



# ANNUAL REPORT



# Mission

To provide services from an avant-garde and comprehensive perspective to children and their families, creating community alliances, sensitive to cultural diversity, thus reaffirming our commitment to society.

# Vision

Puerto Rican Family, Inc. aspires to transform the lives of children, families and communities in a positive way, that transcends and impacts the multiple levels of society.

# Values

Equity  
Respect of Individuality  
Punctuality  
Responsibility  
Honesty  
Trust  
Justice  
Perseverance  
Organization  
Creativity  
Faith  
Freedom of Expression  
Communication  
Integrity  
Loyalty  
Unity  
Commitment

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# Goals

## Fiscal Government and Human Resources



We will maintain a governance, administrative, fiscal and human resources system that provides continuous and effective management and oversight that promotes high quality service delivery and continuous improvement.

## Family and Community



We will develop and strengthen meaningful connections between staff and families to promote the empowerment of parents as lifelong educators of their children by providing support, parenting strategies and opportunities that enable them to function responsibly and empowers them to be confident, responsive and successful adults.

## Health and Safety



We will maintain a culture of safety by providing positive learning environments where children achieve optimal development of their abilities, with the support and collaboration of families and the community.



## Education (School Readiness)



We will increase meaningful gains for children from birth to age five through nurturing relationships, learning experiences that promote enjoyment, developing values and building the knowledge to be successful in the future.

## ERSEA



We will promote positive daily attendance for all children to achieve success in school.

We will develop varied and innovative strategies to ensure that the program's assigned enrollment is reached and maintained.

## Health, Nutrition and Mental Health



We will provide families with access to medical, dental, nutrition and mental health services that contribute to keeping children and their families healthy.



## Message from the CEO

Dear colleagues and families:

Puerto Rico has suffered greatly because of natural disasters. Hurricanes, earthquakes, and other natural events have affected how we work, our communications virtual or in person, and we also see internal changes (not seen before) in our own personality.

Many of us feel anxious, with variations of moods, sometimes more angry or depressed, and we do not realize that much of these feelings are due to everything negative that we have endured.

We are aware that there are resources available, but out of grief we may think that others need them more and we do not use those tools that can help us reflect on our skills or need for wellness. We are hopeful that everything will improve and we can adapt a positive view to overcome these difficult times. We don't know what the next year or the next decade may bring, but we can count on our dedication to do our best in any situation.

We all serve and are in a supportive community. It doesn't matter where we live, but we feel the support, the effort, the active communication with this community of employees and customers called Puerto Rican Family Institute, Inc.

I am very proud to be part of this community of employees who are not only dedicated to our mission, but also provide support without prejudice for everyone. Their dedication to providing the best services and the highest levels of hospitality, which our organization is constantly recognized for, is not only appreciated by all of us who work here, but also by our partnering government agencies.

Once again, my sincere thanks for always doing an excellent job.

Greetings to all,

Luis

# Board of Directors

2021-2022

Mildred Allen, Ph.D.  
President

Sonia Villanueva  
1st Vice President

John Robert  
2nd Vice President

Manuel Méndez  
Treasurer | Finance Committee President

Angelina Cabrera  
Secretary | Nominating Committee President

Ann Marie Vázquez  
Nominating Committee President

María Dávila-Peguero  
Foundation's President

Johanna A. Decelleri  
Secretary

Patricia Stryker  
Devel. Committee President

Michael Khodadadi  
Board Member

# Policy Council

Janneshka Angleró | President

Centro Jardines de Río Grande

Shirley Otero | Vice President

Centro Pitahaya II

Jenny Acero | Secretary

Centro Di Valore

Jomary Vélez | Delegate

Caguas, Centro Flamboyán

Yaritza Hernández | Delegate

Corozal, Centro Cuchillas

Jessica Ortiz | Delegate

Corozal, Centro Ecológico EHS

Natalie Carrillo | Delegate

Río Grande, Centro La Dolores

Luz Delgado | Delegate

San Juan, Centro Comandante I

Celia Vidal | Delegate

New York, Centro Bronx

Lorraine Cotto | Alternate Delegate

San Juan, Centro La Marina

Natacha Beltrán | Alternate Delegate

San Juan, Eider II

Carmen Álamo | Sub Secretary PR

Centro San Martin

Kiomara Santiago | Treasurer

Centro Ruiseñor

Kionelly Soto | Sub Treasurer

Centro Ciales

Hilda Fulgencio | Delegate

Fajardo, Centro Fajardo EHS

Wilmarie Pizarro | Delegate

Fajardo, Centro Fajardo

Maylin Ramos | Delegate

Naguabo, Centro Dagua

Jessica Delgado | Alternate Delegate

Caguas, Centro Flamboyán

Alba I. Colón | Alternate Delegate

Corozal, Centro Ecológico

Yuri Nevárez | Alternate Delegate

Río Grande, Centro Malpica

Jolnelly Escalera | Alternate Delegate

San Juan, Centro Oficina Central

Ruby Reyes | Alternate Delegate

New York, Centro Bronx

# Budget 2021 - 2022

## Fund Distribution by Category

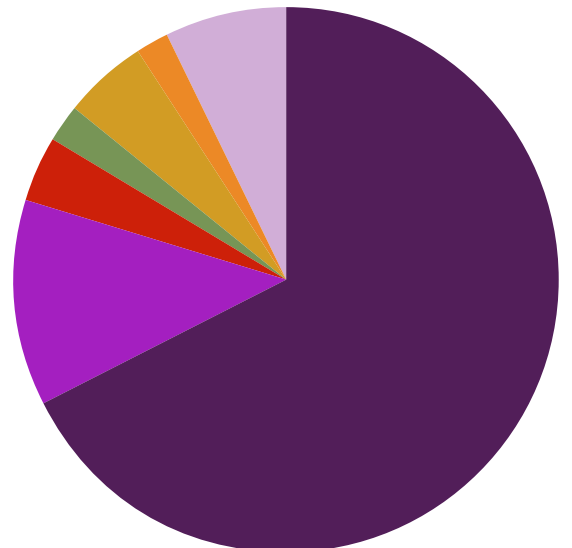


### Metro Central Area Early Head Start

|                                    |            |
|------------------------------------|------------|
| Salaries                           | \$ 668,968 |
| Fringe Benefits                    | \$ 122,534 |
| Equipment                          | \$ 0.00    |
| Materials                          | \$ 44,000  |
| Contracts                          | \$ 24,250  |
| Flights                            | \$ 0.00    |
| Other                              | \$ 45,640  |
| Indirect Costs                     | \$ 71,489  |
| Training /<br>Technical Assistance | \$ 20,431  |



- Salaries
- Fringe Benefits
- Materials
- Contracts
- Other
- Trainings/ Technical Assistance
- Indirect Costs



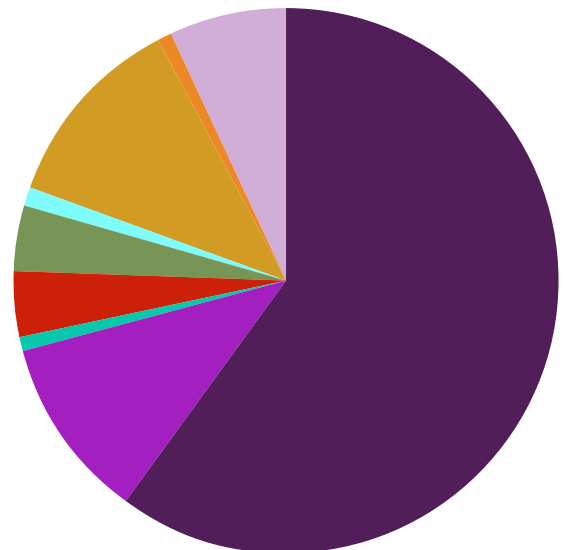


## Metro Central Area Head Start

|                                    |              |
|------------------------------------|--------------|
| Salaries                           | \$ 5,760,100 |
| Fringe Benefits                    | \$ 1,039,586 |
| Equipment                          | \$ 20,000    |
| Materials                          | \$ 290,000   |
| Contracts                          | \$ 333,250   |
| Flights                            | \$ 15,000    |
| Other                              | \$ 1,095,044 |
| Indirect Costs                     | \$ 675,341   |
| Training /<br>Technical Assistance | \$ 103,188   |



- Salaries
- Fringe Benefits
- Equipment
- Materials
- Contracts
- Flights
- Other
- Trainings/ Technical Assistance
- Indirect Costs



# Budget 2021 - 2022

## Fund Distribution by Category



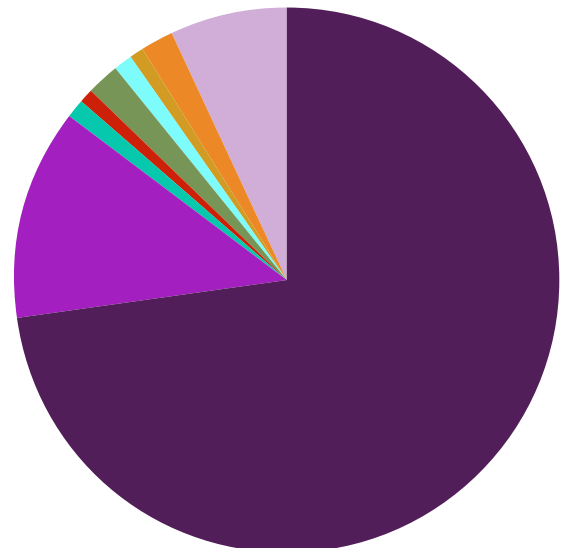
East Area

Early Head Start

|                                    |              |
|------------------------------------|--------------|
| Salaries                           | \$ 1,375,044 |
| Fringe Benefits                    | \$ 239,677   |
| Equipment                          | \$ 0.00      |
| Materials                          | \$ 6,500     |
| Contracts                          | \$ 30,730    |
| Flights                            | \$ 0.00      |
| Other                              | \$ 14,543    |
| Indirect Costs                     | \$ 131,586   |
| Training /<br>Technical Assistance | \$ 38,516    |



- Salaries
- Fringe Benefits
- Equipment
- Materials
- Contracts
- Flights
- Other
- Trainings/ Technical Assistance
- Indirect Costs





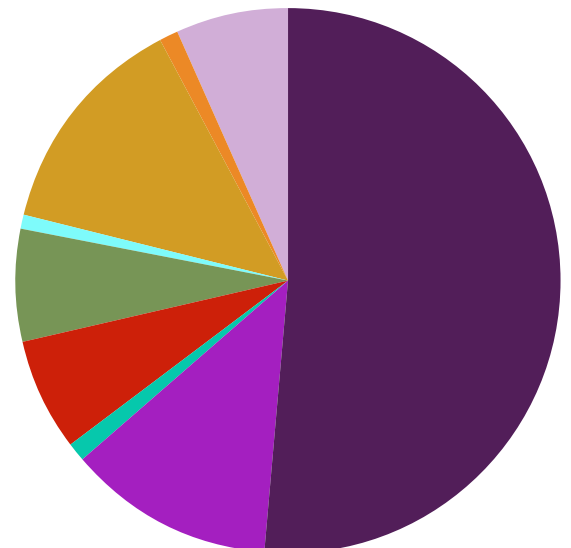


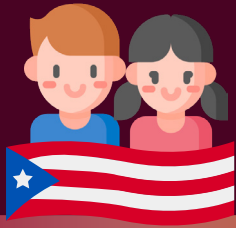
## East Area Head Start

|                                    |               |
|------------------------------------|---------------|
| Salaries                           | \$ 2,753,541  |
| Fringe Benefits                    | \$ 658,284    |
| Equipment                          | \$ 0.00       |
| Materials                          | \$ 200,000    |
| Contracts                          | \$ 350,050.00 |
| Flights                            | \$ 10,000     |
| Other                              | \$ 718,293    |
| Indirect Costs                     | \$ 370,334    |
| Training /<br>Technical Assistance | \$ 56,926     |



- Salaries
- Fringe Benefits
- Equipment
- Materials
- Contracts
- Flights
- Other
- Trainings/ Technical Assistance
- Indirect Costs





\$ 9,331,519

**Puerto Rico  
Head Start**

\$ 10,978

**Cost per Child  
Head Start**



\$ 2,672,105

**New York  
Head Start**



\$ 997,312

**Puerto Rico  
Early Head Start**

\$ 13,852

**Cost per Child  
Early Head Start**

\$ 3,211,523

**IN KIND  
Early Head Start & Head Start**



\$5,117,428

**Puerto Rico  
Head Start**

\$13,574

**Cost per Child  
Head Start**



\$1,836,596

**Puerto Rico  
Early Head Start**

\$12,754

**Cost per Child  
Early Head Start**

\$1,717,840

**IN KIND  
Early Head Start & Head Start**

# Additional Funds

|                                     | American<br>Rescue Plan<br>COVID | Ecological<br>Disaster<br>Assistance |
|-------------------------------------|----------------------------------|--------------------------------------|
| Salaries                            | \$ 63,700                        | \$ -0-                               |
| Fringe<br>Benefits                  | \$ 11,466                        | \$ -0-                               |
| Equipment                           | \$ -0-                           | \$ 872,000                           |
| Materials                           | \$ 1,318,349                     | \$ -0-                               |
| Contracts                           | \$ 135,450                       | \$ -0-                               |
| Flights                             | \$ -0-                           | \$ -0-                               |
| Construction                        | \$ -0-                           | \$ 1,426,972                         |
| Other                               | \$ 1,091,606                     | \$ -0-                               |
| Trainings /<br>Technical Assistance | \$ -0-                           | \$ -0-                               |
| Indirect Costs                      | \$ -0-                           | \$ -0-                               |

Disaster Assistance San Antón I

Disaster Assistance San Antón II

Disaster Assistance Support

\$ -0-

\$ -0-

\$ -0-

\$ -0-

\$ -0-

\$ -0-

**\$ 40,000**

**\$ 151,600**

\$ -0-

\$ -0-

**\$ 168,800**

\$ -0-

\$ -0-

\$ -0-

**\$ 166,000**

\$ -0-

\$ -0-

\$ -0-

**\$ 3,629,284**

\$ -0-

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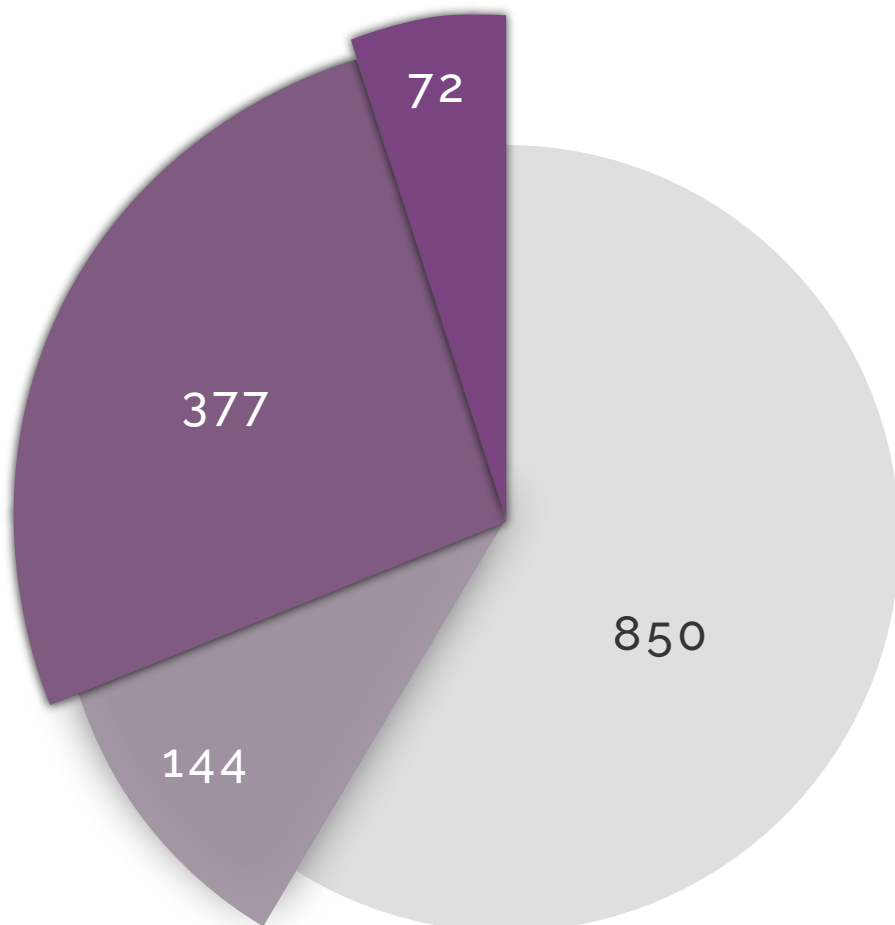
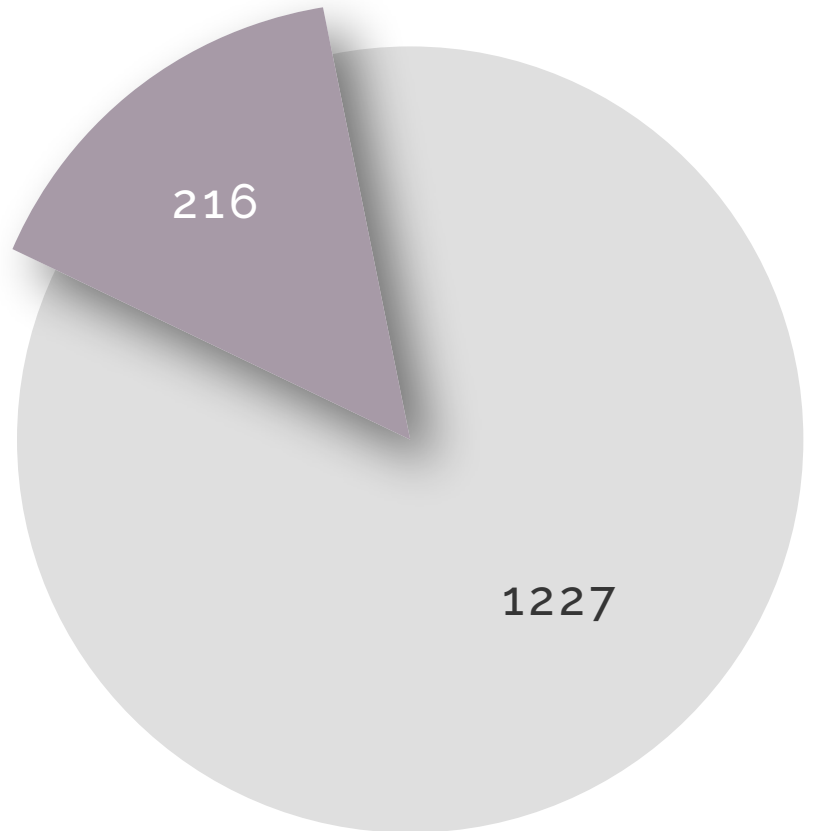


Enrollment

2021-2022

# Enrollment

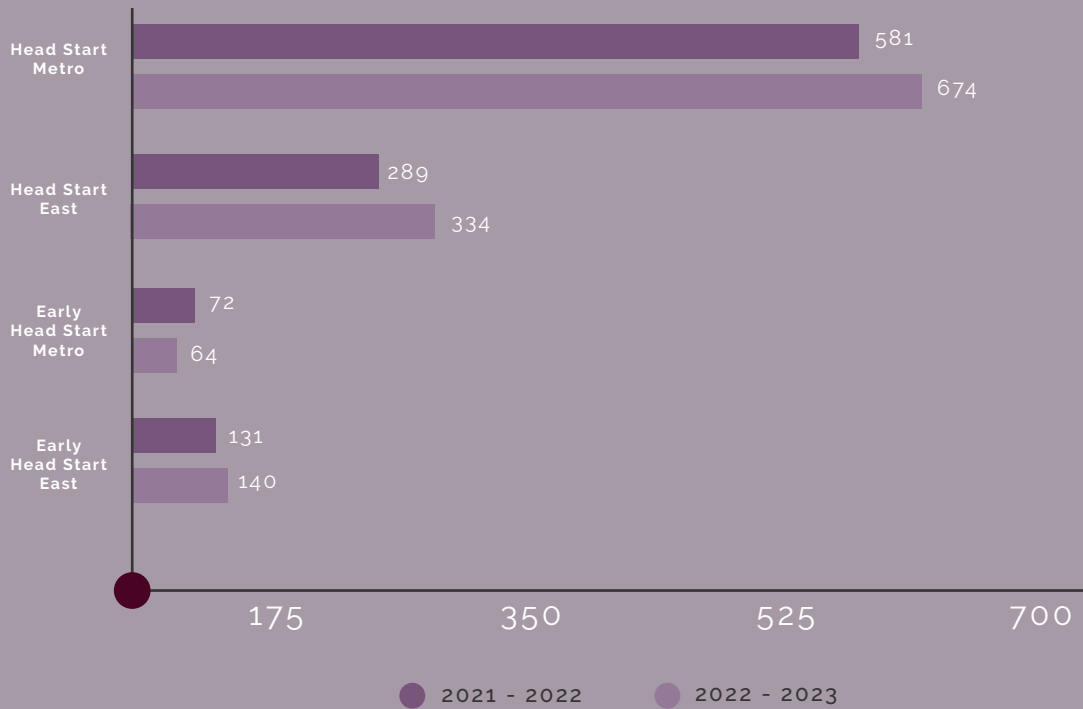
- Early Head Start
- Head Start



# Enrollment per Proposal

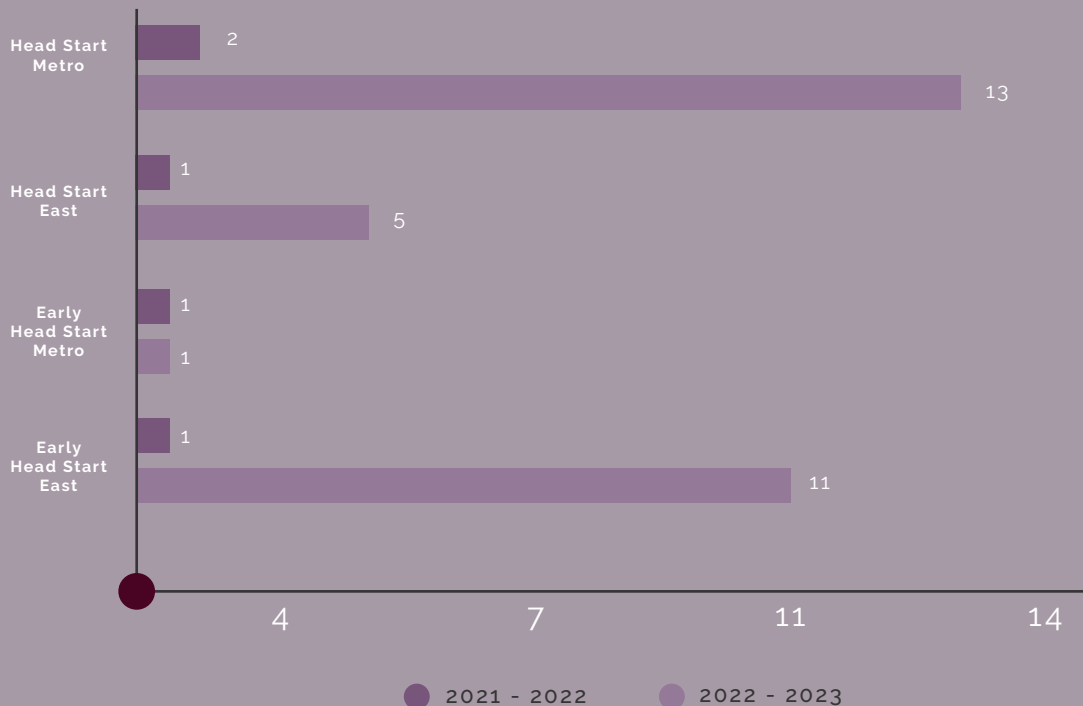
- Early Head Start Metro
- Early Head Start East
- Head Start East
- Head Start Metro

