



Grant/Project Tracking

Status Report: ECI-14-19 - 09

Grant: [ECI-14-19-Lakes Area ECI SFY '14](#)

Status: **Editing**

Program Area: **Early Childhood Iowa**

Grantee Organization: **Early Childhood Iowa:Lakes Region**

Program Manager: **Tami Foley**

Board and Contact Information

[Mark as Complete](#) |

Area and Counties Served

Name of Early Childhood Area: **Lakes Region (Clay, Dickinson, O'Brien, Osceola)**

Website: **ecilakesregion.com**

Counties / Area Served: **21, 30, 71, 72**

Current Board Chairperson

Current Board Chairperson Name: **Merlin Sandersfeld**

Board Chairperson Address: **2319 100th Ave**

Board Chairperson City: **Harris**

Board Chairperson State: **Iowa**

Board Chairperson Zipcode: **51345**

Board Chairperson Phone: **712-260-2810**

Board Chairperson E-mail: **mds1@iowatelecom.net**

Current Fiscal Agent

Current Fiscal Agent Name: **Upper Des Moines Opportunity**

Fiscal Agent Address: **101 Robins St**

Fiscal Agent City: **Graettinger**

Fiscal Agent State: **Iowa**

Fiscal Agent Zipcode: **51342**

Fiscal Agent
E-mail: tedwards@udmo.com

Contact Person for the Local ECI Board

Contact
Person
Name: **Paulette Karolczak**

Contact
Address: **2459 Monroe Ave**

Contact City: **Ashton**


Contact
State: **Iowa**

Contact
Zipcode: **51232**


Contact
Phone: **712-724-6513**

Contact E-
mail: pmkarolczak@gmail.com

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Updates* [Community_Plan_Updates_SF14.docx](#)  Delete

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Executive
Summary
Attachment 

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Status Report: ECI-14-19 - 09

Grant: [ECI-14-19-Lakes Area ECI SFY '14](#)

Status: **Editing**

Program Area: **Early Childhood Iowa**

Grantee Organization: **Early Childhood Iowa:Lakes Region**

Program Manager: **Tami Foley**

Instructions

If your board funds two or more emotional/behavioral services, combine and report the performance measures data together.

Use the TAB key to move from one field to the next. When entering financial information, include both dollars and cents, example: 95234.22

Note: This is a two-part form; follow instructions carefully!

To begin entering information into this form, click "Edit" at the top of the form. You can complete all fields except the "Optional: Other Funding Expended and Source" field. Click "Save" at the top of the form. Now, the "Optional: Other Funding Expended and Source" field is available. If applicable, click "Add" to enter the source and funding amount in the fields. Next, click on "Save" at the top of the form. Repeat this process for each "Optional Funding" entry in this section.

Emotional/Behavioral Services - Indirect Services

[Mark as Complete](#) | [Go to Status Report Form](#)

Name of Program or Service **Hand in Hand**

List the name of each contractor funded.

Contractor **Upper Des Moines Opportunity**

Description **Hand in Hand offers training and coaching to Preschools and child care settings. Program staff provide PBIS, Power of Mental Health, Baby Signs, Baby Signs, and supplemental trainings on relationships and attachment, on-site coaching, and follow-up to**

home and center child care providers and preschools. A resource library is made available. Does not duplicate CCR&R services. The program is available to all 4 counties. 2 FTE staff.

Indicate Program Type:

Evidence Based

Link to Which Comm. Plan Priority or Priorities

Improve the quality of early care and learning environments

How much was invested (Input measures)

Fiscal investments must coincide with early childhood financial statement

Source	Amount
Early Childhood Federal Program	\$0.00
Early Childhood State Program	\$18,398.24
Early Childhood Federal Admin	\$0.00
Early Childhood State Admin	\$0.00

School Ready-Family Support	\$0.00
School Ready-Preschool	\$18,623.36
School Ready-Quality	\$1,982.40
School Ready-Other/Undesignated	\$0.00
School Ready-Admin	\$0.00
Total	\$39,004.00

Optional: Other Funding Expended and Source

Source	Amount
	\$0.00

Total Funding

Total **\$39,004.00**

Output Measures

of early learning programs participating in activities supporting emotional/behavioral health (unduplicated) **7**

What Was the Change in Conditions for Those We Served (Outcome Measures)

% of programs with improved self confidence and competence in dealing with child emotional/behavioral challenges	7 # Achieved Measure	7 # Possible	100.0% %
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Status: Editing

Program Area: Early Childhood Iowa

Grantee Organization: Early Childhood Iowa:Lakes Region

Program Manager: Tami Foley

Instructions

If your board funds two or more professional development opportunities, combine and report the performance measures data together.

Use the TAB key to move from one field to the next. When entering financial information, include both dollars and cents, example: 95234.22

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Professional Development - Indirect Services

[Mark as Complete](#) | [Go to Status Report Form](#)

Name of Program or Service **Hand in Hand**

List the name of each contractor funded.

Contractor Upper Des
Moines
Opportunity

Description Hand in Hand
offers training
and coaching
to Preschools
and child care
settings.
Program staff
provide PBIS,
Power of
Mental
Health, Baby
Signs, Baby
Signs, and
supplemental
trainings on
relationships
and
attachment,
on-site
coaching, and
follow-up to
home and
center child
care
providers and
preschools. A
resource
library is
made
available.

Does not duplicate CCR&R services. The program is available to all 4 counties. 2 FTE staff.

