCO owned and rented office spaces with audits scheduled to be completed before the start of the quarter in April 2016. The S.A.F.E. Committee is also looking to update our policies of Emergency Preparedness, Exposure Control, and Injury & Illness Prevention Program. These policies have previously been established, and the S.A.F.E. Committee has broken into sub-committees to review and update the policies as necessary.
- **CAPCO Staff Survey Focus Groups:** CAPCO conducted a staff survey in the fall of 2015 as a follow-up survey to the survey conducted in 2014. Based on the results of our most recent survey, the Management team created a series of focus groups to gain more insight into the findings from the survey. The categories of questions chosen for the focus groups, based on the overall survey results, are: Policies and Procedures, Safety and Facilities, Communication, and Respect/Recognition/Affirmation. These focus groups were not facilitated by members of leadership/management team. Instead, Program Directors chose front-line staff to facilitate the groups in other programs. For example, Kirsten Parker, WIC Director, chose 2 members of her staff to facilitate a Head Start/Early Head Start group. These focus groups began the week of 2/15/2016. The Management team is collecting the results of these focus groups and will work through them to get more specific insight from the staff survey. Overall, CAPCO was pleased with overall staff satisfaction indicated in the Fall 2015 survey, but wanted to focus more on specifics of the broad question areas.
- **401K CAPCO Base and Match Remittance:** Human Resources has been worked with the Assistant Fiscal Director to remit the CAPCO 401(K) match/base contributions for the calendar year 2015 to Mutual of America. Employees can expect the remittance

to hit their 401(K) investment accounts in the coming weeks as Mutual of America processes the contribution(s). A change to the 401(K) plan to remit the CAPCO match/base on a bi-weekly basis with our employee's own salary contributions has been proposed to the Executive Committee and is up for approval at the 2/24/2016 Board of Directors meeting. It is the belief of HR and Fiscal that with the addition of a full-time HR staff that we are better able to manage and administer the 401K plan on a real-time basis.

- **Forms 1095-C:** As previously cited, the Patient Protection and Affordable Care Act requires employers of CAPCO's size to provide employees with Form 1095-C beginning for the 2015 calendar year to show monthly medical insurance coverage (or lack thereof). The original legislation required this to be provided with W-2's no later than January 31st. However, the deadline was pushed back to March 31st. The forms were to be used by employees when filing taxes to show that CAPCO offered coverage if they were eligible and that they were enrolled for each calendar month. However, with the push back of when these forms need to be provided, the IRS has indicated that there is no penalty or requirement to amend if employees file taxes prior to receiving form 1095-C. Beginning in June 2015, Human Resources has collaborated with our Fiscal team to prepare these forms. We contracted with our payroll company, Complete Payroll, to set up a module for reporting this information and process physical copies on a yearly basis. CAPCO's 1095-C's are scheduled to be printed by Complete Payroll and provided to employees in the coming weeks. Human Resources continues to collaborate with our broker, Goetzmann and Associates as well as other CAP agencies on the proper process for tracking employee hours and look-back periods for medical insurance eligibility. In conversations with our broker, this continues to be a moving target and one that CAPCO continues to work to be in compliance with.