




early
head
start

Community Needs Assessment

January 2024

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Table of Contents

Executive Summary	3-4
Section 1: Overview of the State of EWU EHS	5-8
History.....	5
Service and Recruitment Area.....	5
Program Locations and Slots	6
Eligibility Criteria.....	8
Section 2: Methodology	9-15
Community Assessment Process	9-11
Community Assessment Sources.....	12-14
Methods of Data Collection.....	14
Methods of Data Analyses.....	14-15
Section 3: Service Area Data.....	15-32
Overview of the Service and Recruitment Area	15-17
Service and Recruitment Area Demographics	17
A. General Demographics	17-23
B. Income and Poverty Status	24-26
C. Homelessness.....	26-28
D. Foster Care Status.....	29-30
E. Children with Disabilities.....	30-32
Section 4: Identified Needs	32-53
Nutrition.....	32-35

Mental and Social Needs.....	36-42
Housing and Childcare Needs.....	43-44
Health and Access to Medical Providers	45-51
Employment and Education	51-53
Section 5: Community Resources and Strengths.....	53-58
Tri-County Childcare Programs.....	53-56
Community Resources	57
Community Gaps.....	57
Community Strengths	58
Section 6: Recommendations and Priorities	58-59
References	60-63
Appendices	64-113
Appendix A: Community Assessment Team.....	65
Appendix B: Available Tri-County Resources for Children with Disabilities.....	66
Appendix C: Available Tri-County Community Resources.....	67-83
Appendix D: Data Table: Status of Eligible Tri-County Children and Families	84-90
Appendix E: Community Needs Assessment Family Survey Questions	91-95
Appendix F: Field Staff Community Needs Assessment Survey Questions.....	96-98
Appendix G: EWU EHS Policy Council August 25 th Meeting Minutes.....	98-104
Appendix H: EWU EHS Parent Committee August 9 th Meeting Minutes	105-109
Appendix I: EWU EHS Health Services Advisory Committee (HSAC) September 6 th Meeting Minutes.....	110-113

Executive Summary:

Eastern Washington University Early Head Start (EWU EHS) serves children and families located in the northeast Tri-Counties of Washington state including Ferry, Stevens, and Pend Oreille County. EWU EHS promotes early learning, prenatal health and development, and school readiness for children under age 3 via a weekly home-visit program model. These counties are federally designated frontier areas and medically underserved areas.

Per the Head Start Program Performance Standards ([45 CFR §1302.11](#)), a full community assessment must be conducted every five years with annual updates reflecting significant changes in the service areas. The data collected in this Community Assessment describes community needs, strengths, and resources. This Community Assessment has been utilized to shape program short-term and long-term goals, program services, and current and future program planning.

To gain a better understanding of current community issues and trends, an EWU EHS Community Assessment Team was established consisting of key staff, the Director, policy council parents, governing board members, community agency partners, EWU EHS enrolled and waitlisted parents, the Health Services Advisory Committee, Parent Committees, and field staff. To summarize, the methods used for data collection and analysis include:

- Family and field staff surveys
- The gathering of community needs assessment data during program governance, health advisory, all-staff, and parent committee meetings
- Collaborating with community partners to share information and resources
- Collection of data via reliable external and internal resources

To summarize the major community needs assessment findings, the EWU EHS service area is experiencing the following community trends:

- Lack of childcare options
- Lack of housing and rental assistance options
- Increases in homelessness

- Limited medical, therapy, and dental services including sparse pediatric services
- Regression in all stages of development
- Increases in reported child abuse or neglect cases
- Increases in domestic violence, substance use, and crime
- Poorer mental and social health
- Internet and phone service connectivity issues
- Burdensome grocery and fuel prices
- Lack of cooking skills and increased food insecurity
- Reported need for increased financial literacy and household budgeting skills

Based on the community needs assessment findings, EWU EHS formulated the following program goals:

Program Goal 1: EWU EHS will explore options and feasibility for sustainable childcare services to support program families in obtaining appropriate and high-quality childcare.

Program Goal 2: EWU EHS will extend and deepen partnerships within the local medical community to increase access to medical and therapy professionals for EHS families and staff.