Indicate Program Type:

Evidence Based

Link to Which Comm. Plan Priority or Priorities

Improve the quality of early care and learning environments

How much was invested (Input measures)

Fiscal investments must coincide with early childhood financial statement

Source	Amount
Early Childhood Federal Program	\$0.00
Early Childhood State Program	\$19,931.42
Early Childhood Federal Admin	\$0.00
Early Childhood State Admin	\$0.00
School Ready-Preschool	\$20,175.30
School Ready-Quality	\$2,147.60
School Ready-Other/Undesignated	\$0.00
School Ready-Admin	\$0.00
Total	\$42,254.32

Optional: Other Funding Expended and Source

Source	Amount

\$0.00

Total Funding

Total \$42,254.32

Output Measures

of participants in professional development opportunities 93

What Was the Change in Conditions for Those We Served (Outcome Measures)

% of ratings/certifications/credentialing/renewals that were a direct result of professional development opportunities	81 # Achieved Measure	93 # Possible	87.1% %
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Status: **Editing**

Program Area: Early Childhood Iowa

Grantee Organization: Early Childhood Iowa:Lakes Region

Program Manager: Tami Foley

Instructions

If your board funds two or more preschool scholarship coordination services, combine and report the performance measures data together.

Use the TAB key to move from one field to the next. When entering financial information, include both dollars and cents, example: 95234.22

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Preschool Scholarship Coordination - Indirect Services

[Mark as Complete](#) | [Go to Status Report Form](#)

Name of Program or Service
Preschool
tution and
transportatio
n assistance

List the name of each contractor funded.

Contractor
Childrens
World
Clay Central
Everly
Bright
Beginnings of
OSC Co
Learning
Tree
Noah's Ark
Kingdom
Kids

Zion St.
Johns
Harris-Lake
Park
Preschool
Trinity
Sacred Heart
Carousel
Terril

Description Preschool
tuition and
transportation
assistance is
available for
children ages
3, 4, and 5
who can not
be served by
Head Start
due to
income level
or lack of
openings.
Families
must meet
income
guidelines of
200% or less
of the federal
poverty level.
Preschools
receiving
funds from
the

scholarship
program
must be
participating
in a quality
initiative.

Indicate Program Type: Evidence
Based

Link to Which Comm. Plan
Priority or Priorities Improve the
quality of
early care
and learning
enviroments

How much was invested (Input measures)

Fiscal investments must coincide with early childhood financial statement

Source	Amount
Early Childhood Federal Program	\$0.00
Early Childhood State Program	\$0.00
Early Childhood Federal Admin	\$0.00
Early Childhood State Admin	\$0.00
School Ready-Preschool	\$42,938.43
School Ready-Quality	\$0.00
School Ready-Other/Undesignated	\$0.00
School Ready-Admin	\$0.00
Total	\$42,938.43

Optional: Other Funding Expended and Source

Source	Amount
	\$0.00

Total Funding

Total \$42,938.43

Output Measures

of children applying for scholarships 65

What Was the Change in Conditions for Those We Served (Outcome Measures)

% of children applying for preschool scholarships who actually receive the scholarship	54 # Achieved Measure	65 # Possible	83.08% %	
Children applying for a scholarship that did not receive it. List the reasons	Ineligible Family Declined Assistance More Info/Requested	11 # Achieved Measure	65 # Possible	16.92% %

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Status: **Editing**

Program Area: **Early Childhood Iowa**

Grantee Organization: **Early Childhood Iowa:Lakes Region**

Program Manager: **Tami Foley**

Instructions

Purpose: To provide guidance and support to the local Early Childhood Board, develop and strengthen community partnerships, enhance the early childhood system, and coordinate and monitor contracted services.

If there are two or more staff, combine and report all performance measures data together.

Use the TAB key to move from one field to the next. When entering financial information, include both dollars and cents, example: 95234.22

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ECIA Director (service coordination and collaboration)

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Name of Staff or Contracted Provider **Karolczak, Moritz, Pingel (Moritz retired)**

Link to Which Comm. Plan Priority or Priorities **Linked to all ECI Area Priorities**

Linked to all ECI Area priorities.

How much was invested (Input measures)

Fiscal investments must coincide with early childhood financial statement

Source	Amount
Early Childhood Federal Admin	\$0.00
Early Childhood State Admin	\$0.00
School Ready-Preschool	\$7,939.40
School Ready-Quality	\$54,151.27

School Ready-Other/Undesignated	\$5,332.56
School Ready-Admin	\$0.00
Total	\$67,423.23

Optional: Other Funding Expended and Source

Source	Amount
	\$0.00

Total Funding

Total **\$67,423.23**

How Much Was Done or Produced (Output Measures)

- # of Contracts **21**
- # of Community collaboration meetings convened **24**
- # of community collaboration meetings attended (not hosted by the ECI Area Board) **56**
- # of statewide ECI Directors meeting attended **4**
- # of hours of professional development activities participated in pertaining to job duties **67**

How well did we do it (Quality/Efficiency Measures)

% of ECI area compliance with ECI office defined submissions within the requested timeframe (e.g., fiscal year budget, annual report, mid-year financial report, response to state **8** # Achieved Measure **8** # Possible **100.0%** %

surveys, all required performance
measures reported)

% of contracts monitored fiscally **21**
Achieved Measure

21
Possible

100.0%
%

% of contracts monitored
programatically **9**
Achieved Measure

21
Possible

42.86%
%

What Was the Change in Conditions for Those We Served (Outcome Measures)

% of contracts that meet all areas of
service contract compliance: spending
on target, reports timely and
complete, outcome benchmarks
acheived **20**
Achieved Measure

21
Possible

95.24%
%

% of ECI Area board meetings that
meet quorum and adhered to Chapter
21 and 22 of Iowa Code **11**
Achieved Measure

11
Possible

100.0%
%

% of contracts monitored that did not
require corrective action **20**
Achieved Measure

21
Possible

95.24%
%

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