# Recruited Enrollment



# Wait List

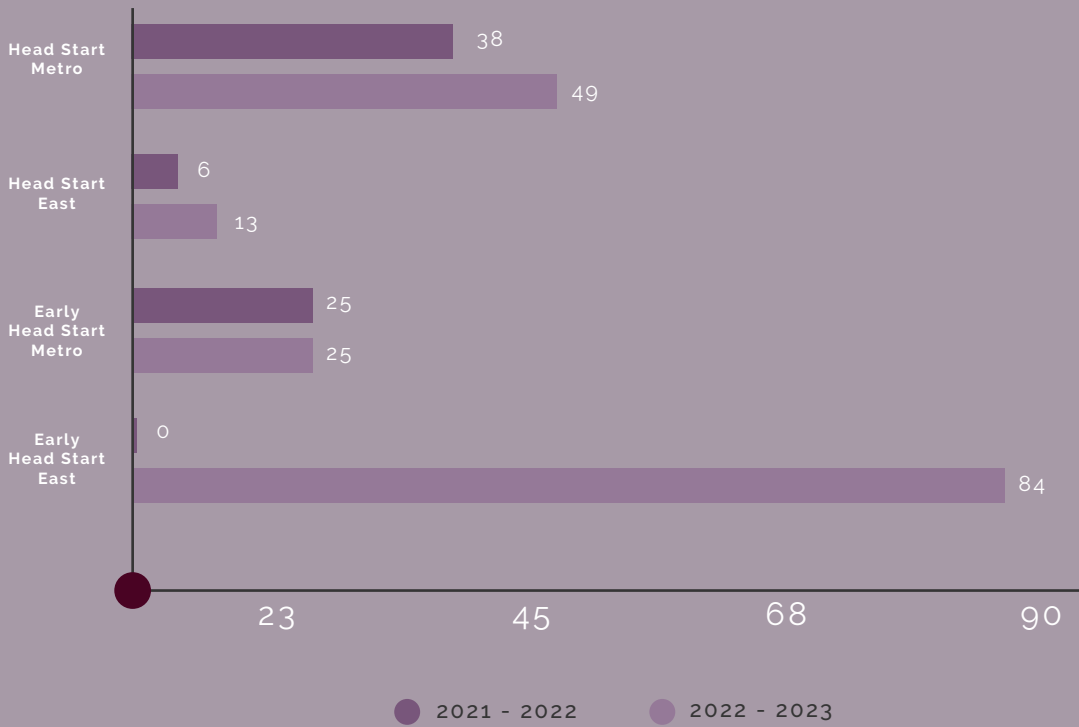
\*Wait list by september 13th





# New Applications

\*Potential candidates by september 13th



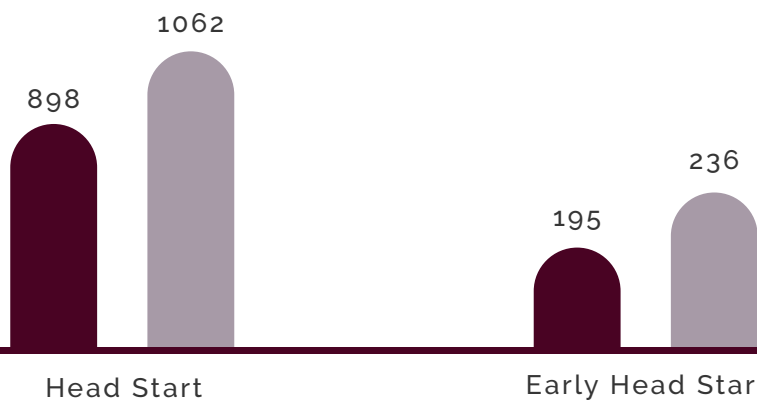






# Profile of Families Served

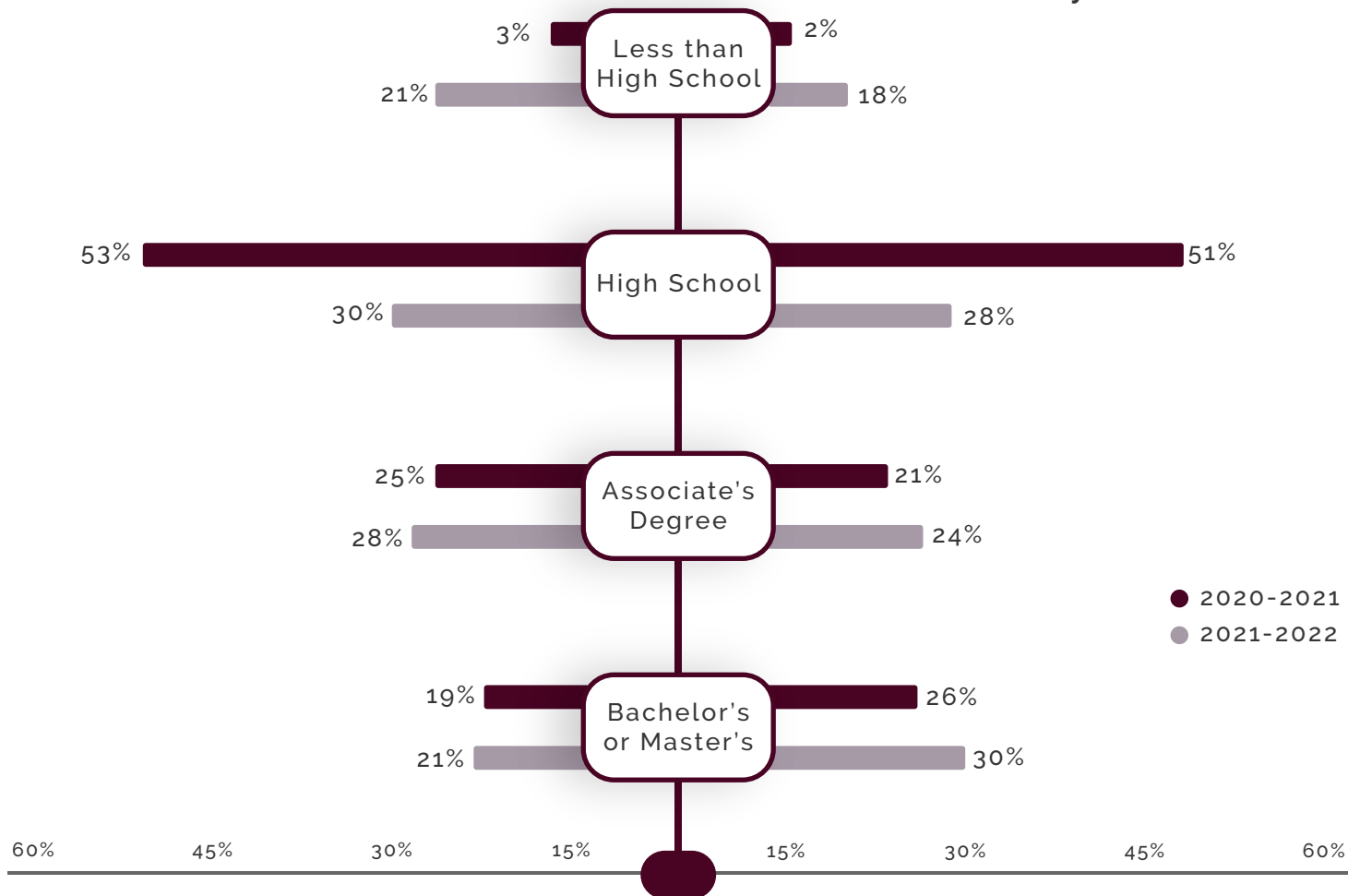
● Served families 2020-2021    ● Served families 2021-2022



## LEVEL OF EDUCATION OF THE FAMILIES

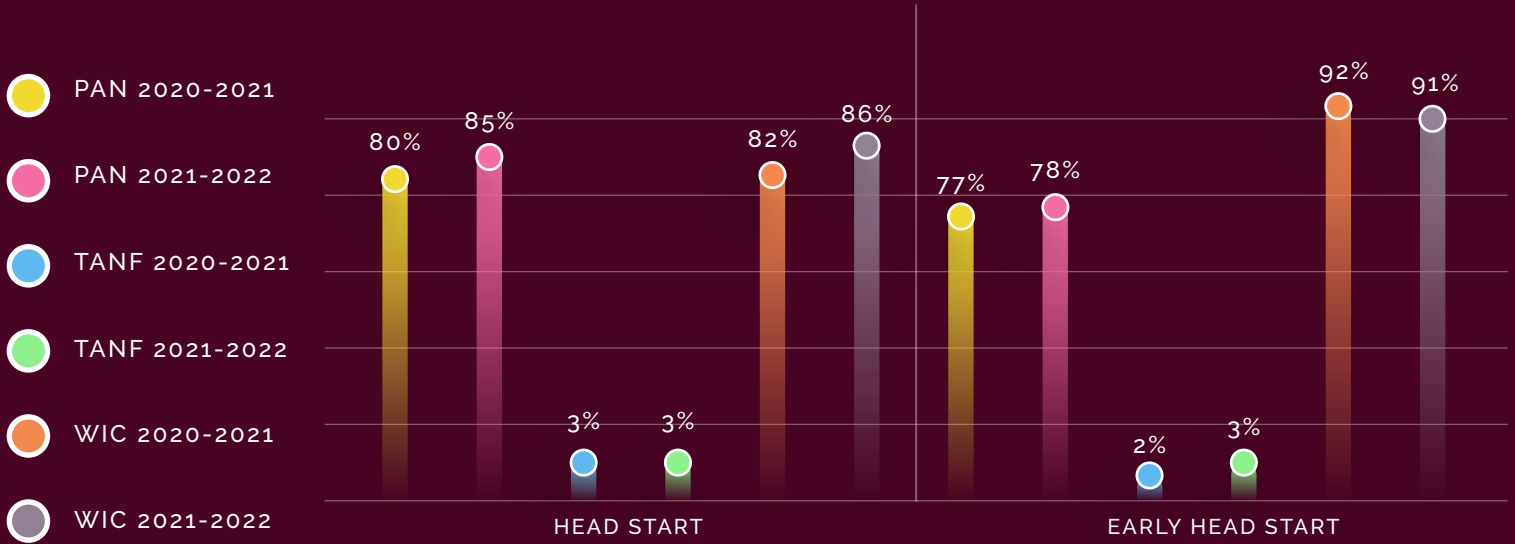
Head Start

Early Head Start



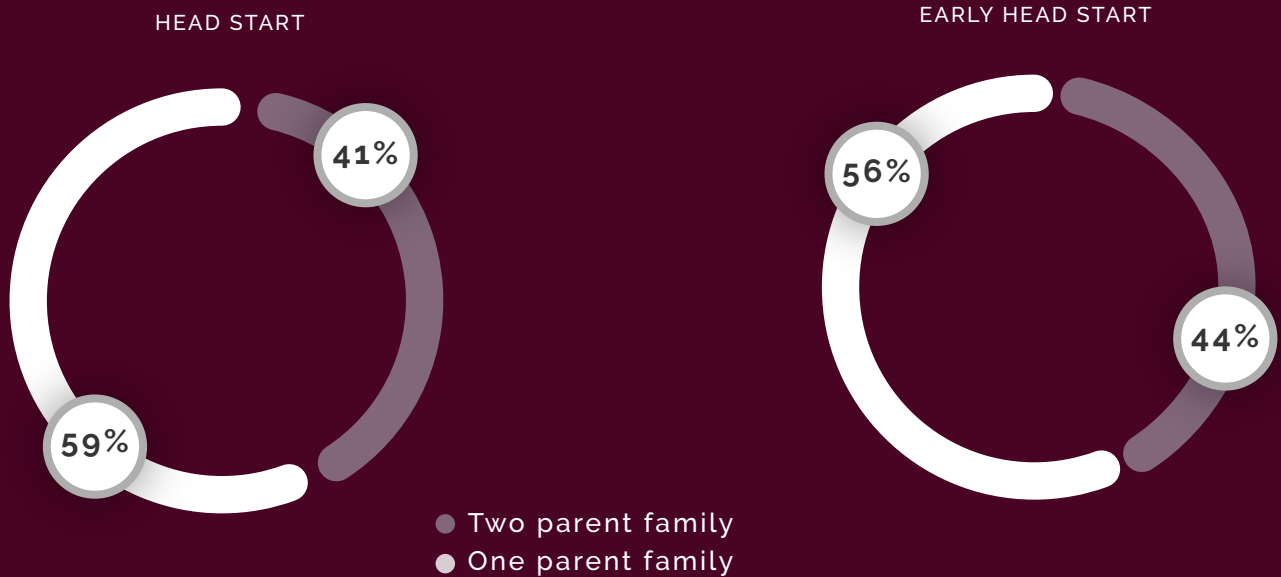
## GOVERNMENT FUNDS

2020-2021 y 2021-2022



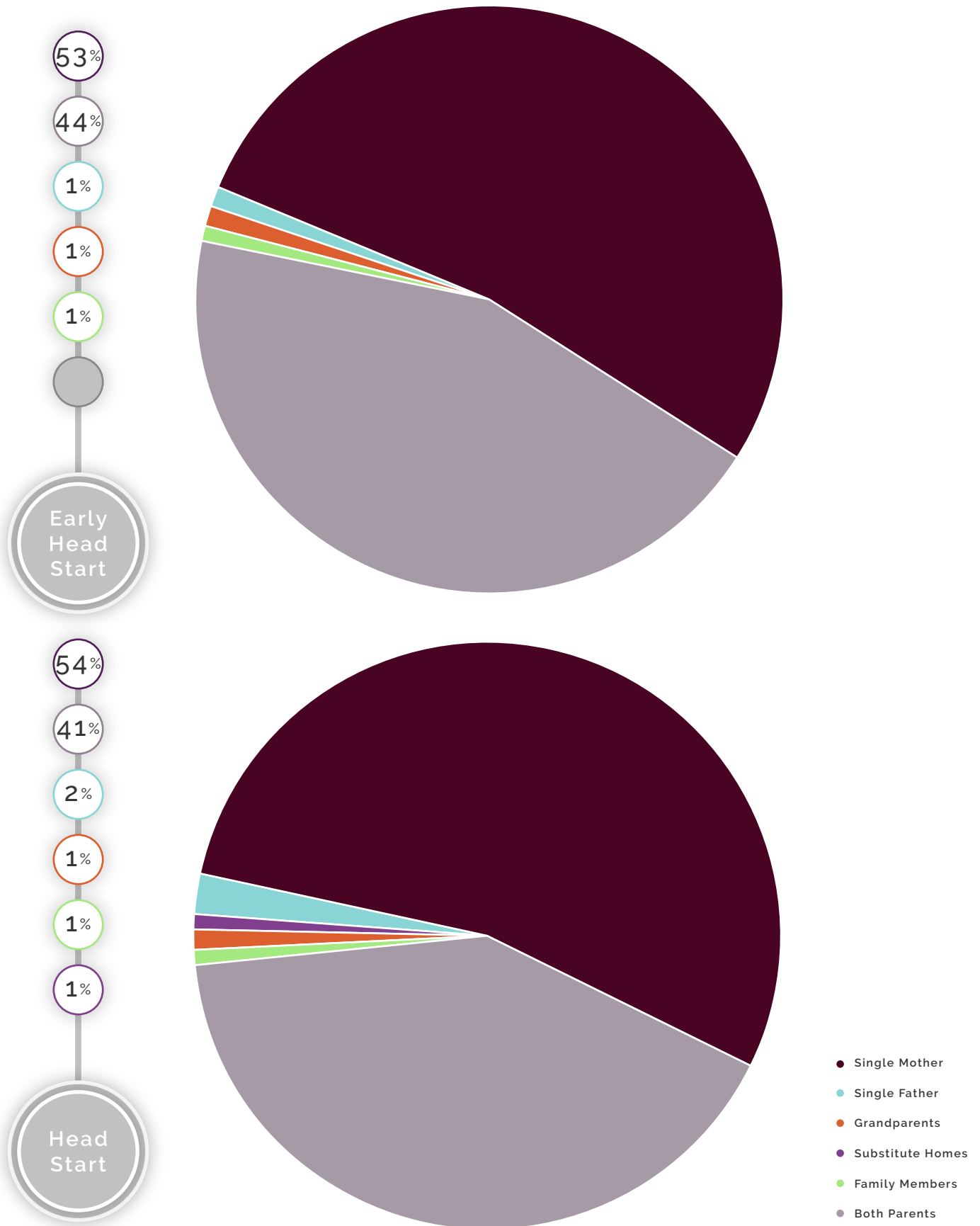
## FAMILY COMPOSITION

2021-2022



# PROFILE OF FAMILY COMPOSITION

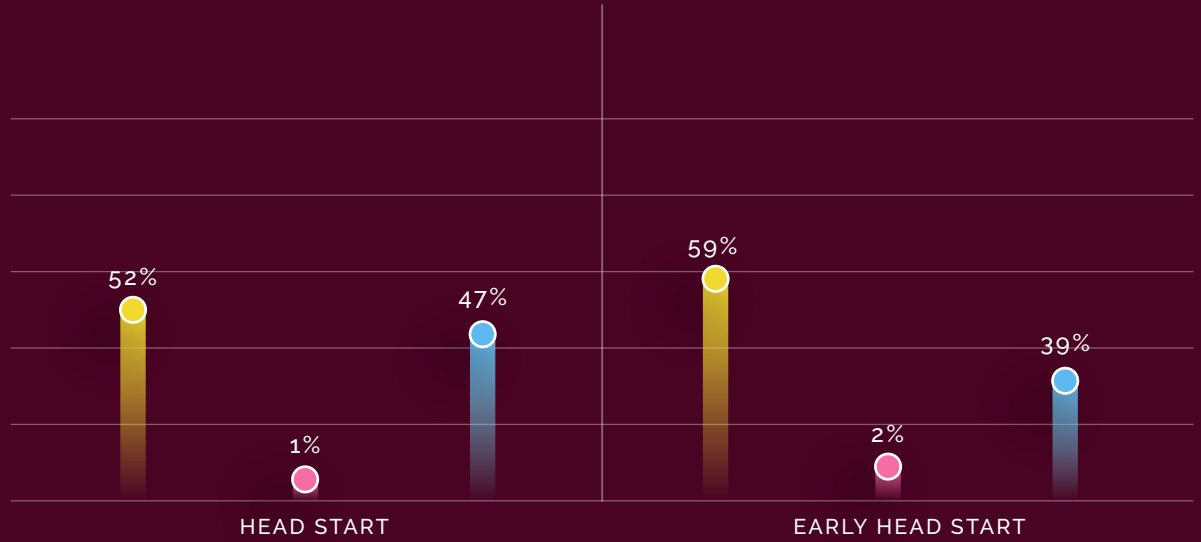
2021-2022



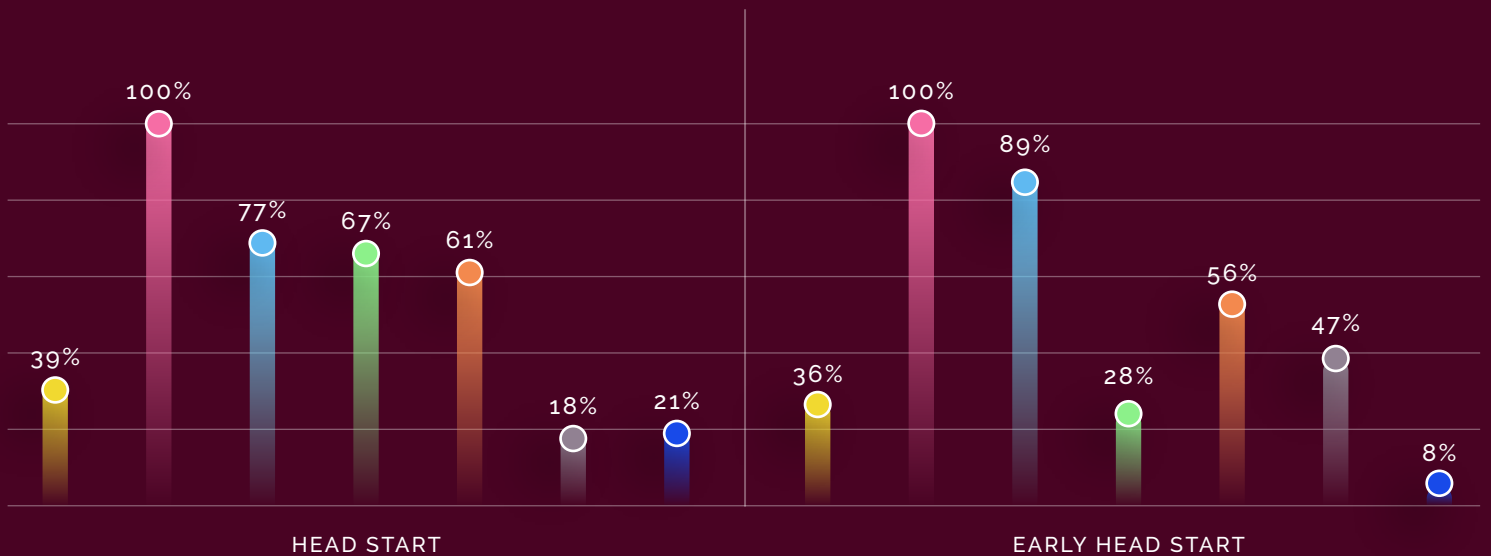
# EMPLOYMENT STATUS

2021-2022

- Employed
- Student
- Unemployed



# SERVICES OFFERED TO FAMILIES



- Crisis Emergency
- Academic Progress
- Transition Support
- Education in Health
- Education in Nutrition
- Adult Education
- Mental Health



# FAMILY RESULTS ACCORDING TO THE HEAD START PARENT, FAMILY, AND COMMUNITY ENGAGEMENT FRAMEWORK

## ACHIEVEMENTS OF FAMILIES IN HEAD START AND EARLY HEAD START 2021 - 2022

### Family wellbeing

Parents and families are safe, healthy and enjoy increasing financial stability.

|  | Head Start |       | Early Head Start |       |
|--|------------|-------|------------------|-------|
|  | Initial    | Final | Initial          | Final |
| Employment, skills, job training.                          | 2.5        | 2.7   | 2.5              | 2.8   |
| Income management, financial stability, and budgeting.     | 2.6        | 2.8   | 2.5              | 2.7   |
| Dental and medical care.                                   | 2.6        | 2.8   | 2.6              | 2.9   |
| Safety and efficiency at home, mental and physical health. | 2.7        | 2.9   | 2.8              | 2.9   |
| Access to food, meal preparation and healthy living.       | 2.8        | 3     | 2.9              | 3     |
| Access to transportation.                                  | 2.8        | 2.9   | 2.9              | 3     |

3.0 Strong- 2.0 In Progress - 1.0 Needs Assistance

### Positive Parent - Child Relationships

Parents and families develop close relationships that nurture their children's development and learning.

|                                 | Head Start |       | Early Head Start |       |
|---------------------------------|------------|-------|------------------|-------|
|                                 | Initial    | Final | Initial          | Final |
| Child behavior management.      | 2.4        | 2.7   | 2.3              | 2.9   |
| Spends quality time with child. | 2.5        | 2.9   | 2.4              | 2.9   |
| Active involvement with child.  | 2.4        | 2.8   | 2.2              | 2.9   |

3.0 Strong- 2.0 In Progress - 1.0 Needs Assistance

### Family engagement in transitions

Families encourage and advocate for their child's learning and development as they transition to new learning environments.

|                                     | Head Start |       | Early Head Start |       |
|-------------------------------------|------------|-------|------------------|-------|
|                                     | Initial    | Final | Initial          | Final |
| Understands the transition process. | 2.3        | 2.8   | 2.2              | 2.8   |

3.0 Strong- 2.0 In Progress - 1.0 Needs Assistance



## Families as life long educators

Parents and families observe, guide, encourage and participate in their children's daily learning at home, at school and in their communities.