Program Goal 3: EWU EHS will coordinate increased access to mental health services and mental health education to improve the self-reported mental health of children, families, and staff.

Section 1: Overview of the State of EWU EHS

History

Eastern Washington University Early Head Start (EWU EHS) is a federally funded program operating since 1998. For over 20 years, EWU EHS has served the remote communities of northeast Washington state including Ferry, Stevens, and Pend Oreille counties and excluding tribal lands. The Early Head Start program is one of EWU's innovative rural outreach and education programs that supports the university's strategic plan to *Ignite Change, Embrace Equity and Social Justice, Drive Innovation* and *Transform the Region*. EWU EHS is goal-oriented to help infants and toddlers develop the brain architecture, secure relationships, language, early numeracy, health, and developmental foundations that they need for success in learning. EWU EHS engages the child's parents in their unique roles as their child's earliest teacher, primary nurturer, and best advocate. The program equips rural families with the resources, expertise, connections, and support they need to plan and implement rich learning experiences in and around the child's home. EWU EHS has successfully operated both center-based and home-based program models. Currently, the program operates a home-based program structure year-round for 116 eligible infants, toddlers, and pregnant individuals. EWU EHS has continually provided high-quality services to underserved families using evidence-based curriculum and practicing inclusivity.

Service and Recruitment Area

EWU EHS serves and recruits eligible children and families in Ferry, Pend Oreille and Stevens County, except for tribal lands, located in the remote northeastern corner of Washington State, bordered to the north by Canada and to the east by the Idaho panhandle. The geographic service area covers over 6,000 square miles. The home-visit populations are spread throughout the region. The program has offices located in the towns of Newport, Colville, and Spokane Washington. Play and Learn parent-child group socializations are offered two times a month in Colville, Newport, Curlew, Chewelah, and Lone. Figure 1 shows a map of EWU EHS's service and recruitment areas.

Figure 1: EWU EHS Service and Recruitment Area Map



Source: EWU EHS Grant Application, 2019–2024

Program Locations and Slots

EWU EHS operates leased facilities located in Colville, Newport, and Spokane Washington. The facilities provide space for staff offices, meetings, and storage of materials. Newport has two facilities, one used mainly for staff offices and another with space to host infant and toddler socializations. The Colville facility also has space to host parent-child play groups. We intermittently conduct play groups in Lone, Curlew, and Chewelah using daily rentals that do not involve a leased space. Due to the vastness of the square miles covered to provide home visiting services, some staff have home-based offices if it is feasible to the program and requires less mileage for them to travel to families on their caseload. The EWU EHS Data Systems and Quality Improvement Manager, Lorrie Pirnie, is located fully from a home office in Arizona. See Table 1 for a summary of the program's facilities, play group locations, and offices.

Table 1: EWU EHS Facilities and Offices

Spokane and Arizona Offices		
<u>Street Address</u>	<u>Lorrie's Contact Info</u>	The Spokane facility is a leased space with staff offices, a conference room, and storage of materials.
101 W. Cataldo Ave.	4657 Big Bend St.	
Suite 150	Sierra Vista, AZ	
Spokane, WA 99201	85650-7022	
<u>Spokane EHS Team:</u>		
Carol Pike (Director)		
Jeana Nichols (Program Planning & Rural Engagement Manager)		
Justin Galloway (Fiscal Analyst 3)		
Tracie Johnson (Program Specialist)		
Lorrie Pirnie (Data Systems & Quality Improvement Manager) - <i>Home office in Arizona</i>		
Colville Office		
<u>Mailing/Street Address</u>	The Colville facility is a leased space with staff offices, a conference room, storage for materials, and space for parent-child play groups and onsite childcare during policy council meetings and other events.	
Colville Center		
146D Buena Vista Drive		
Colville, WA 99114		
<u>Colville Center Managers:</u>		
Dani Cartledge (Home-Based Services Supervisor)		
Sharon Sundheim (Family Engagement & Resource Manager)		
Brie Zier (Child Development Manager)		
Newport Offices (A & B)		
<u>Mailing Address</u>	<u>Street Addresses</u>	The Newport A office is a leased space used for staff offices, meetings, and storage of materials.
EWU Early Head Start	Newport A Office	
P.O. Box 650	233 N. Washington Ave	
Newport, WA 99156-0650	Newport, WA 99156	
	Newport B Center	The Newport B office is a leased space used for parent-child play groups and storage of materials.
	1600 1 st Street	
	Newport, WA 99156	
<u>Newport Center Managers:</u>		
Heidi Friedman (Child Development Manager)		
Jeannie Larson (Home-Based Services Supervisor)		

The number of eligible children and families to be served according to funding is 116 pregnant persons and children. EWU EHS operates a home-based program model year-round. As of September 2023, the actual number of enrolled children and families was 102/116. According to the 2022-2023 EWU EHS Program Information

Report (PIR) and Annual Report, the average monthly enrollment for pregnant individuals, infants, and toddlers was 94 with 80% of eligible children served. During 2022–2023, 153 children were served and 130 families. 10% of total enrollment were pregnant individuals. During 2022–2023, there were 6 dual language learners including English and American Sign Language, English and Korean, English/Russian/Tagalog, English/Russian/Ukrainian, and English and Spanish. The primary language of enrolled children was English with the exception of one family primarily speaking Spanish.

Eligibility Criteria

EWU EHS’s selection criteria is guided by community needs identified in the community assessment as well as policy council input and approval. See Table 2 for the 2023–2024 EWU EHS eligibility criteria.

Table 2: EWU EHS 2023–2024 Selection Criteria

Selection Priorities
Selection Step 1: Determine the Residential Area of the Enrollment Opportunity. <ol style="list-style-type: none"> Applicants residing in the city limits of Colville, Kettle Falls, Chewelah, and Newport <i>are not eligible</i> for the Head Start Act Sec. 645 (a)(2) Medically Underserved Area criteria. Applicants residing in all other locations in the EWU EHS service area <i>are income eligible</i> under the Head Start Act Sec. 645 (a)(2) Medically Underserved Area criteria.
Selection Step 2: Offer Enrollment Opportunities to Applicants in the Following Order. <p>First Priority: Income, Categorically & MUA Eligible Applicants (<i>max of 57 slots for MUA</i>)</p> <ol style="list-style-type: none"> Infant/Toddler with a current IFSP Infant/Toddler/Prenatal Applicant with highest Program Eligibility Criteria score <p>Second Priority: Over Income (<i>101–130% of the Federal Poverty Level -- max of 11 slots</i>)</p> <ol style="list-style-type: none"> Infant/Toddler with a current IFSP Infant/Toddler/Prenatal Applicant with highest Program Eligibility Criteria score <p>Third Priority: Over Income (<i>>= 131% of the Federal Poverty Level -- max of 40 slots</i>)</p> <ol style="list-style-type: none"> Infant/Toddler with a current IFSP Infant/Toddler/Prenatal Applicant with highest Program Eligibility Criteria score

Source: EWU EHS Grant Application, 2023–2024

Section 2: Methodology

Community Assessment Process

In accordance with the federal Head Start Program Performance Standards (HSPPS) and Head Start Act (HSA), the EWU EHS program conducted a Community Assessment (CA) in 2023 to effectively plan the program's five-year goals and support the needs of families. The CA provided the following information:

- Demographic information about eligible infants, toddlers, preschool age children, and expectant mothers, including their geographic location, race, ethnicity, and languages they speak, including:
 - Children experiencing homelessness in collaboration with, to the extent possible, McKinney-Vento Local Education Agency Liaisons (42 U.S.C. 11432 (6)(A));
 - Children in foster care; and
 - Children with disabilities, including types of disabilities and relevant services and resources provided to these children by community agencies;
- Information about the education, health, nutrition and social service needs of eligible children and their families, including prevalent social or economic factors that impact their well-being;
- Typical work, school, and training schedules of parents with eligible children;
- Other child development, child care centers, and family child care programs that serve eligible children, including home visiting, publicly funded state and local preschools, and the approximate number of eligible children served;
- Resources that are available in the community to address the needs of eligible children and their families; and,
- Strengths of the community.