Knowledge and skills to teach my child.

Knowledge and understanding of child development.

Reads with child and engages in other educational activities.

Communicates with child's teacher.

Supports educational plans for your child.

| Head Start |       | Early Head Start |       |
|------------|-------|------------------|-------|
| Initial    | Final | Initial          | Final |
| 2.4        | 2.7   | 2.5              | 2.9   |
| 2.3        | 2.6   | 2.2              | 2.7   |
| 2.4        | 2.7   | 2.2              | 2.9   |
| 2.5        | 2.9   | 2.3              | 2.9   |
| 2.4        | 2.8   | 2.2              | 2.9   |

3.0 Strong - 2.0 In Progress - 1.0 Needs Assistance

## Families as learners

Parents and families advance their own learning interests through education, training and other experiences that support their parenting, career and life goals.

Basic skills (cooking, budgeting, socializing, time management).

Educational level, continue or wish to study.

Communication skills (expressing oneself positively and effectively).

| Head Start |       | Early Head Start |       |
|------------|-------|------------------|-------|
| Initial    | Final | Initial          | Final |
| 2.7        | 2.9   | 2.7              | 3     |
| 2.5        | 2.7   | 2.5              | 2.7   |
| 2.6        | 2.8   | 2.3              | 2.9   |

3.0 Strong - 2.0 In Progress - 1.0 Needs Assistance

## Family connections to peers and community

Parents and families establish connections with peers, mentors and other community members through formal and informal social interaction networks.

Immediate and/or extended family support system.

Connected with other parents and families with young children.

Connection/support from other agencies and community services.

| Head Start |       | Early Head Start |       |
|------------|-------|------------------|-------|
| Initial    | Final | Initial          | Final |
| 2.6        | 2.8   | 2.5              | 2.8   |
| 2.2        | 2.5   | 2.1              | 2.5   |
| 2.6        | 2.8   | 2.5              | 2.9   |

3.0 Strong - 2.0 In Progress - 1.0 Needs Assistance

# Families as advocates and leaders

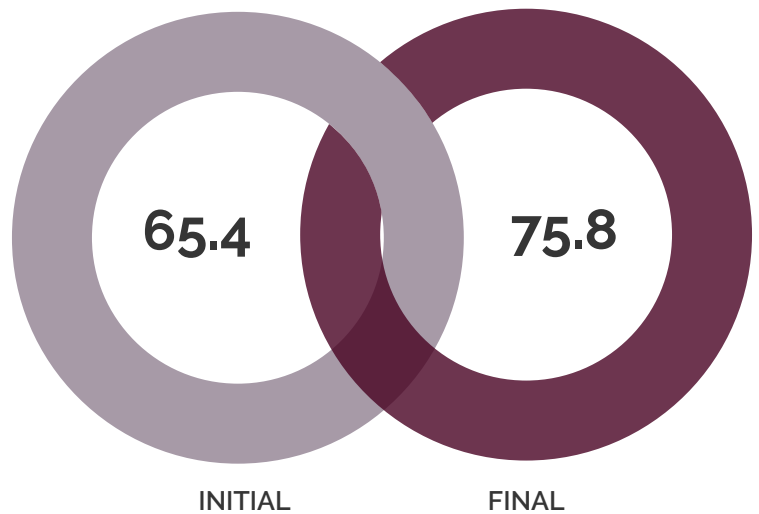
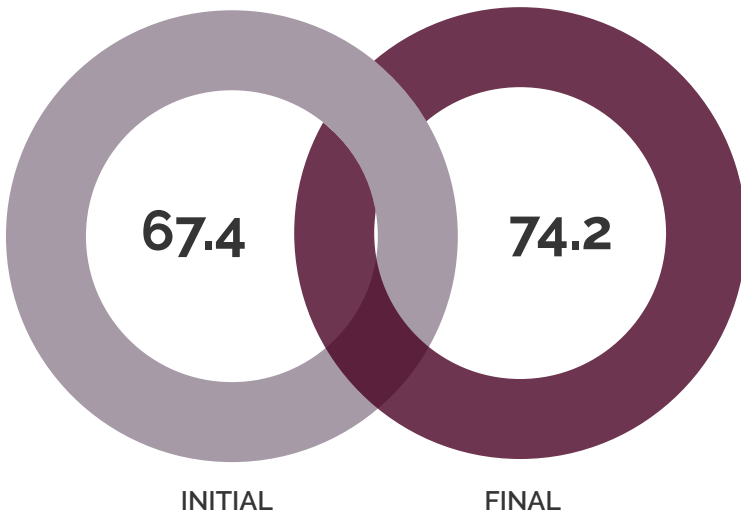
Families advocate on behalf of their children and play leadership roles in Head Start and Early Head Start. They participate in decision making, policy development, and organizing activities in communities to improve children's safety, health, development, and learning experiences.

|   | Head Start |       | Early Head Start |       |
|---|------------|-------|------------------|-------|
|   | Initial    | Final | Initial          | Final |
| Involvement in the child's education.   | 2.4        | 2.8   | 2.2              | 2.9   |
| Feels confident speaking up for child and family and making decisions.                    | 2.7        | 2.9   | 2.6              | 3     |
| Interested in learning about the program, leadership opportunities and volunteer work.    | 2.3        | 2.4   | 2.1              | 2.4   |
| Involved in activities, leadership and spokespersonship with other parents and community. | 2.2        | 2.4   | 2.1              | 2.3   |
| Knowledge of state and federal issues impacting children and families .                   | 2.2        | 2.5   | 2.3              | 2.8   |

3.0 Strong - 2.0 In Progress - 1.0 Needs Assistance



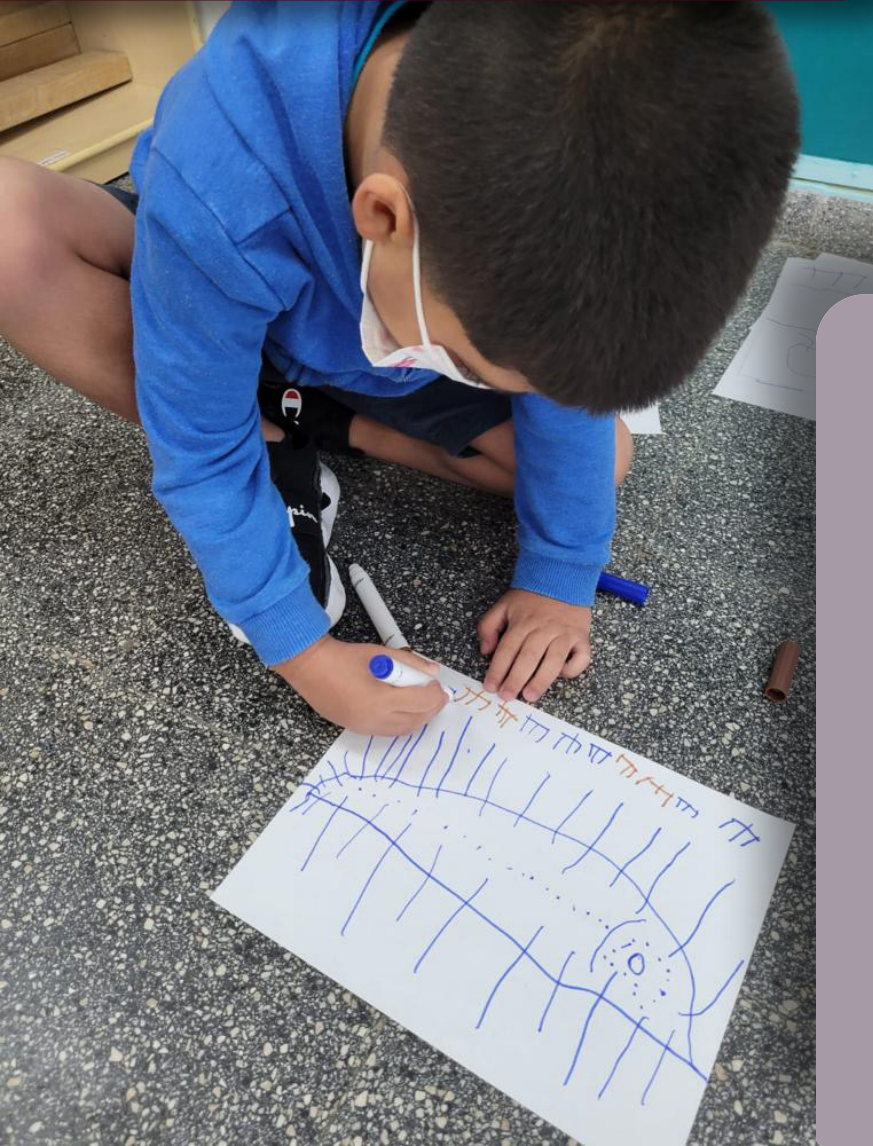
## TOTALS



Families in Head Start and EHS reflected gains in all family outcome assessment items.

At the first time for Head Start it was **67.4%** and at the third time point it was **74.2%** for Early Head Start the first time point was **65.4%** and at the third time point it was **75.8%**

Head Start had a gain of **6.5%** and Early Head Start a gain of **10.2%**. Based on these results, families made progress toward the goals they set for themselves and their children in all areas of family engagement according to the Family Engagement Framework.





# Nutrition

The Head Start and Early Head Start Program receives funding from the U.S. Department of Agriculture (USDA) through the Child and Adult Care Food Program (CACFP). These funds are used to primarily cover food costs. The menus served in the program are in compliance with the meal patterns established by USDA according to age groups. A variety of foods are provided including fruits and vegetables, increasing the consumption of whole grains, less added sugars and saturated fats. The consumption of local products such as papaya, pineapple, bananas, among others, is encouraged. In addition, guidance is provided on the regulations of the Civil Rights Act.

During March, Nutrition Month, activities were carried out under the slogan: **"Celebrate a world of flavors"** for children and their families.



## Results of weight and height screening

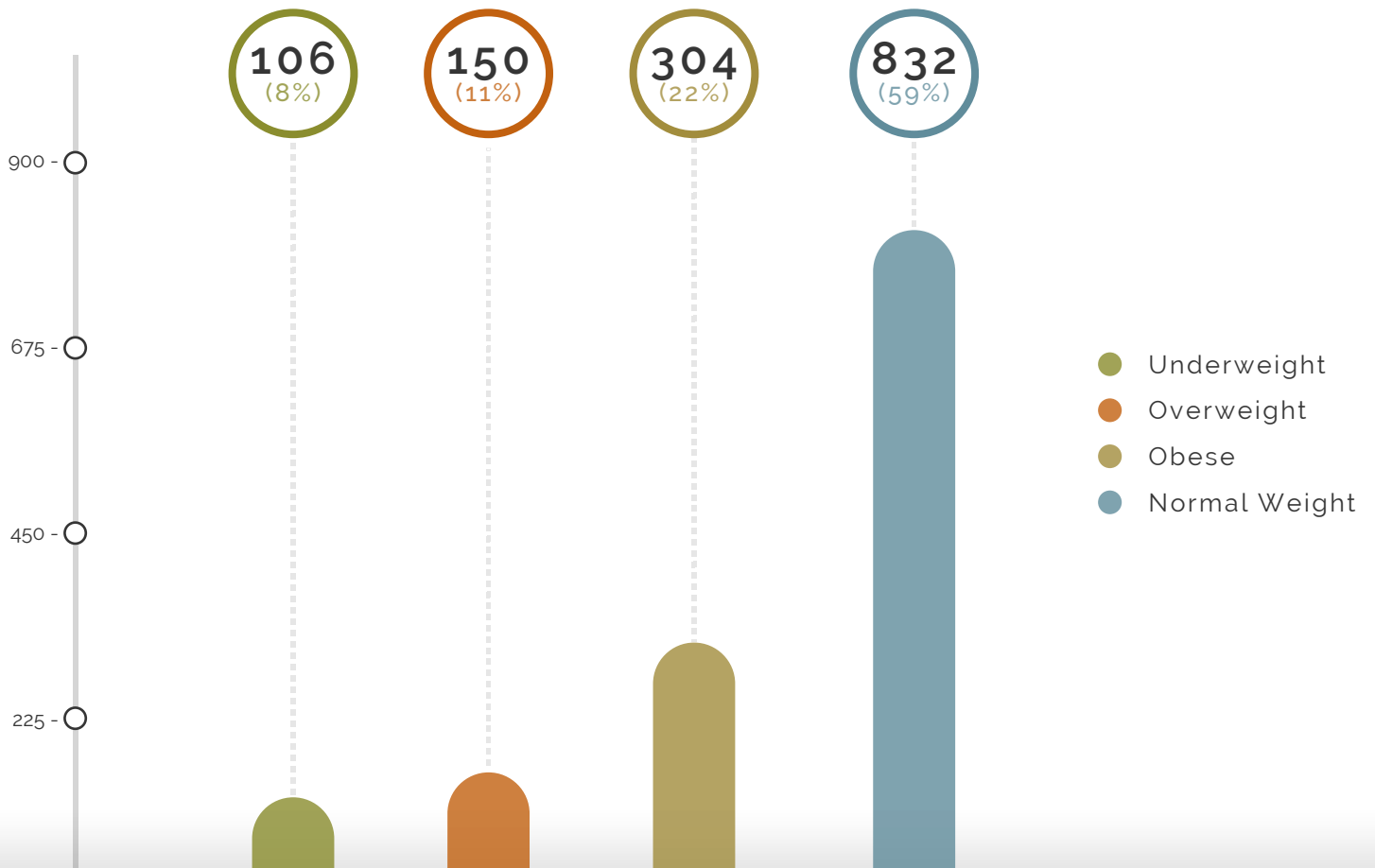
All participants are weighed and measured twice a year and growth charts are made to determine body mass indexes (IMC-BMI) that indicate whether children are within normal parameters or are underweight, overweight or obese. According to data from the Dept. of Health, the prevalence of obesity in children in PR fluctuates between 18% and 24%.

The food, nutrition and physical activity policy for PR includes the Healthy Eating and Physical Activity Guide for Puerto Rico 2021-2026 and Mi Plato for a Healthy Puerto Rico.

Total of children identified with overweight and obesity

Total children that overcame overweight and obesity

## Number of children by weight category.



Beginning of the Year

**454**  
(32%)

End of the Year

**346**  
(24%)

**108**  
(8%)

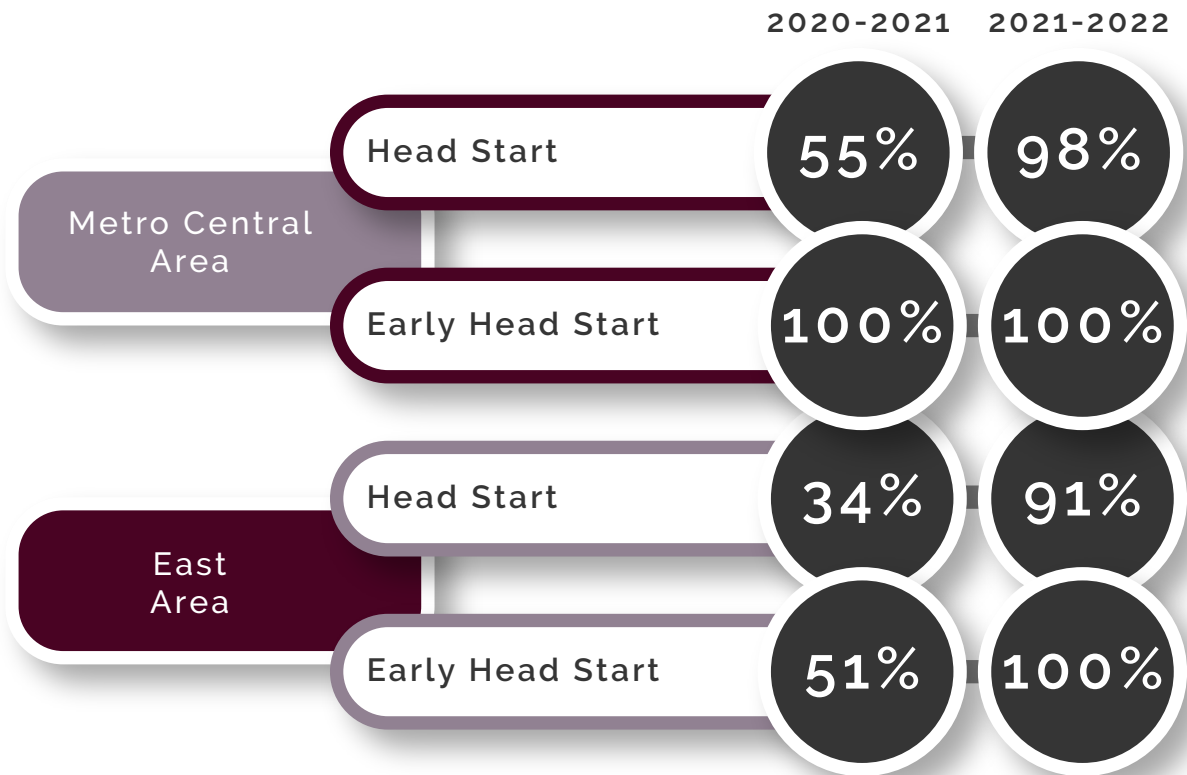
By the end of the year, the number of overweight and obese children had dropped from 32% (454) to 24% (346), an 8% reduction.

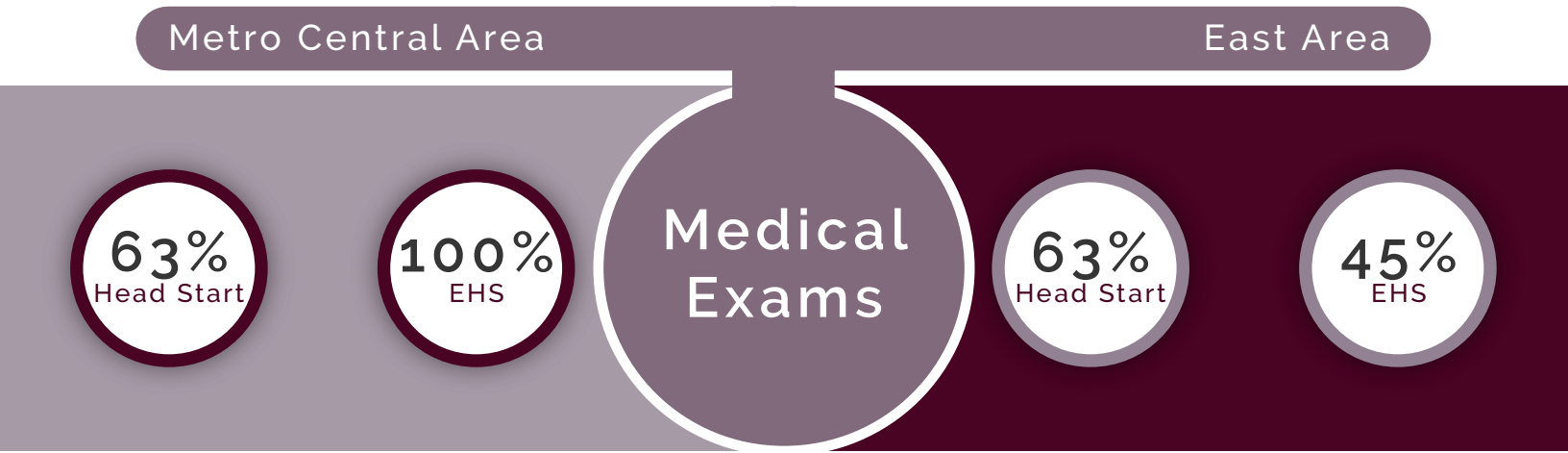
# Medical Dental Health



During the 2021-2022 school year the health area served the EHS East, EHS Metro, HS East and HS Metro centers.

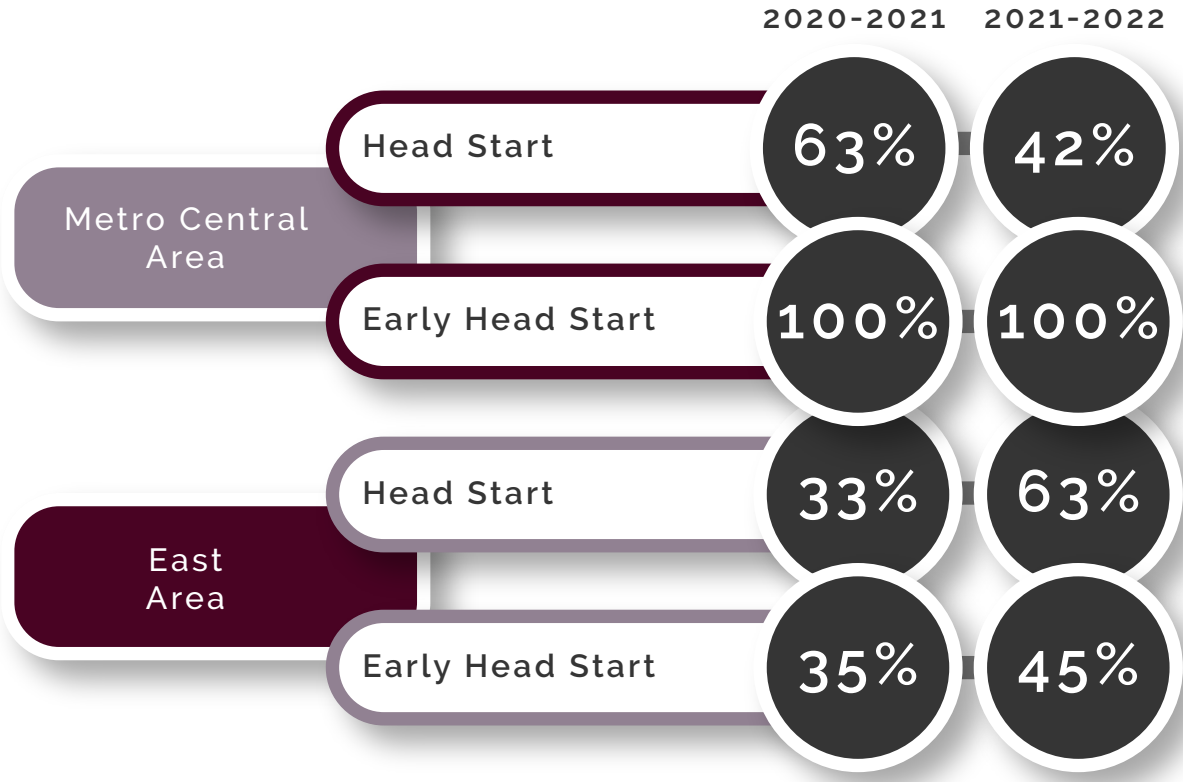
The level of compliance with respect to health insurance showed a significant improvement when comparing the years 2020-2021 and 2021-2022:





When comparing the years 2020-2021 and 2021-2022 the EHS East, EHS Metro, and HS Centers showed significant changes in the delivery of medical exams performed to enrollment.

The medical exams performed at the East and Metro centers were as follows:



Metro Central Area

East Area

# Dental Exams

59%

Head Start

100%

EHS

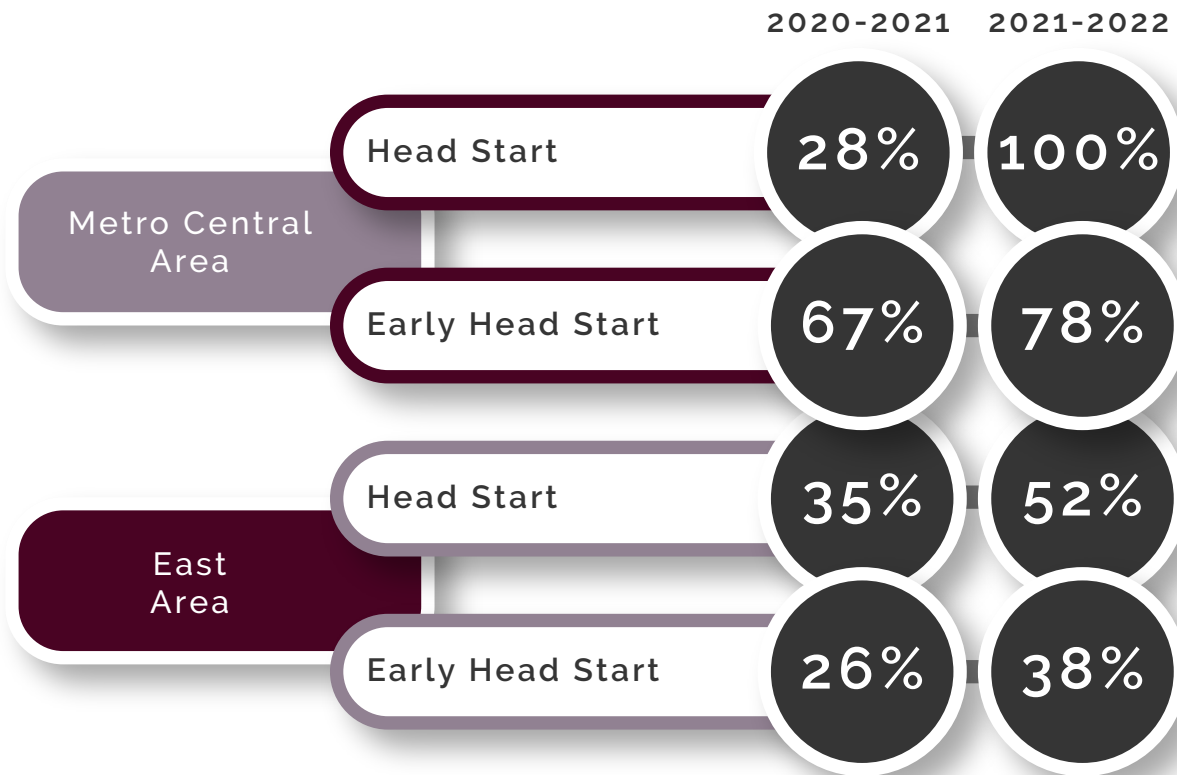
63%

Head Start

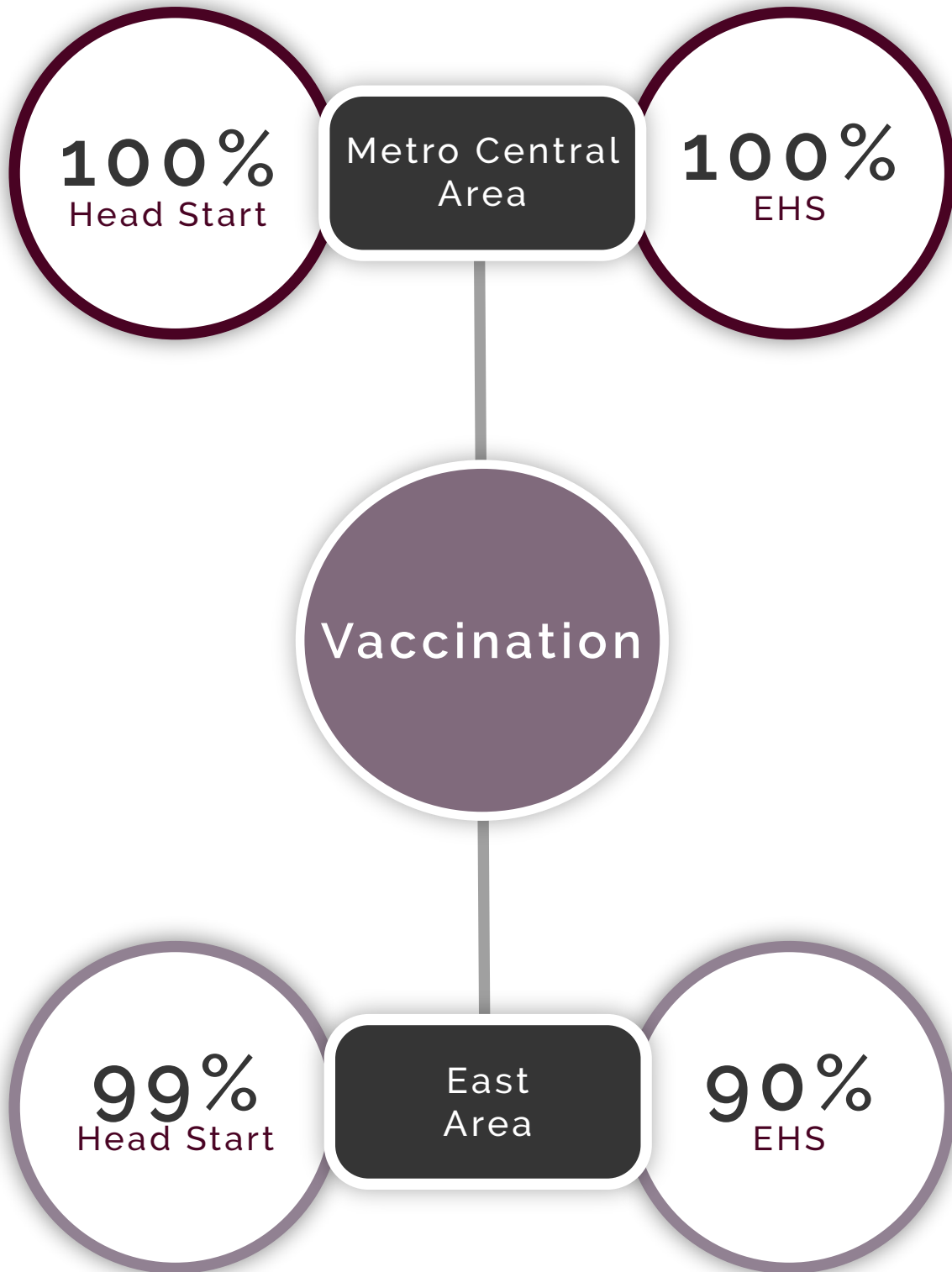
38%

EHS

Dental examinations performed at the East and Metro centers were as follows:







**100%** of Head Start Metro children were appropriately immunized for their age.

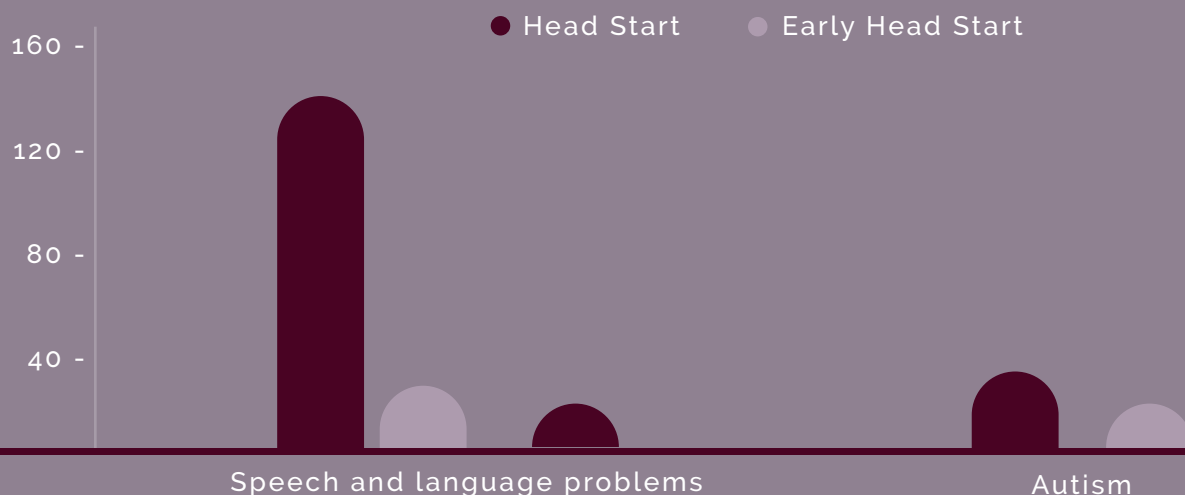
**100%** of Early Head Start Metro children were appropriately immunized for their age.

**99%** of Head Start East children were appropriately immunized for their age.

**90%** of the children in Early Head Start East were appropriately immunized for their age.

# Special Needs and Mental Health

## Metro Central Area

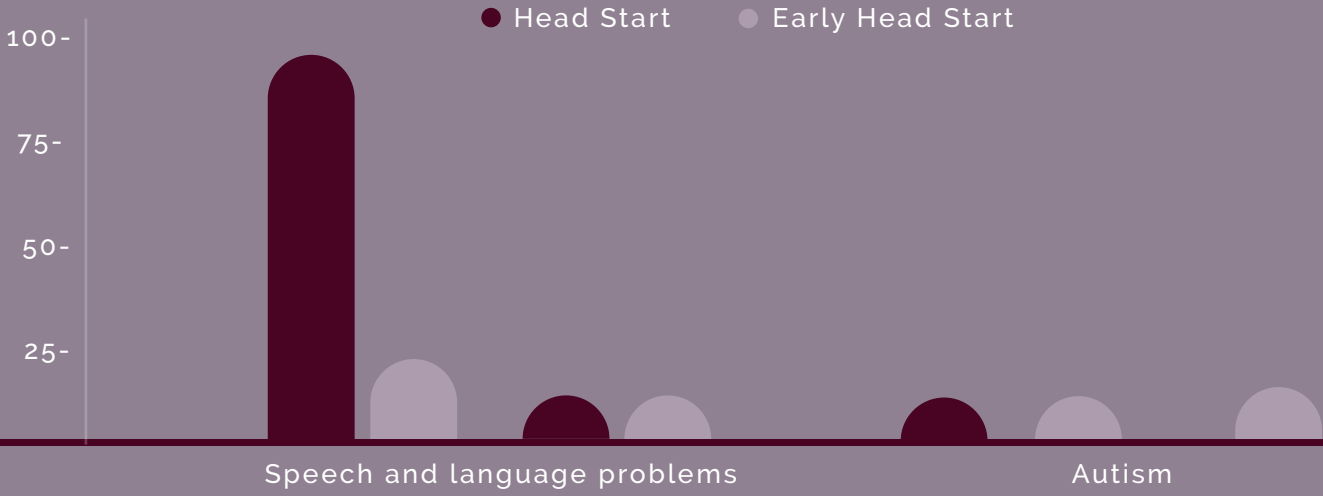


### Mental Health

|   | EHS        | HS         |
|---|------------|------------|
| Children who merited services in MH         | 17         | 255        |
| Families who merited services in MH         | 10         | 89         |
| Children referred to external MH services   | 0          | 25         |
| <b>Total Mental Health services offered</b> | <b>17</b>  | <b>255</b> |
| <b>Total %</b>                              | <b>21%</b> | <b>33%</b> |

During the year 2021-2022, the Special Needs Children Services Area of the Puerto Rico Head Start Program served a total of 248 children. Of these children identified and referred, 22%, or 173 children, qualified within the eligibility criteria established by the Department of Education. A total of 17 children were served in Early Head Start. Of these children identified and referred, 15% or 12 children qualified within the eligibility criteria established by the Early Intervention Program, Department of Health.

# East Area



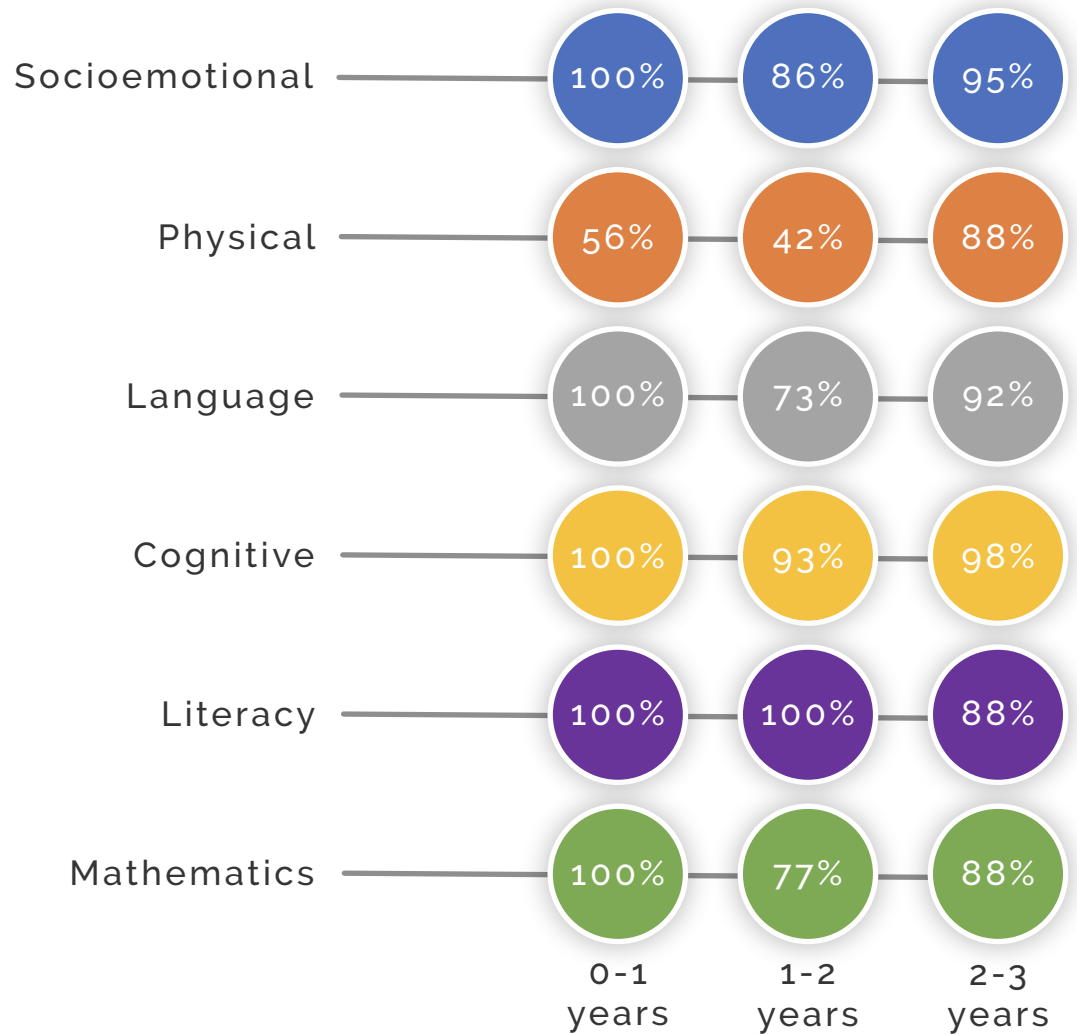
| Mental Health                               |  | EHS        | HS         |
|---|--|------------|------------|
| Children who merited services in MH         |  | 40         | 133        |
| Families who merited services in MH         |  | 8          | 47         |
| Children referred to external MH services   |  | 0          | 8          |
| <b>Total Mental Health services offered</b> |  | <b>40</b>  | <b>133</b> |
| <b>Total %</b>                              |  | <b>25%</b> | <b>36%</b> |

During the year 2021-2022, the Special Needs Children's Services Area of the Puerto Rico Head Start Program served a total of 124 children. Of these children identified and referred, 30% or 109 children qualified within the eligibility criteria established by the Department of Education. A total of 37 children were served in Early Head Start. Of these children identified and referred, 18% or 29 children qualified within the eligibility criteria established by the Early Intervention Program, Department of Health.

# Analysis of Children's Outcomes



Early Head Start  
Metro Central  
Area

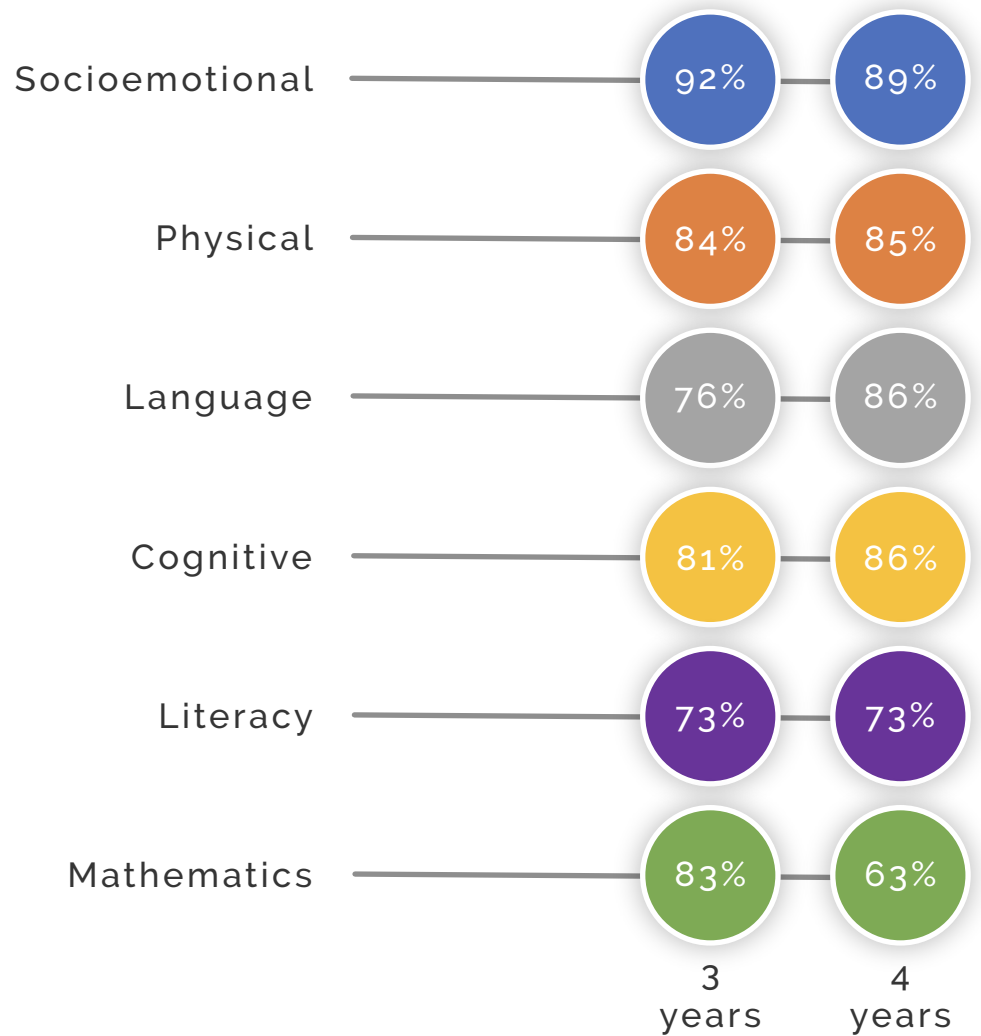


Children between the ages of 0 and 1 years maintained 100% achievement in most areas of development. However, a 30% decrease was observed in the area of physical development. A 24% increase was expected to meet or exceed the goal compared to the second half results.

The 1-2 year olds showed greater progress in the area of literacy development maintaining 100%. In the areas of socioemotional, physical, language, cognitive and mathematical development, a decrease was observed. In comparison with the results of the second half, the area of socioemotional development decreased by 14%, the area of physical development decreased by 44%, the area of language decreased by 27%, the cognitive area decreased by 7% and mathematics decreased by 23%.

Children between the ages of 2-3 years showed greater progress in the areas of development. The area of cognitive development showed the greatest progress with 98%. The area of language showed a significant increase of 92%. The areas of physical and literacy development increased to 88% compliance, a gain of 9%. The area of mathematics showed 88% compliance, increasing by 3%. However, the area of social-emotional development obtained 95% compliance, decreasing by 2%.

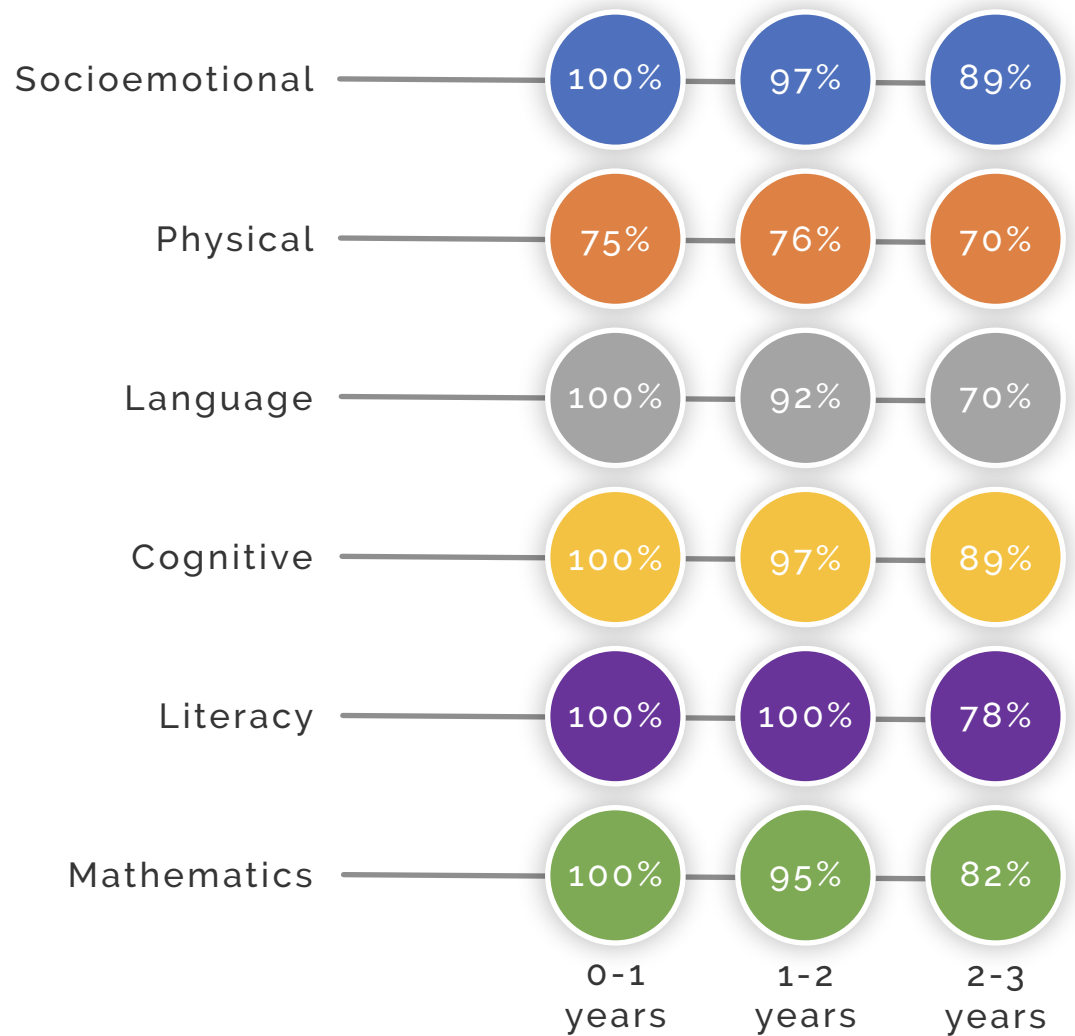
## Head Start Metro Central Area



The 3-year-old children showed a significant increase in all areas of development. The area that showed the greatest increase was the socioemotional area with 92%. In the other areas, despite an increase in the percentages, 85% compliance was not achieved in the third period.

The 4-year-old children showed a significant increase in all areas of development. The area that showed the greatest progress was the socioemotional area 89%, language and cognitive 86% and physical 85%. The areas of literacy 73% and mathematics 63% showed progress, but did not reach 85% compliance.

## Early Head Start East Area



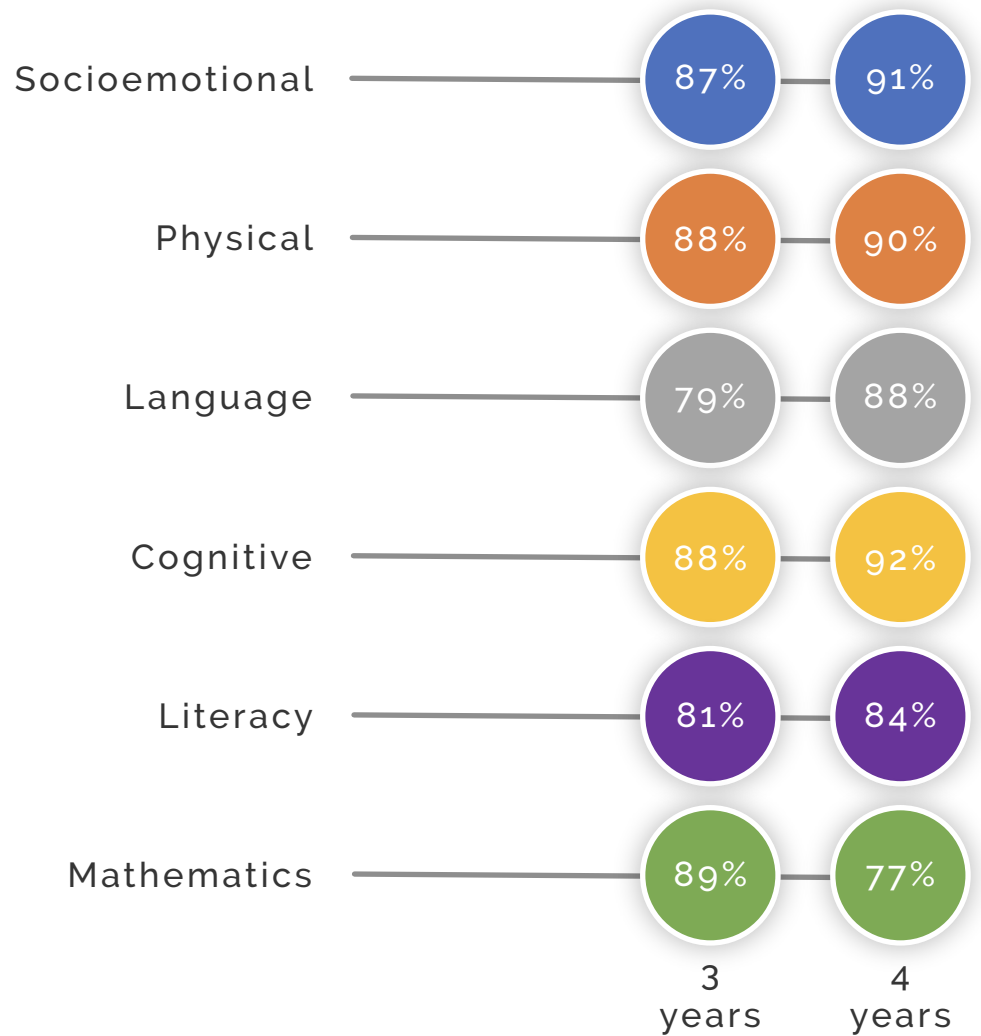
Children between the ages of 0 to 1 years obtained significant scores in all areas of development, with the exception of physical development where they obtained 75% compliance. This area had an increase of 42% compared to the first and third time.

The 1-2 year olds showed greater progress in the areas of literacy 100%, socioemotional and cognitive with 97%, mathematics 95% and language 92%. In the area of physical development compared to the first time a gain of 19% was obtained showing an increase of 76% compliance.

Children between the ages of 2-3 years showed progress in all areas of development. In the area of socioemotional and cognitive development 89%, mathematics 82%, literacy 78%, physical and language 70%. When comparing the results between the first time and the third time, significant gains were observed in all areas of development.



## Head Start East Area



The 3-year-olds show gains in all areas of development. The highest progress score was in the area of mathematics with 89% compliance. In the areas of physical and cognitive development, 88% and literacy 81%. The area of language development scored 79% compliance.

The 4-year-olds showed increases in all areas of development. They scored over 80% compliance. In the areas of cognitive development 92%, socialemotional 91%, physical 90%, language 88% and literacy 84%. The area of mathematics obtained 77% compliance, an increase of 24% compared to the first time.

# Needs Assessment

## Families & Community

The Head Start and Early Head Start Community Assessment is a process that involves the collection and analysis of information on the needs and characteristics of eligible children and families in the geographic area served by each grantee. It also includes the resources available in the communities to meet the identified needs. This Community Study responds to Act 110-134 of December 12, 2007 (Head Start Reauthorization Act) and current regulation 1302.11(b) which requires HS Grantees to conduct this study every five (5) years as an important element of strategic planning. These studies identify significant changes in the needs of the families and communities served that may affect the program and services offered.

This Community Study will guide the Puerto Rican Family Institute in making decisions in the design and planning of its programs and services so that they respond to the needs of the communities served. The analysis of the information will be used by PUERTO RICAN FAMILY INSTITUTE, INC. - Puerto Rico Head Start and Early Head Start, for decision making in the following matters, as defined by the Performance Standards and the Head Start Act:

1. Establish the Grantee's philosophy.
2. Establish long/short term programmatic objectives.
3. Identify the types of services of greatest need in the communities served.
4. Make decisions on the service option to be implemented.
5. Establish the recruitment area.
6. Determine the appropriate location of the centers.
7. Establish criteria defining the types of children and families to be prioritized for recruitment and selection.
8. Decisions regarding corrective actions for under-enrollment.
9. Decisions regarding modification of service options offered because participants reflect the need for full-day and full-year services.
10. Determine transportation service needs for children and their families.
11. Identify expected outcomes for children, families, and communities to be served.

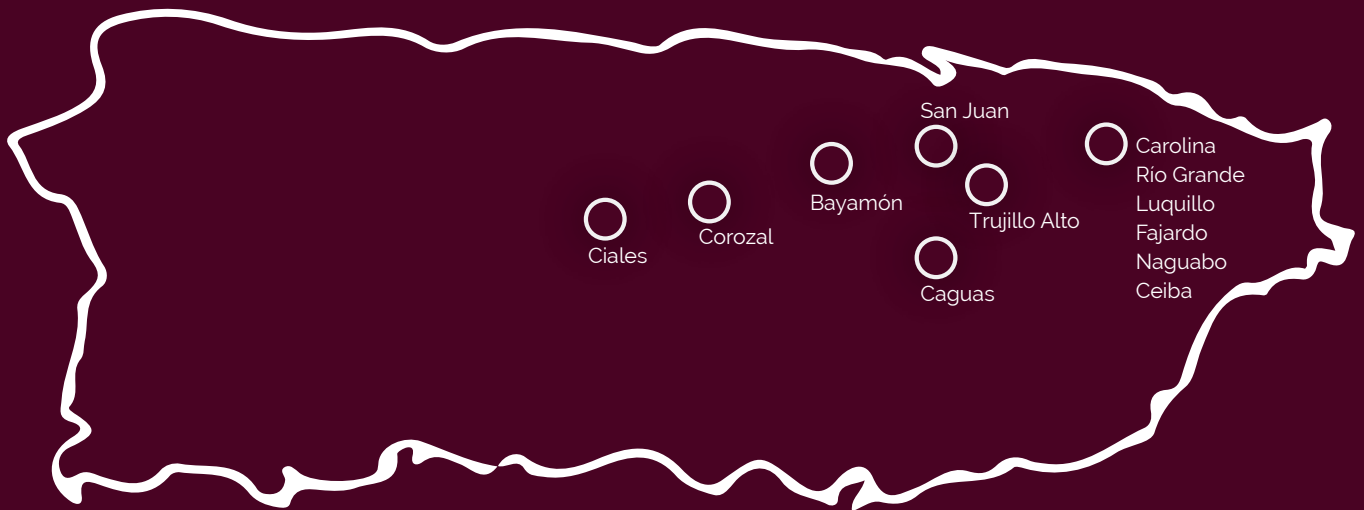
12. Develop Training and Technical Assistance Plans.
13. Evaluate the need to request additional funds for future expansion of services.
14. Identify needs to establish collaborative agreements with community agencies.
15. Identify areas in need of spokesperson services due to inadequate or non-existent services.

The following is the second review (Cycle II, 2022) of the 2020 - 2025 Comprehensive Community Assessment. This second review corresponds to the year 2022 and includes a summary of the most significant findings of the needs of families and the community in the twelve (12) municipalities served.

## GEOGRAPHIC AREA

Puerto Rican Family Institute (PRFI), Inc. provides Head Start (HS) and Early Head Start (EHS) services in rural and urban communities in twelve (12) municipalities of Puerto Rico in the Metro, Central and Eastern areas. The municipalities served are: Bayamón, Caguas, Carolina, Ceiba, Ciales, Corozal, Fajardo, Luquillo, Naguabo, Río Grande, San Juan and Trujillo Alto.

PRFI has an assigned enrollment in Puerto Rico of 1,443 children.



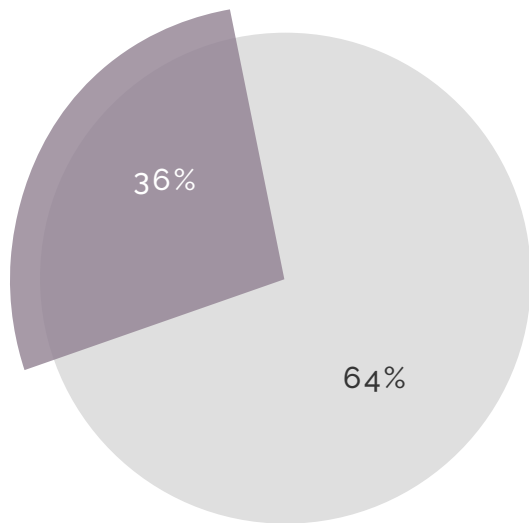
## GEOGRAPHIC AREA AND SERVICE PROGRAM

64% of the enrollment is assigned to the Metro-Central area and 36% to the East area. The assigned enrollment in the Metro-Central area is 922 children and in the East area it is 521 children. Head Start services are offered for an enrollment of 1,227 children, representing 85% of the assigned enrollment, and EHS services are offered for an enrollment of 216 children, representing 15% of the enrollment.

## ENROLLMENT DISTRIBUTION

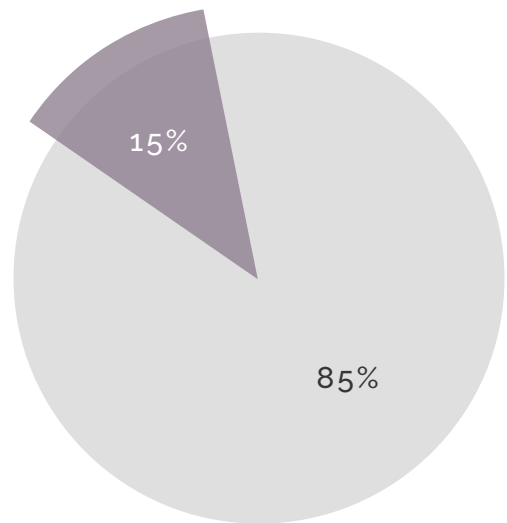
| AREA          | Enrollment<br>Head Start | Enrollment<br>EHS | TOTAL |
|---------------|--------------------------|-------------------|-------|
| METRO CENTRAL | 850                      | 72                | 922   |
| EAST          | 377                      | 144               | 521   |
| TOTAL         | 1,227                    | 216               | 1,443 |

### ENROLLMENT BY GEOGRAPHIC AREA



- Metro Central Area
- East Area

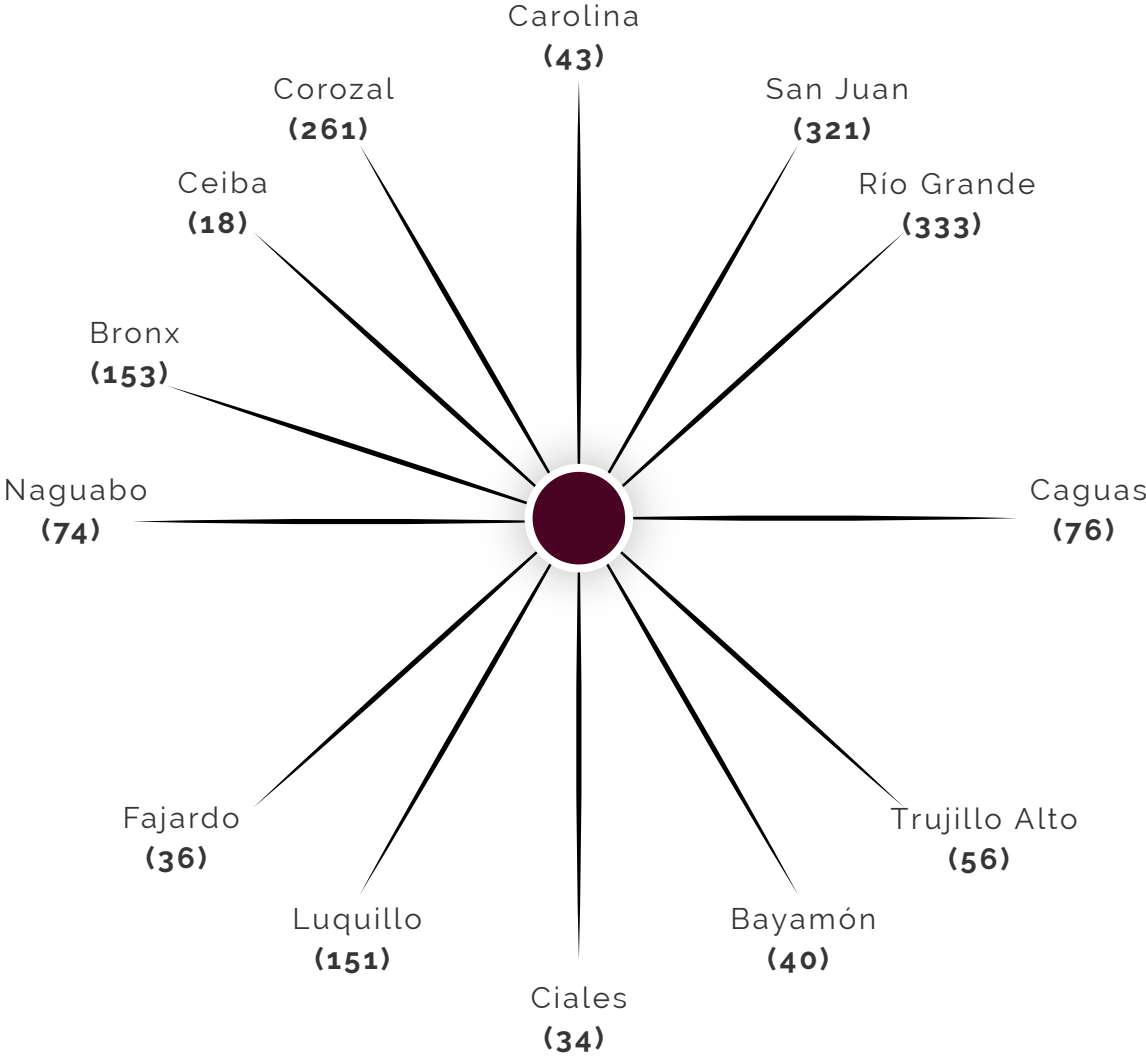
### ENROLLMENT BY SERVICE PROGRAM



- Head Start
- Early Head Start

## DISTRIBUTION OF ENROLLMENT BY MUNICIPALITY

23% of the assigned enrollment is in the municipality of Rio Grande, followed by the municipalities of San Juan with 22% and Corozal with 18%. 63% of the Program's enrollment is distributed among these three (3) municipalities.



In the past two (2) years, Rio Grande has positioned itself with 23% as the municipality with the highest number of assigned enrollment in the IFRP, showing a 3% growth in relation to 2019, when the percentage of enrollment in the Program was 20%. In contrast, the municipality of San Juan in the past 2 years has had a 3% reduction in assigned enrollment, dropping from 25% to 22%. However, the municipality of Corozal has increased its assigned enrollment from 16% in 2019 to 18% in 2022. This data is consistent with the findings of the 2020 comprehensive community study where we pointed to the municipality of Rio Grande as the municipality with the greatest opportunity for expansion of Program services.

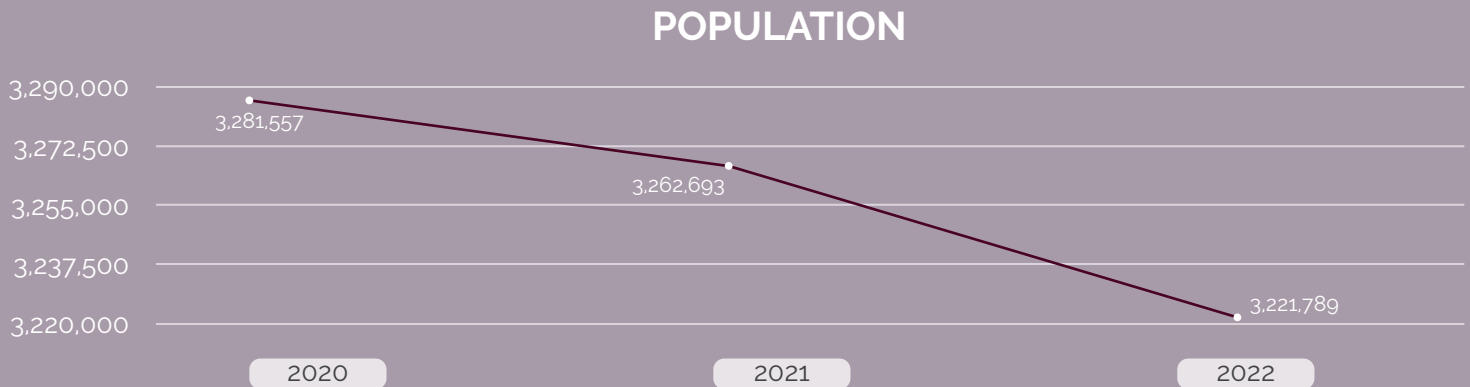
## AREAS OF OPPORTUNITY FOR EXPANSION OF EHS SERVICES

Of the municipalities served, the municipality of San Juan represents the greatest opportunity for offering EHS services. In the communities served by the program in the municipality of San Juan there are no nearby or adjacent EHS services, so offering these services to the community would address a need that is not being met by any Head Start or Early Head Start Recipient. PRFI efforts should be directed at centers comprised of multiple classrooms and public residential served to ensure Early Head Start to Head Start transitions and continuity of HS services.

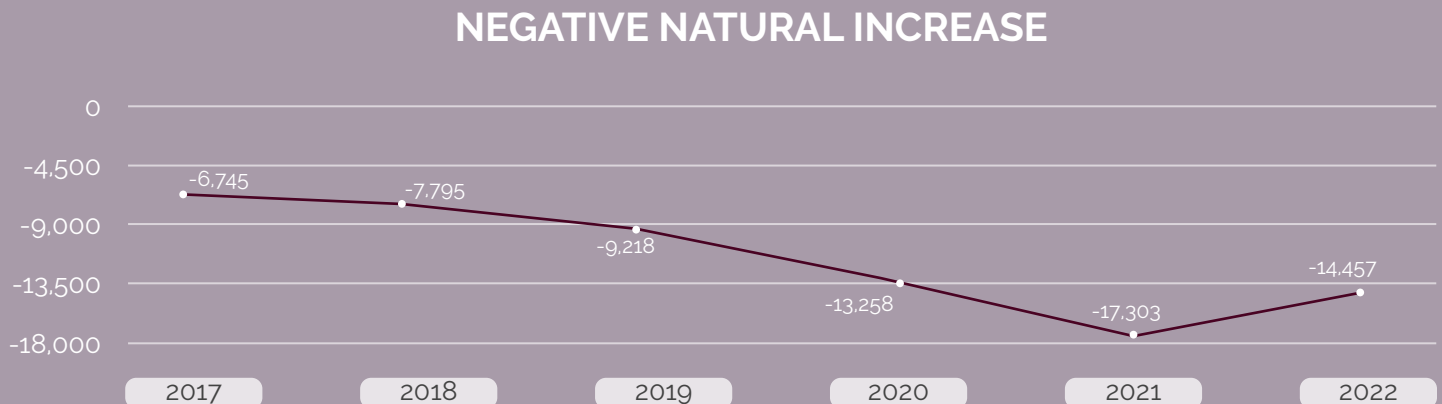
| MUNICIPALITY  | EXPANSION OF EHS SERVICES  |
|---------------|--|
| SAN JUAN      | Sabana Llana Norte<br>Sabana Llana Sur<br>Urb. Comandante<br>Urb. Country Club<br>Bo. Caimito<br>Residencial Monte Hatillo<br>Residencial Jardines de Sellés<br>Residencial San Martín |
| BAYAMÓN       | Barrio Buena Vista de Bayamón  |
| CAGUAS        | Centro urbano de Caguas  |
| TRUJILLO ALTO | Saint Just   |
| RÍO GRANDE    | Jardines de Rio Grande<br>Carretera #3   |
| COROZAL       | Barrio Cuchillas de Corozal<br>Bo. Palmarejo   |
| CIALES        | Barrio Cordillera  |

## GENERAL DEMOGRAPHIC CHARACTERISTICS

Puerto Rico's population was estimated at 3,221,789 as of July 1, 2022. The island's population decreased by 1.3% between 2021 and 2022, which translates to 40,904 fewer people than a year ago, according to annual estimates from the U.S. Census Bureau. These data reflect the second consecutive annual population decline in P.R.



According to data published by the P.R. Institute of Statistics for the period from July 1, 2021 to July 1, 2022, Puerto Rico's population decline is attributed to a negative net migration, estimated at -26,447 persons; and also to the negative "natural" change in which deaths exceeded births during those 12 months. This negative balance is estimated at -14,457. The constant population reduction has been a constant in the last two decades.



The combination of a negative natural increase in the population, which means more deaths than births, added to the increase in the already high net emigration, point to an impressive population loss in Puerto Rico. The population of Puerto Rico decreased by nearly 440,000 inhabitants during the decade that just ended in relation to the previous Decennial Census of 2010.



In percentage terms, from 2010 to 2020 the population decreased by 11.8% during the decade, which is a drastic population change compared to those experienced during recent Decennial Censuses. The year 2000 marks the starting point of the population decline that the island is experiencing.

According to the Census Bureau, in the last six (6) years, from 2017 to 2022, P.R. has had a negative natural increase of -68,776. In addition, migration itself may alter the birth rate in P.R. since migration reports estimate that the sector of the population most likely to migrate is young adults, who are more likely to reproduce. By July 2022 net migration was -26,447 persons and from April 2020 to July it was 32,325 persons.

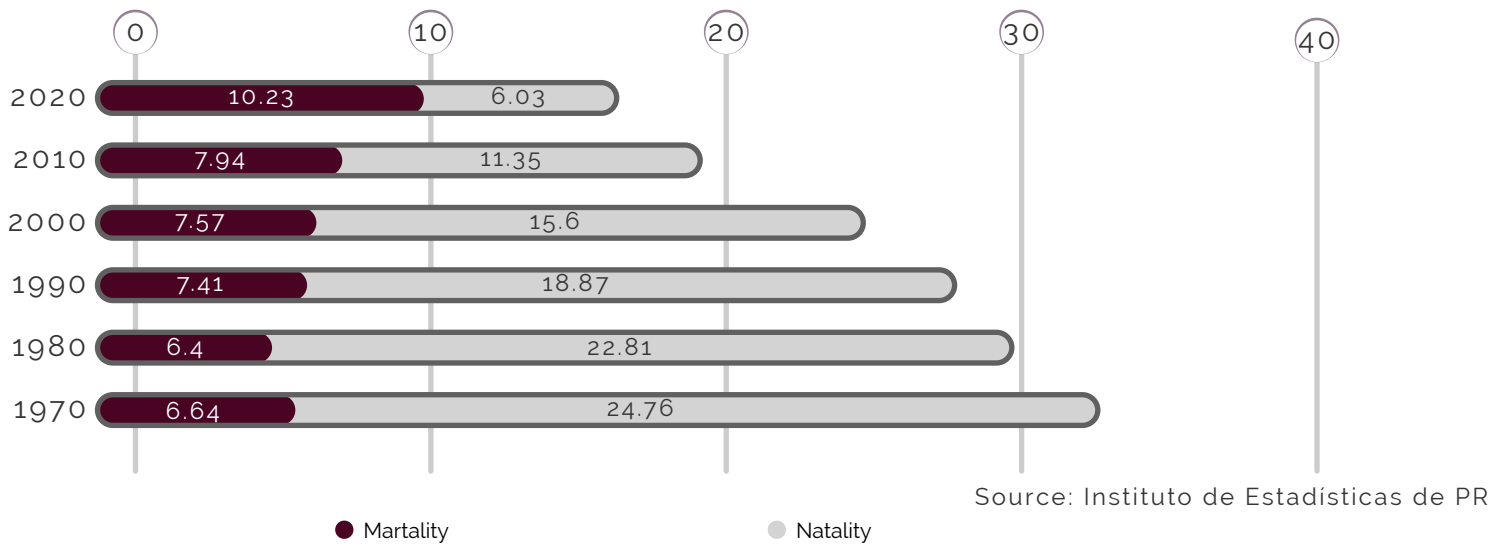
## BIRTHS AND DEATHS



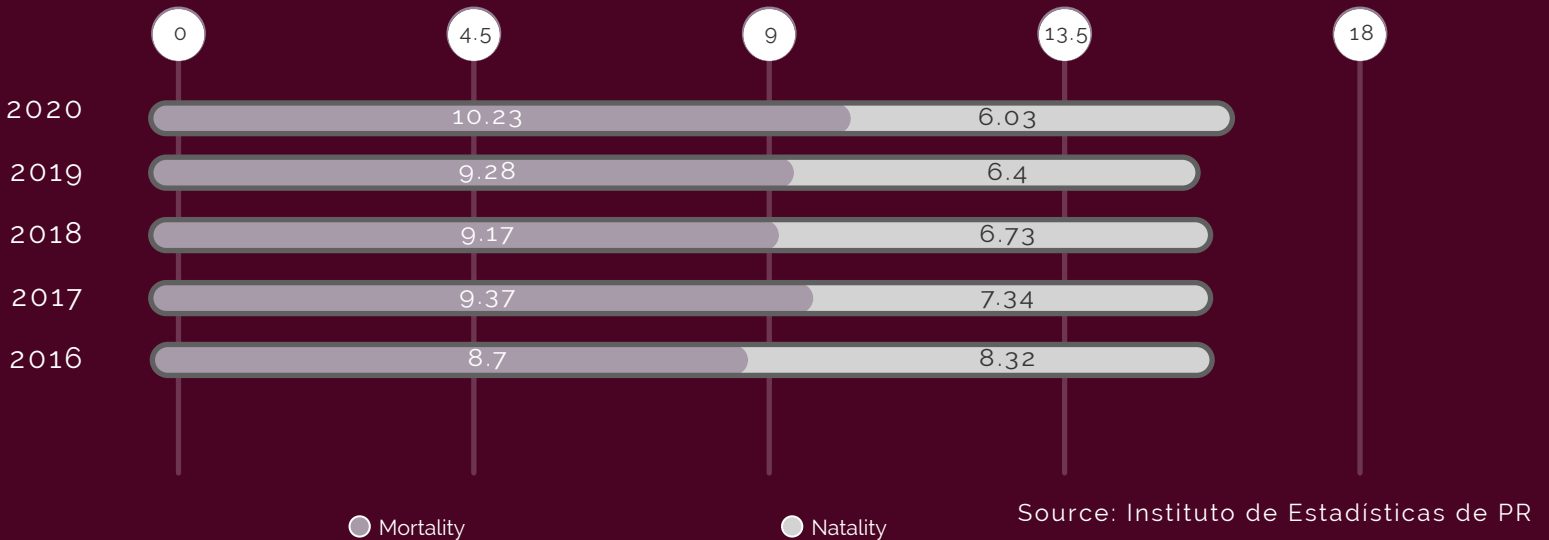
Source: US Census

According to data from the P.R. Institute of Statistics, over the last 50 years there has been a steady decline in birth rates and a continuous increase in mortality rates.

The decade of 2010 marks the starting point where mortality rates surpassed birth rates. Specifically in 2016 the mortality rate rose to 8.70 and the birth rate dropped to 8.32, by 2020 the mortality rate rose to 10.23 and the birth rate dropped to 6.03.

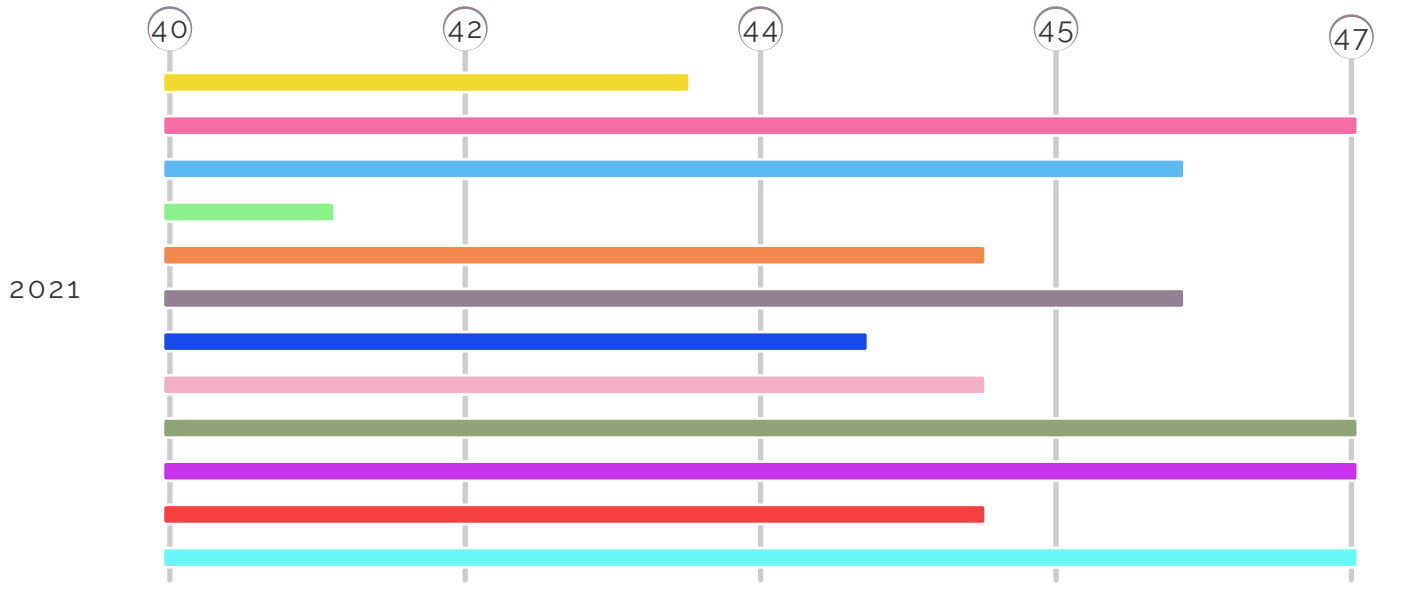


## MORTALITY AND BIRTH RATES BY YEAR



As of July 2021, the median age of the island's population was 44 years. The median age for the male population was 42 years old and for the female population was 46 years old. Of the municipalities served, Naguabo and Trujillo Alto have the lowest median age with 41 and 43, respectively, which represents a lower median age than that of P.R.

## MEDIAN AGE BY MUNICIPALITY

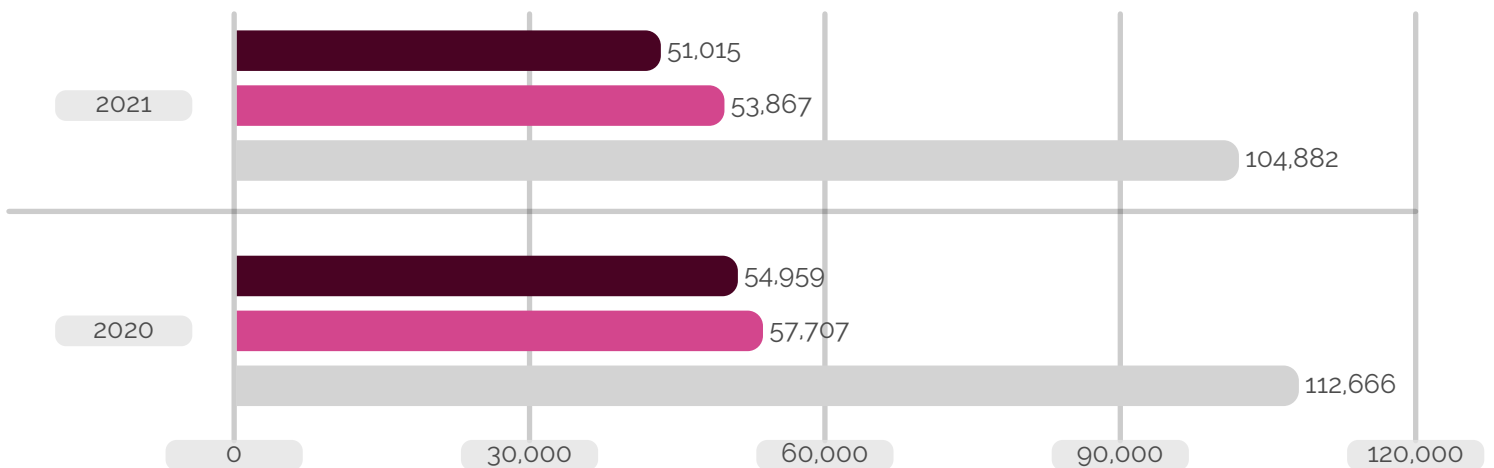


Source: US Census

- Trujillo Alto
- San Juan
- Río Grande
- Naguabo
- Luquillo
- Ciales
- Ceiba
- Carolina
- Caguas
- Bayamón
- Fajardo
- Corozal

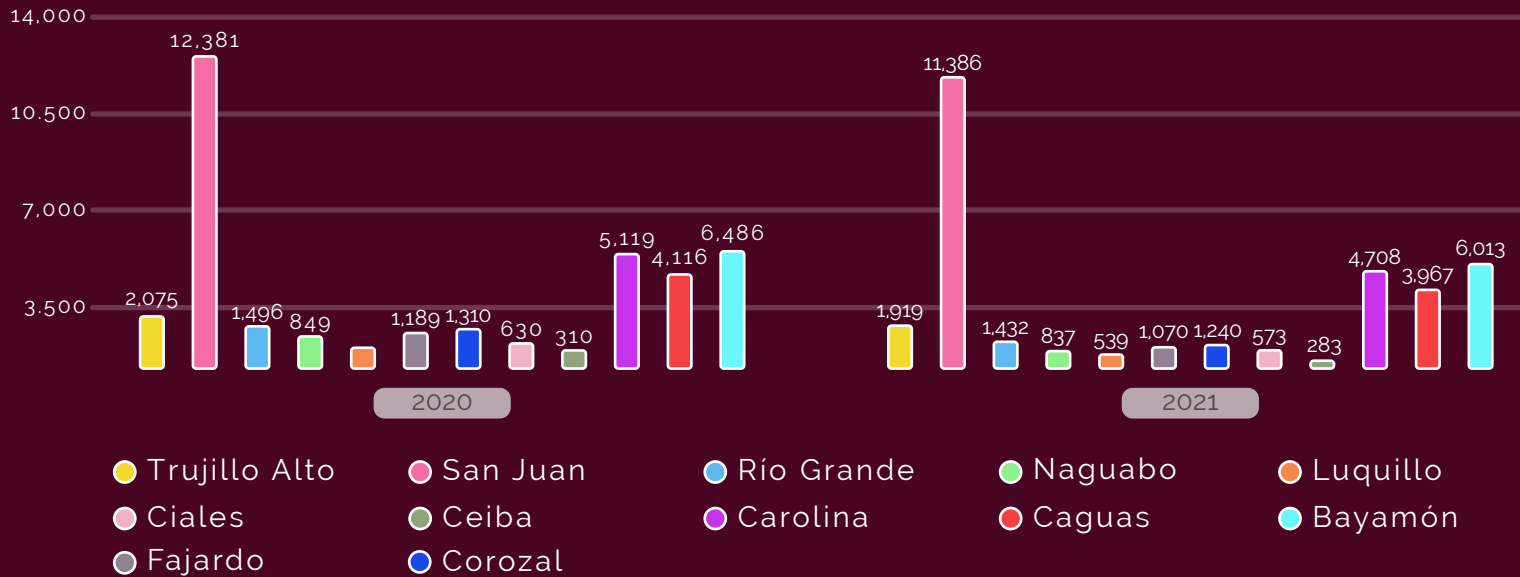
## ESTIMATES OF THE POPULATION UNDER 5 YEARS

According to Census Bureau data for 2022, the population of P.R. aged 18 and over was 2,703,450 inhabitants, which represents 83.9% of the total population. The population of children under 5 years of age as of 2020 was 112,666 children and by 2021 it dropped to 104,882 children. For both years, 51% of the population under 5 years of age belonged to the male gender.



Source: US Census

## POPULATION UNDER 5 YEARS OF AGE BY MUNICIPALITY



The population of children under 5 years of age declined in all the municipalities served by PRFI, due to a combined effect of emigration and low birth rates. The population aged 5 and under in the municipalities served is concentrated mainly in the large cities with the largest populations, such as San Juan, Bayamón, Carolina and Caguas.

According to the Kids Count Data in PR, there has been a decrease in the population of children under 5 years of age.

## MENTAL HEALTH

According to the Monthly Report on Suicides in PR of the Commission for Suicide Prevention under the Department of Health as of November 2022 in the cases of suicides distributed by sex, the data indicate that during the period from 2015 to 2021 the proportion of mortality by suicide in men was sustained between 80% and 90% although with a slight decrease over the years. In contrast, the proportion of suicide mortality in females was sustained between 12% and 16%, but, unlike males, the proportion has been slightly increasing over the years. By 2020, 84% of suicide deaths occurred in males and 16% in females. During 2021, 89% of suicides occurred in males and 11% in females. From January to November 2022, 86% of suicide deaths occurred in males and 14% in females.

Data from the Commission for Suicide Prevention reflect that, during 2016 to 2021, the highest frequency in suicides was recorded among the population of adults aged 40 to 59 years. It is worth noting that in 2020, 67.2% of suicides were among those between the ages of 35 and 74. In the year 2021, 60% of suicides were between the ages of 35 and 74. The data suggest that, in Puerto Rico, the risk of mortality by suicide increases with age and predominates among the group of adults aged 40 to 69 years. During the months of January and November 2022, suicides were reported between the ages of 18 and 92.

## CASES OF SUICIDE IN THE MUNICIPALITIES SERVED BY PRFI

| Year | Trujillo Alto | San Juan | Río Grande | Naguabo | Luquillo | Ciales | Ceiba | Carolina | Caguas | Bayamón | Fajardo | Corozal |
|------|---------------|----------|------------|---------|----------|--------|-------|----------|--------|---------|---------|---------|
| 2016 | 0             | 23       | 4          | 2       | 0        | 1      | 1     | 7        | 9      | 18      | 2       | 4       |
| 2017 | 7             | 30       | 2          | 1       | 1        | 1      | 0     | 9        | 8      | 15      | 3       | 7       |
| 2018 | 6             | 23       | 3          | 2       | 1        | 0      | 1     | 8        | 10     | 17      | 2       | 3       |
| 2019 | 7             | 14       | 1          | 1       | 0        | 4      | 1     | 11       | 10     | 15      | 1       | 3       |
| 2020 | 2             | 18       | 0          | 1       | 0        | 1      | 0     | 8        | 10     | 10      | 1       | 5       |
| 2021 | 3             | 33       | 3          | 0       | 0        | 0      | 1     | 9        | 4      | 8       | 2       | 3       |
| 2022 | 0             | 20       | 1          | 0       | 1        | 1      | 0     | 4        | 9      | 16      | 0       | 0       |

- Trujillo Alto
- San Juan
- Río Grande
- Naguabo
- Luquillo
- Ciales
- Ceiba
- Carolina
- Caguas
- Bayamón
- Fajardo
- Corozal

Source: Departamento de Salud  
Comisión para la Prevención del Suicidio

In the last seven (7) years, 473 suicides have been registered in the area served by PRFI. Of the municipalities served, San Juan has the highest number of cases annually, followed by the municipalities of Bayamón, Caguas and Carolina.

## BIRTH RATE

Puerto Rico now has one of the lowest fertility rates or average number of children per woman in the world and probably the second lowest. (In) Puerto Rico the average number of children per woman is less than 1. This is a situation that, in many other countries, when the fertility level reaches 1.8 or 1.5, it is understood that there is a crisis. Here, it was simply thrown to the side. We are at a level that literally is not sustainable”, Mattei explained. Likewise, the expert assured that all the groups of the society under 65 years old are decreasing while the group of 65 years old or more is increasing. This situation, according to the demographer, has a direct impact on the labor and education systems and on access to health services.

Likewise, he explained that, since there are fewer women of reproductive age, even if they have more children, the decrease in population will be evident. In comparison with other countries whose fertility rate is low, Mattei emphasized that pregnancies remain high for the 30-39 age group. However, she explained that the particularity of Puerto Rico lies in the fact that the country’s population between 30 and 39 years of age is “extremely low,” a situation that is exacerbated by an increase in contraceptive prevalence.

# CHALLENGES AND RECOMMENDATIONS

Puerto Rican Family Institute (PRFI), will have to face several challenges to continue offering services to children and families, however, the biggest challenge it will face will be demographic. Currently, Puerto Rico's eligible population catchment rates are very high compared to the U.S. In the coming years, the population under the age of five will continue its steep decline. This represents a challenge and an opportunity for HS and EHS programs in Puerto Rico, which will have to consider innovative and non-traditional vanguard strategies that will place them in a privileged position in the face of the competition that will manifest itself to serve the population from zero to five (0-5) years of age.

## CHALLENGES

### Demographics

Emigration of the population under 5 years of age and in reproductive ages  
Decline in birth rates  
Aging of the population  
Violent deaths in service areas

### Competence

Department of Education Preschools  
New Head Start and Early Head Start Grantees

### Poverty

Puerto Rican children are the poorest in the U.S.  
Mental health of children and families  
Domestic violence

## RECOMMENDATIONS

Puerto Rican Family Institute has several alternatives to remain a strong competitor in early childhood education services. Specific recommendations are presented below:

1. For the time being, PRFI will be consolidating its position in the areas of recent expansion. In the future, if expansion of the HS and EHS program is considered, it should be targeted to municipalities with low enrollment rates (children served/eligible children), i.e., high need areas.
2. The relocation, downsizing or opening of HS and EHS centers by PRFI should be based on a strategic location analysis. Due to changing demographics and the reduction in the number of children, the establishment of each center should focus on serving several surrounding communities. These centers should be located, if possible, in easily accessible locations or at points of convergence between several communities. Central locations near major traffic routes will have an advantage in attracting the required enrollment.
3. Although PRFI meets all federal government compliance standards in accordance with regulations, nevertheless, to remain a competitive and innovative program, it must seek strategies to exceed requirements that will allow it to continue to develop facilities of higher quality and competitiveness than required.
4. The availability and offering of transportation services to children is another strategy PRFI has in place to increase enrollment, which will make the Program more attractive and competitive in relation to other Programs.
5. If PRFI is to consider expanding services, it should focus on EHS, where Puerto Rico has much lower levels of eligible population uptake than for HS.
6. Conversion of Head Start slots to Early Head Start. Efforts should be directed at multi-classroom centers and public residential served to ensure transitions from Early Head Start to Head Start and continuity of HS services.



7. Reduction and conversion of enrollment. Allocated enrollment in classrooms must be reallocated to a maximum of 17 children per classroom.

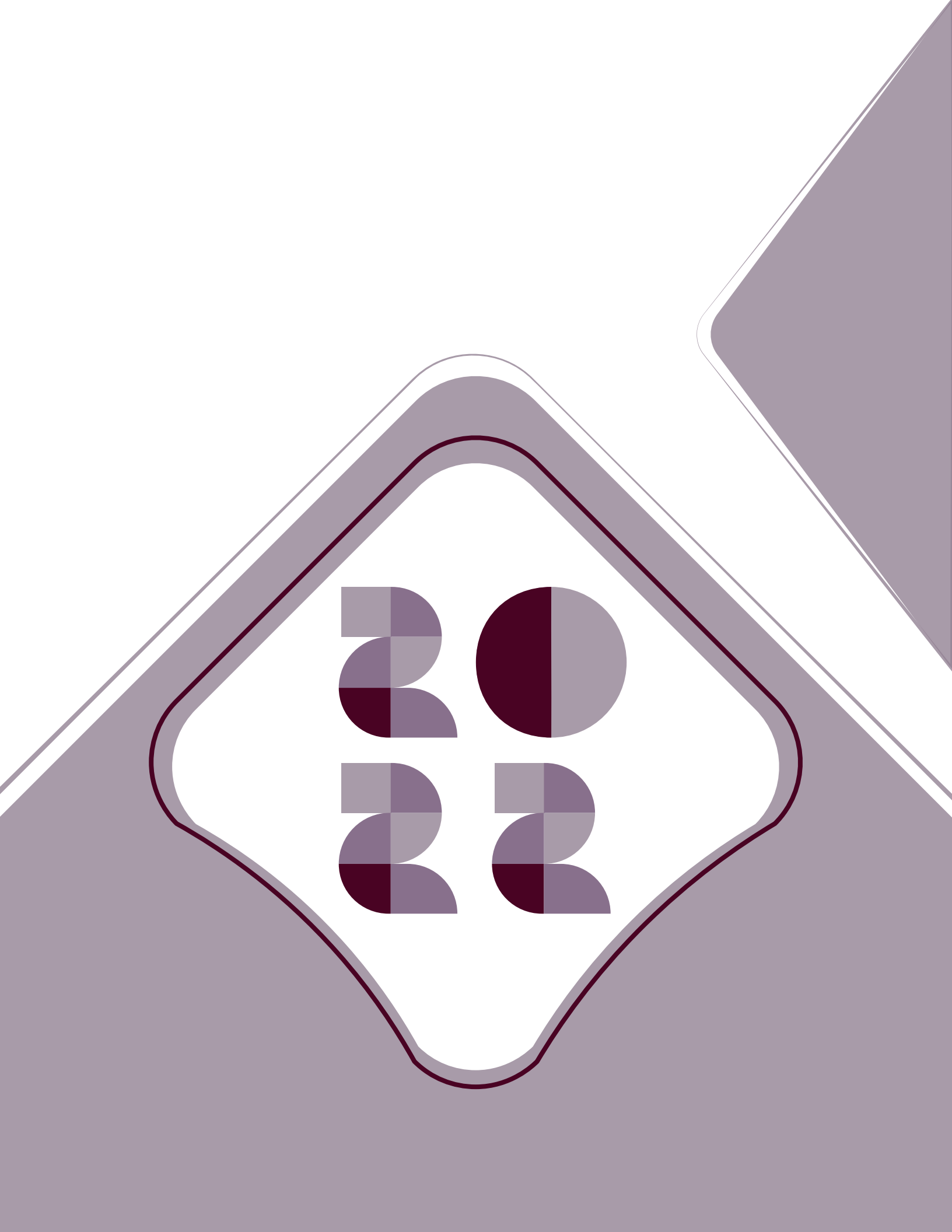
8. Continue coordination between PRFI with the Department of Education to share facilities and identify disused schools that have the potential for relocation of HS and EHS centers.

## Audit

Crowe PR PSC is the firm of auditors that performs the annual external audit, where they evaluate the compliance of all systems and services of the program, issuing an independent opinion that gives authenticity and allows users of such information to make decisions based on the auditor's statements.

In PRFI Puerto Rico, the process begins approximately at the end of October of each year. However, the situations caused by the COVID-19 pandemic delayed the start of the audit for fiscal year 2022. The process began in November 2022, visiting the selected centers and evaluating the program's processes. The auditors expressed a clean professional opinion regarding the report of the program's financial statements.

The results of PRFI Puerto Rico and New York are in accordance with accepted accounting principles and in accordance with the auditing standards required by the Federal Government.





# ANNUAL REPORT

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## NEW YORK

# Mensaje del CEO

New York Head Start



Dear Colleagues and Families,

Puerto Rico has suffered greatly as a result of natural disasters. Hurricanes, earthquakes, and other natural events have affected how we work, our communications virtual or in person, and we also see internal changes (not seen before) in our own personality.

Many of us feel anxious, with variations of moods, sometimes more angry or depressed, and we do not realize that much of these feelings are due to everything negative that we have endured.

We are aware that there are resources available, but out of grief we may think that others need them more and we do not use those tools that can help us reflect on our skills or need for wellness. We are hopeful that everything will improve and we can adapt a positive view to overcome these difficult times.

We don't know what the next year or the next decade may bring, but we can count on our dedication to do our best in any situation. We all serve and are in a supportive community. It doesn't matter where we live, but we feel the support, the effort, the active communication with this community of employees and customers called Puerto Rican Family Institute, Inc.

I am very proud to be part of this community of employees who are not only dedicated to our mission, but also provide support without prejudice for everyone.

Their dedication to providing the best services and the highest levels of hospitality, which our organization is constantly recognized for, is not only appreciated by all of us who work here, but also by our partnering government agencies.

Once again my sincere thanks for always doing an excellent job.

Greetings to all,

Luis A. Rodriguez, MD  
President & CEO  
Puerto Rican Family Institute, Inc. .

# Mission

The Puerto Rican Family Institute's Inc. mission is to enhance the functioning and self-sufficiency of diverse marginalized communities and prevent family disintegration. PRFI, Inc. is a non-for profit, multi-program, family oriented, health and human services agency that provides culturally sensitive services to children, youths, adults and families, and respects all individual's clinical, cultural and personal identities.

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## Program Description

The Bronx Head Start program provides a comprehensive, center-based, full day child and family development program for families of low income with children ages three to five years.







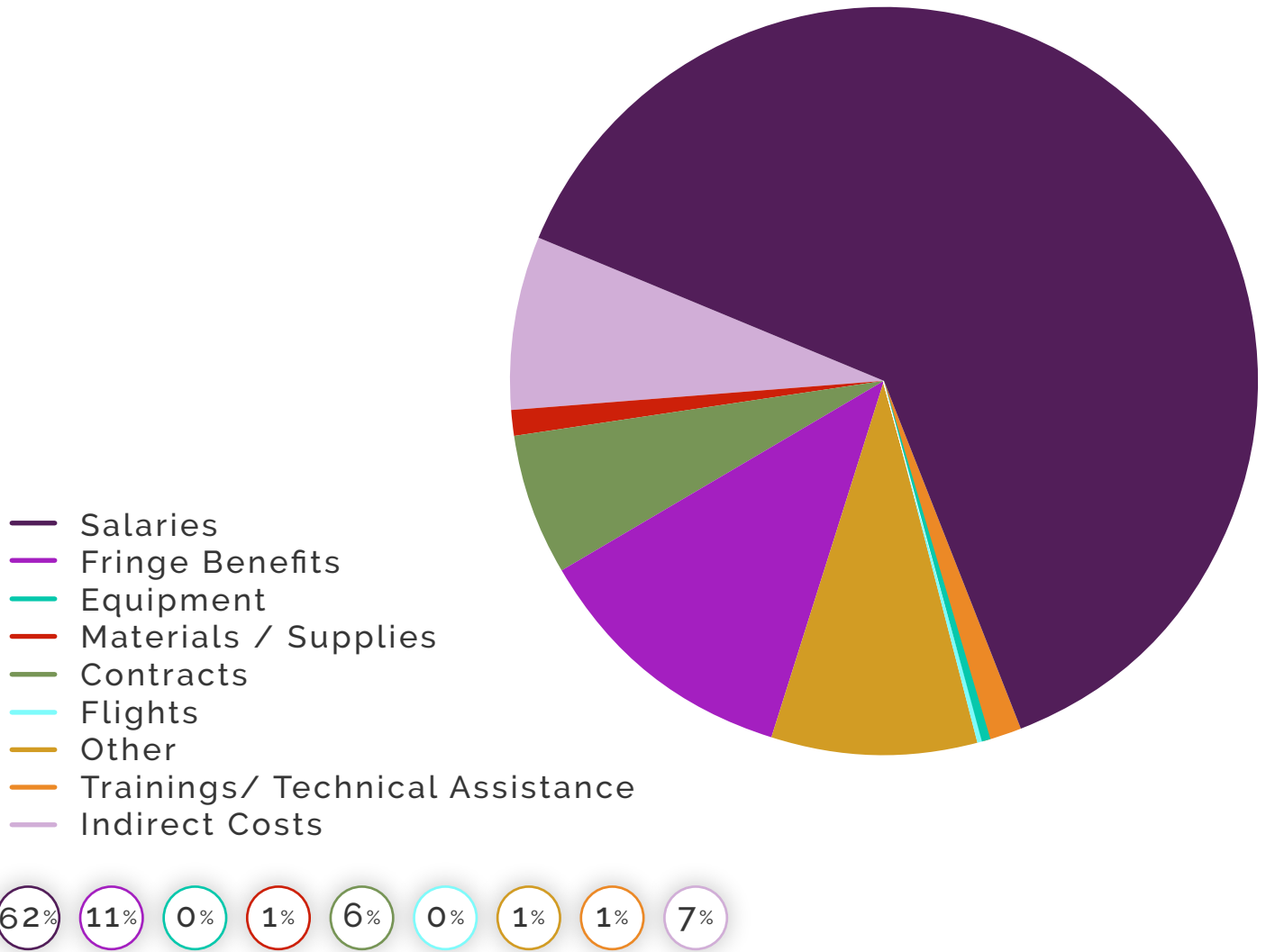
# Fiscal Information

|                                 |                |
|---------------------------------|----------------|
| Salaries                        | \$1,681,228.70 |
| Fringe Benefits                 | \$317,700.09   |
| Equipment                       | \$5,000        |
| Materials / Supplies            | \$41,000       |
| Contracts                       | \$162,580      |
| Flights                         | \$4,000        |
| Other                           | \$237,095      |
| Indirect Costs                  | \$193,340.70   |
| Trainings/<br>Technical Support | \$30,161       |

**TOTAL BUDGET**  
New York Head Start

**\$2,672,105.50**





The Puerto Rican Family Institute, Inc (PRFI) audit began in October 2022 for both the New York and Puerto Rico locations and is expected to be completed in December 2022/January 2023. With this completion date, PRFI will be in compliance with Title 2 of the Code of the Federal Regulations (CFR) Part 200, Subpart F, entitled "Audit Requirements" which requires grantees \$750,000 or greater to submit their Audit Report within nine months after the grantee fiscal year which would be for PRFI by March 31, 2023.

During this fiscal year the New York Head Start branch received \$228,965 from the Cares Act-COVID 19 Funds and also \$164,700 from OCFS Child Care Stabilization Grant 1.0. These funds have been utilized to enhance mental health services, update health and safety protocols and procedures, purchase of electronic equipment and security cameras, building repairs and maintenance focusing on health and safety, cleaning and sanitation supplies, hiring a health screener and maintenance worker, and retention bonus given to staff.

# School Readiness

School readiness means that children are ready for school, families are ready to support their children's learning, and schools are ready for children. We refer to school readiness when children acquire the skills, knowledge, and attitudes necessary to be successful in school, for later learning, and throughout life.

The PRFI Bronx Head Start program's focus on school readiness is to provide all children with access to opportunities that promote school success, recognize and support children's individual differences, set reasonable and appropriate expectations about what children should be able to do when they enter school and support their development as lifelong learners.

The Teaching Strategies GOLD assessment tool was used to measure the impact of these efforts. GOLD is an assessment system that includes 10 areas of development and learning: Social-Emotional, Physical, Language, Cognitive, Literacy, Mathematics, Science and Technology, Social Studies, Arts, and English Acquisition. These areas have objectives and dimensions that were carefully selected by researchers as predictors of school success.

Data is collected at three checkpoints in the fall, winter, and spring and discussed with parents during parent-teacher conferences at each checkpoint. The data collected is used to guide children's development and learning goals. School readiness goals are established based on child outcomes data and guide the program selection effort for child-centered curriculum, assessment tools, teacher-child interactions, and professional development.

The graphs below shows the percentage of preschool-age children from the beginning of the 2021-2022 program year to the spring checkpoint. It shows the percentage of children who are below, meeting, or exceeding generalized expectations in each area of development and learning at the time of the checkpoint.

## Context and analysis:

The Puerto Rican Family Institute's Bronx Head Start Program underwent several changes last year that affected our school readiness data.

- First, in 2021, a large majority of our students transitioned to kindergarten, so in September 2021, our program had many new students attending preschool for the first time. The teachers worked very hard to develop relationships with the children and focused on their social and emotional development.

- Second, a new Education Manager was hired for the program. She had a lot of early childhood leadership experience, yet she had little knowledge of Head Start. The new Education Manager participated in workshops and trainings and attended the NHSA national conference to learn about Head Start and the Program Performance Standards.

- Third, due to the expansion of PreK for All in New York City, several experienced teachers left the program. 44.4% of our classrooms were being taught by first-year teachers who were just learning developmentally appropriate curriculum, instruction, and assessment practices.

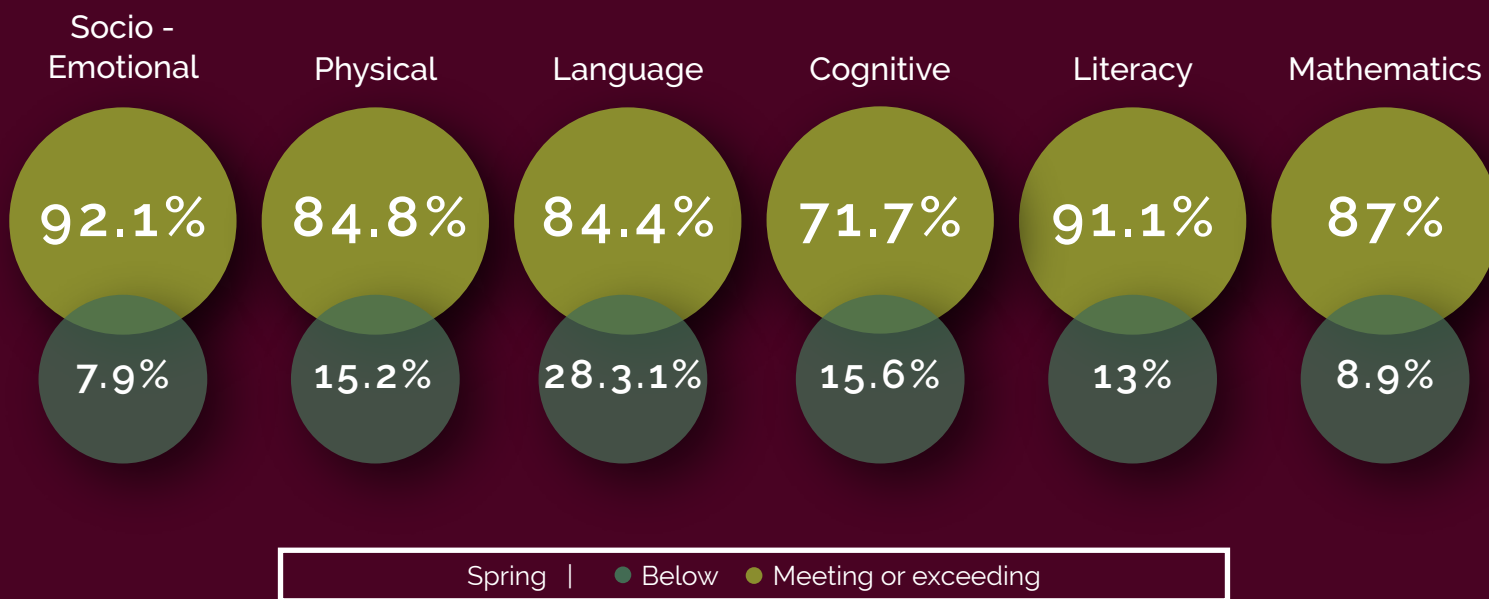
And finally, we continue to be impacted by the COVID-19 pandemic. The ongoing trauma has impacted students and their families in ways that we continue to learn.

Despite these challenges, student achievement was evident in all areas of development and learning from fall 2021 through spring 2022. Below are graphs of the achievements of the children of 3 and 4 years in each of the areas of development and learning.

# Children's Outcomes

The Teaching Strategies **GOLD Assessment** Tool was used to measure children's progress in child development and readiness for school. Data is collected at three checkpoints in the fall, winter and spring and is discussed with parents during parent teacher conferences at each checkpoint. The data collected is used to guide objectives for development and learning of children

## PRE SCHOOL 3 PRFI - New York



### Growth by Area of Development

In all areas the children showed progress at the end of the year. The areas of development and learning in which the children showed significant progress at the end of the year were: Socio-Emotional, Literacy and Mathematics.

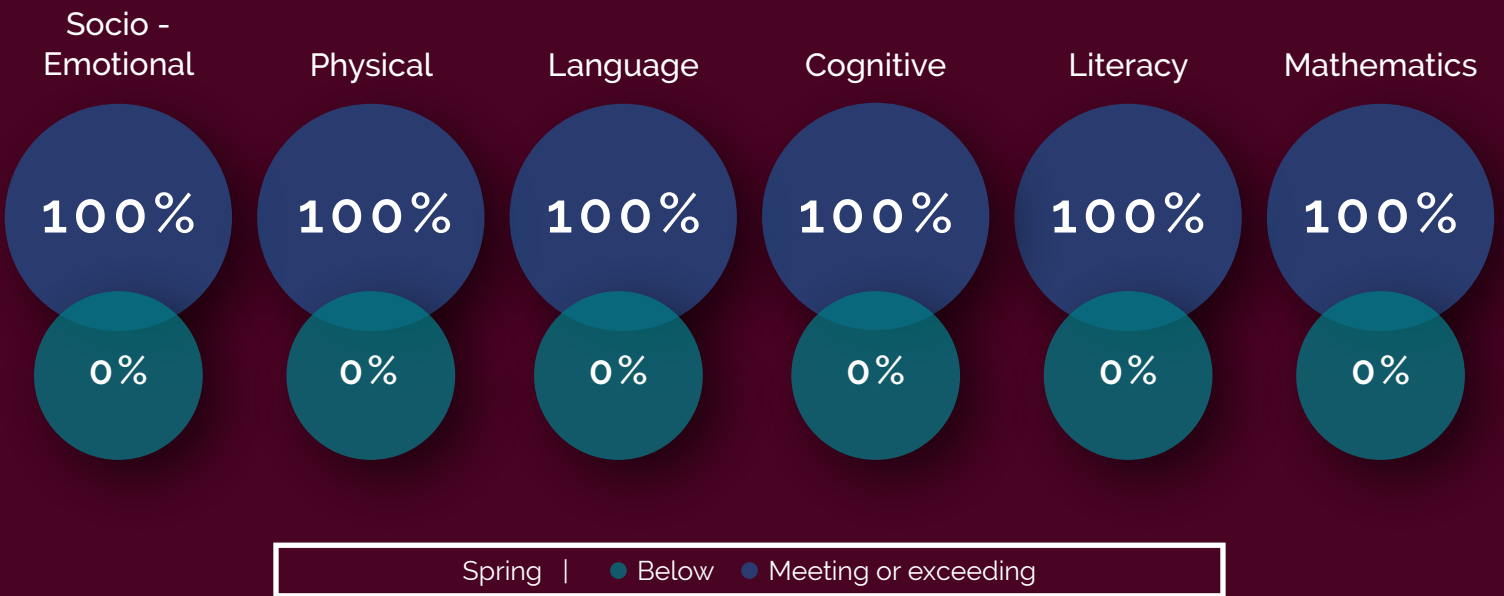
With 3-year-old children, significant progress was collected. In the next range between the checkpoint from fall to spring.

Socioemotional: 25% - 49% | Physical: 25% a 49% | Language: 50% - 74% | Cognitive: 25 - 49%  
Literacy: 50% - 74% | Mathematics: 50% - 74%



# PRE K 4

PRFI - New York



## Implemented strategies for 2022-2023

1

Ongoing training in the curriculum and professional development for teachers.

2

Educational training

3

Teachers will implement newly developed Units of Study based on student interests

4

Mental wellness supports for staff.

# CLASS

The Bronx Head Start classrooms were observed during 2021 – 2022 program year using the Classroom Assessment Scoring System Tool. CLASS is a multifaceted observation instrument that assesses classroom quality and teacher-child interactions.

The assessment is divided into three main areas referred to as Domains:



Each domain is made up of different dimensions that capture a distinct aspect of the classroom that has demonstrated associations with children's learning.

\*Previous larger scale studies of CLASS have shown that the average preschool classroom scores are higher in the domains of Emotional Support and Classroom Organization than in the domain of Instructional Support. (Score scale 1-7, 7 being the highest score, 3-5 mid and 1 the lowest).

|                                | Fall<br>2021  | Spring<br>2022 |
|--------------------------------|---------------|----------------|
| <b>Emotional Support</b>       | 6.3(Avg. 6.0) | 6.3            |
| Positive Climate               | 6.4           | 6.6            |
| Negative Climate               | 1.0           | 1.0            |
| Teacher Sensitivity            | 6.1           | 6.3            |
| Regard for Student Perspective | 5.4           | 5.7            |
| <b>Classroom Organization</b>  | 6.1(Avg. 5.8) | 6.2            |
| Behavior Management            | 6.0           | 5.9            |
| Productivity                   | 6.5           | 6.5            |
| Instructional Learning Formats | 5.9           | 6.2            |
| <b>Instructional Support</b>   | 3.0(Avg. 2.9) | 3.4            |
| Concept Development            | 2.5           | 3.4            |
| Quality of Feedback            | 2.9           | 3.3            |
| Language Modeling              | 3.4           | 3.7            |

\*The report shows the results of the observations at PRFI Bronx Head Start site for fall 2021 and spring 2022.



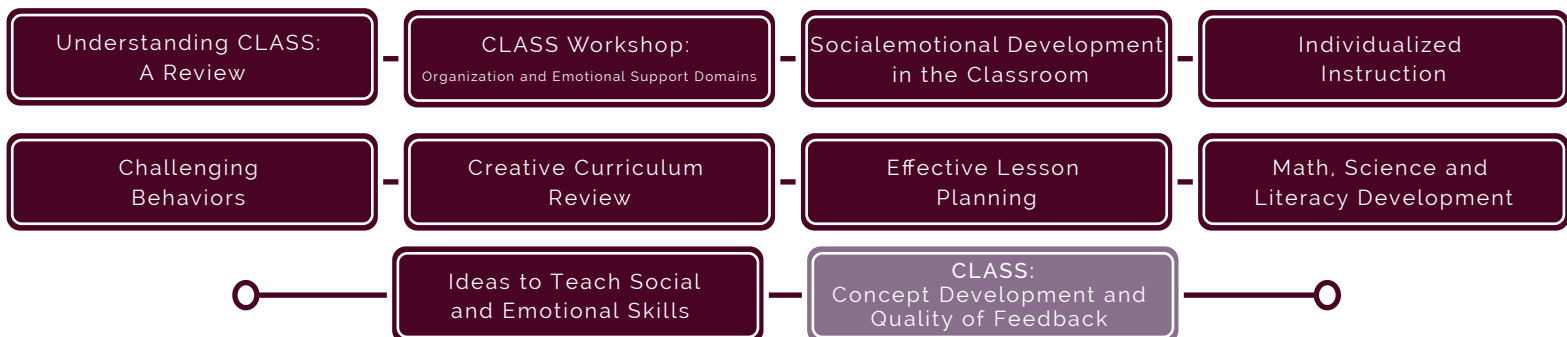
Due to the COVID-19 pandemic, classrooms implemented necessary changes in procedures, rules and ways of interacting to create a safe and healthy space. In doing so, children were required to learn new routines and rules. During both the fall and spring periods, the average score for Emotional Support was slightly below the national average. Mask wearing, social distancing and the need to limit the amount of children in centers and materials used may have contributed to this result. The average score for Classroom Management was above the national average. This may be a result of the teaching team's focus on classroom routines, behavior expectations and having a smaller class size and three teachers in the classroom. The average Instructional support scores were only slightly below the national average as well.

With the trauma and stress of the pandemic, the need to support children's social and emotional health is of the utmost priority. In order to do that, classroom interactions need to be warm, engaging and supportive. Classrooms need a solid routine. To maximize the impacts for children, quality improvement efforts need to focus on teacher-child interactions. When ECE programs provide effective emotional, organizational, and instructional supports, children are more successful as learners and more likely to meet expectations regarding what they should know and be able to do.

Although the scores for the fall 2021 and spring 2022 periods are not significantly lower than the national average, the program would expect to see improvement in the scores (higher scores) during the next observation period after the teachers participate in professional development trainings over the Summer. The Education Mentor Coach began in January 2021 and will continue to support staff's development and understanding of CLASS.

The Mental Health Consultant provided teachers with monthly opportunities to discuss strategies and goals for managing their own stress and anxiety in attempts to buffer the pandemic's impact on their personal and professional lives. The program has scheduled a series of trainings to support staff's knowledge and skills.

### Scheduled Trainings:



# Family Engagement

As their child's first and most influential teacher, parents have an important role at the Puerto Rican Family, Inc. - Bronx Head Start program.

The Bronx Head Start program provides so much more than just education for young children. We believe the whole family plays a vital role in a child's development and parental involvement can result in a child having more interest in school, increased self-esteem and better attendance.

In conjunction with community partners, the program provides or arranges for parent involvement activities aimed at building healthy families through a strength-based approach.

## Family Services may include:

- Mental Health Services/Referrals/Positive Behavior Support
- Policy Council/Parent Committee/Health Advisory Council
- Home Visits, Individual Parent Teacher Conferences and Transition to Kindergarten
- Family Goal Setting Meeting
- Parenting Classes
- Volunteer Opportunities in the Classrooms and Center
- Father Engagement Activities
- Workshops to Enhance Parent Knowledge of Early Childhood, Health, Immigration, Domestic Violence, Resources in the Community

## MONTHLY ENROLLMENT INFORMATION 2021 - 2022

SEPT 53 child.

JAN 66 child.

MAY 67 child.

OCT 60 child.

FEB 64 child.

JUNE 69 child.

NOV 63 child.

MARCH 64 child.

JULY 69 child.

DEC 63 child.

APRIL 66 child.

# DEMOGRAPHIC INFORMATION

153

Number of Families that Received Services

80

| <b>Family Composition</b>   |    |
|---|----|
| One Parent Family   | 44 |
| Two Parent Family   | 36 |
| <b>Employment/Job Training/School</b>   |    |
| At least one parent is employed, in job training, in school                           | 46 |
| Of these families, the number in which one or more parent/guardian is in job training | 6  |
| Of these families, the number in which one or more parent/guardian is in school       | 5  |
| Neither/No parent/guardian is employed, job training or in school                     | 34 |
| <b>Education Level of Parent/Guardian</b>   |    |
| Advanced degree or Baccalaureate degree   | 8  |
| Associate degree, vocational school, some college                                     | 14 |
| High School or GED  | 37 |
| Less than High School   | 20 |
| <b>Federal or Other Assistance</b>  |    |
| TANF  | 11 |
| SSI   | 5  |
| WIC   | 51 |
| SNAP  | 55 |
| <b>Homeless Families</b>  |    |
| Number of Homeless Families   | 5  |
| Homeless Families that acquired housing   | 1  |
| <b>Primary Type of Eligibility</b>  |    |
| Income below 100% of Federal Poverty Line   | 61 |
| Public Assistance, TANF, SSI  | 11 |
| Foster Child - Number of children only  | 1  |
| Homeless  | 6  |
| Over- Income  | 4  |

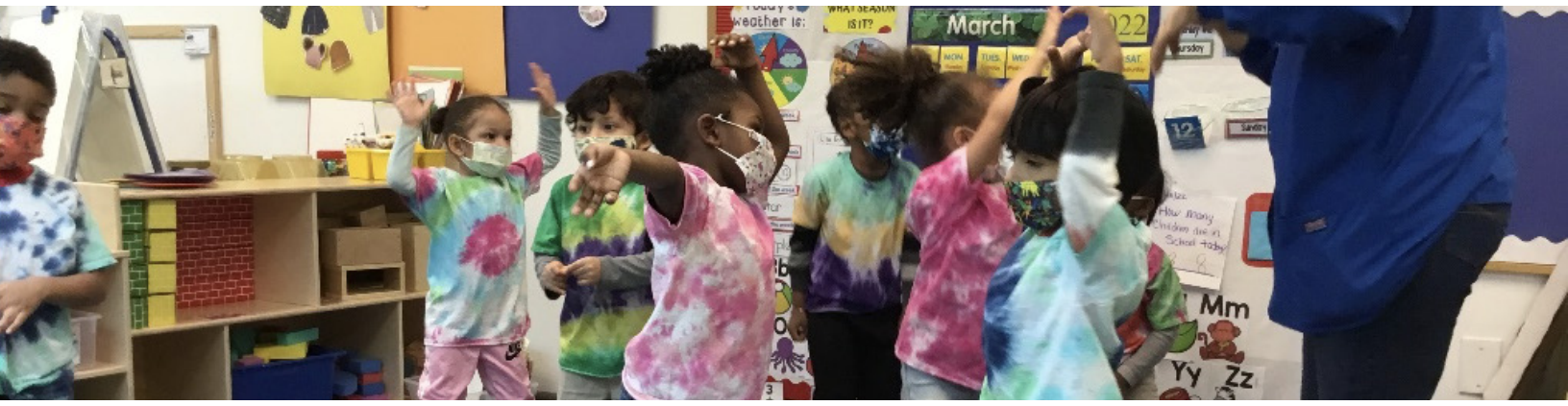
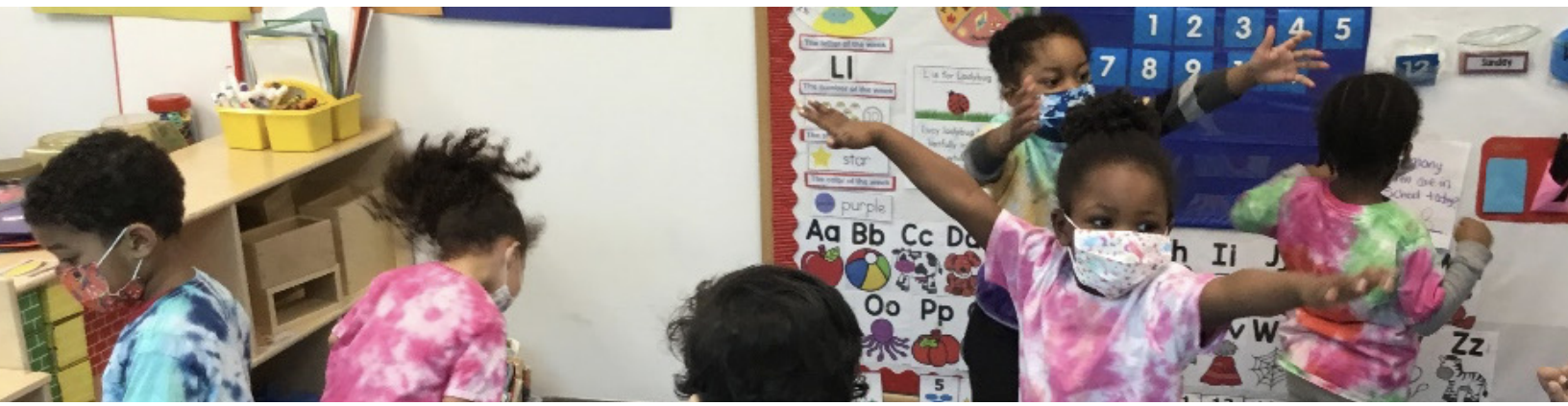
# Community Partnerships

Community partners support the program by responding to families' interests and needs. The program connects families to outside resources that encourage engagement in children's learning and well-being.

All of our partnerships are purposefully designed to increase community involvement and awareness of the Head Start Program.

- Bronx Community College – Career Support Services
- Hispanic Federation – Financial Education and Childhood Literacy for Families
- PRFI/Bronx Mental Health Clinic – Mental Health Services
- Urban Health Plan – Health Education and Advocacy
- The Lead & Prevention Treatment Program @Montefiore Medical Center
- Sanctuary for Families – Legal Advocacy
- SBH Health System – Bronx – Community Health Education
- Northside Center for Child Development/Bronx Children & Family Services – Early Childhood 0-3 Years
- The United Way of NYC-Read NYC – Literacy Education
- New York Psychotherapy and Counseling Center
- NYPL-Morrisania Library – Literacy Education
- Eat Well Play Hard Champion Initiative – Nutrition Education
- Healthy Smiles – Health Educations
- Pajama Program – Promoting & Supporting Bed Time Routines
- New York Medical College – Speech-Language College Interns







# Health Services

PRFI, Inc. - Bronx Head Start program embraces a comprehensive vision of health. To prepare children for the future, PRFI, Inc. - Bronx Head Start program focuses on children's health and its importance as a key factor in learning. The program supports all aspects of children's development, including their physical, nutritional, oral, and mental health. The program provides and arranges for vision and hearing screenings, growth and nutritional assessments, recommended immunizations, dental screening and provides follow-up referrals for the suspected or identified health conditions.

All children must have updated physicals with all required screenings upon enrollment. Parents are assisted in following up with referrals and services received for suspected or identified health needs the family may have; and are provided with health information and resources. In order to comply and ensure that all children's health needs are met, a nurse health consultant and a Health Advisory Committee form part of the health services team.



Number of Children

**Medical Services**

|  |           |
|--|-----------|
| Children who are up to date or scheduled for age-appropriate preventive and primary healthcare | <b>72</b> |
| Children needing medical treatment   | <b>1</b>  |
| Children who received medical treatment  | <b>1</b>  |

**Dental Services**

|  |           |
|--|-----------|
| Children who completed dental examinations | <b>71</b> |
| Children who needed dental treatment       | <b>3</b>  |
| Children who received dental treatment     | <b>0</b>  |

Number of children who received medical treatment for:

|                      |           |
|----------------------|-----------|
| Anemia               | <b>0</b>  |
| Asthma               | <b>1</b>  |
| Hearing Difficulties | <b>0</b>  |
| Overweight           | <b>22</b> |
| Vision problems      | <b>0</b>  |
| High Levels of Lead  | <b>0</b>  |
| Diabetes             | <b>0</b>  |

**Immunization Services**

|  |           |
|--|-----------|
| Children who are up to date on all immunizations appropriate for their age | <b>72</b> |
|--|-----------|

# Nutrition Services

The Puerto Rican Family Institute, Inc. - Bronx Head Start program continues to participate in the Child Adult Care Food Program (CACFP), a program subsidized with funds from the US Department of Agriculture (USDA). They provide reimbursement for the meals served daily to the children enrolled in the program.

Three nutritionally balanced meals are provided to all children (breakfast, lunch and snack). Menus are designed by the program's Registered Dietician/Nutrition Assessor to meet the nutritional daily requirements expected by the USDA and CACFP, additionally, conform to NYC Food Standards for early childcare.

A variety of food from all food groups are offered in the daily menus including modifications for those children with allergies, for those who are vegetarian and the growing Muslim population in the program.

During mealtimes \*family style dining is encouraged and practiced when developmentally appropriate. Children are taught to make healthy choices and learn good eating habits that can influence positive health outcomes.

In addition, with the collaboration of the nutritionist and nurse consultant, staff and parent workshops are provided to educate and support families in selecting healthy food choices, prepare well-balanced meals, better understand the importance of nutrition and physical activity and obtain community assistance.

Number of children in the following weight categories according to the CDC Body Mass Index for age growth chart

|                |    |
|----------------|----|
| Underweight    | 3  |
| Healthy weight | 58 |
| Overweight     | 10 |
| Obese          | 12 |

Held temporarily due to COVID\*



## HEALTH ADVISORY COMMITTEE

The Health Advisory Committee is a group composed of local health providers who represent a variety of local community based agencies. The Health Advisory Committee helps the program to make decisions, provide health service resources and keep the program abreast of health issues affecting the community and beyond to support children's and family's healthy development.

### ORGANIZATIONS:

Bronx Action Center-CHE  
Bronx Bureau of Neighborhood Health  
Bronx Lebanon-Health Care Systems  
DOMH-Health Homes  
Empire Blue Cross  
First Med-Healthy Smiles  
Montefiore Hospital-Lead Prevention Program  
PRFI Bronx Clinic  
South Bronx Health-NY  
St. Barnabas Health System  
Urban Health Plan-Maternal and Child Services  
Urban Health Plan -MICHC  
Bronx Action Center

### STAFF:

Sonia González-Cruz | Program Director  
Amanda Allen | Mental Health Assessor  
Stacey White | Health Assessor  
Isis Badillo | Mental Health Intern  
Wendy Temprow | Nutrition Assessor

# Mental Health Services

The Puerto Rican Family Institute, Inc. - Bronx Head Start program understands the importance and provision of mental health services to children, families and staff of the Puerto Rican family Institute, Inc. - Bronx Head Start program.

The Mental Health Assessor provides a critical role and a range of services and supports to the families and staff by:

- Identifying strategies that promote young children’s social-emotional development and preventing the escalation of problem behaviors-social emotional distress,
- Identifying resources that can support a continuum of mental health services for the children, families and staff of the program,
- Strengthening the mental health consultation by establishing relationships and partnering with staff and families,
- Providing additional intern staff to support staff and families in the program.

|   | Number of Children |
|---|--------------------|
| Children for whom the MH professional consulted with staff about child's behavior/mental health | 36                 |
| Number of these the MH professional provided three or more consultations with program staff     | 10                 |
| Children for whom the MH professional consulted with the parent about their child's behavior    | 33                 |
| Number of these the MH professional provided three or more consultations with the parent        | 12                 |
| Children for whom the MH professional provided an individual mental health assessment           | 34                 |
| Children for whom the MH professional facilitated a referral for mental health services         | 13                 |
| Children for who were referred by the program for mental health services outside of Head Start  | 5                  |
| Number who received mental health services  | 2                  |



# WE'RE PART OF YOUR FAMILY

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## **Puerto Rican Family Institute, Inc. Bronx Head Start**

1423 Prospect Avenue  
Bronx, New York 10459

Serving the Morrisania communities in the zip codes:  
10456, 10459 y 10460