EWU EHS's CA process began at the start of the program's grant year, July 2023, and was approved by January 2024. See Table 3 for a timeline of the community assessment process. The CA team consisted of key management staff including

EWU EHS's Director, program staff from various levels within the organization, parent volunteers, policy council representatives, governing board members, community agency partners, and Health Services Advisory Committee (HSAC) members. To create a cross-representational group, the team was selected based on expertise, experience, skills, and staff that reflected the diversity of the populations served. See Appendix A for a full list of the CA team members and their job titles. Policy Council members provided CA feedback, stayed informed during the CA process, filled out the Community Needs Assessment Family Survey (Appendix E), reviewed, and approved this report. The Governing Board was informed throughout the CA process, reviewed, and approved this report. The methodology of this CA was guided by the *Community Assessment: The Foundation for Program Planning in Head Start* produced by the Head Start Bureau, Administration of Children, Youth and Families, Administration for Children and Families, U.S. Department of Health and Human Services, the National Head Start Training and Technical Assistance Resource Center, and the National Center on Program Management and Fiscal Operations.

Table 3: Timeline of Community Assessment Process

<i>Month</i>	<i>CA Team Members Involved</i>	<i>CA Progress</i>	<i>Training & Materials</i>
<i>July</i>	<ul style="list-style-type: none"> -Key staff -Community partner (Rural Resources) 	<ul style="list-style-type: none"> -Establish the CA Team -Schedule regular CA meetings -Establish CA timeline -First meeting with Rural Resources, a community partner agency 	<ul style="list-style-type: none"> - Review and train key staff on the Office of Head Start's Community Assessment: The Foundation for Program Planning in Head Start -Review HSPPS 45 CFR 1302.11(b)(1) (i-vi) and Head Start Act
<i>Aug.</i>	<ul style="list-style-type: none"> -Key staff -Policy Council -Parent Committee volunteers -Governing Board 	<ul style="list-style-type: none"> -Develop CA questions -Inform key stakeholders about CA process -Meet with Parent Committee volunteers and gather CA data -Meet with Policy Council and gather CA data -Meet with Governing Board to inform about CA progress and review findings 	<ul style="list-style-type: none"> -Inform policy council, governing board, and Parent Committee volunteers about CA purpose and process -Review the HSPPS and Head Start Act
<i>Sept.</i>	<ul style="list-style-type: none"> -Key staff -Field staff 	<ul style="list-style-type: none"> -Create family and field staff surveys for data collection 	<ul style="list-style-type: none"> -Inform HSAC, community partners, enrolled and

	<ul style="list-style-type: none"> -HSAC -Enrolled parents -Waitlisted parents -Community partner (Early Support for Infants and Toddlers) 	<ul style="list-style-type: none"> -Gather data via CA Family Survey sent to all enrolled and waitlisted parents -Gather data via Field Staff CA Survey -Meet with HSAC and gather CA data -Meet with Early Support for Infants and Toddlers (ESIT), a community partner, to gather data for children with disabilities -Interview field staff from all counties during an all-staff meeting about CA trends and needs -Key staff collect demographic data, information on community resources, and internal data -Begin to analyze data as it is collected and continue to inform stakeholders of CA process 	<ul style="list-style-type: none"> waitlisted parents, and field staff about CA purpose and process -Review the HSPPS and Head Start Act
Oct. - Nov.	<ul style="list-style-type: none"> -Key staff -Community partner (Rural Resources) -Field staff -Policy Council -Governing Board 	<ul style="list-style-type: none"> -Second meeting with Rural Resources to share and review CA themes and data -Meet with EWU EHS Data Systems and Quality Improvement Manager to review internal data from ChildPlus -Data analysis and interpretation -Inform key stakeholders about CA findings and gather input on identifying trends, shaping program goals, and establishing program priorities 	<ul style="list-style-type: none"> -Review the HSPPS and Head Start Act
Nov. - Dec.	<ul style="list-style-type: none"> -Key staff 	<ul style="list-style-type: none"> -Prepare community assessment report 	<ul style="list-style-type: none"> -Reference the Office of Head Start's Community Assessment: The Foundation for Program Planning in Head Start -Review HSPPS 45 CFR 1302.11(b)(1)(i-vi) and Head Start Act
Jan.	<ul style="list-style-type: none"> -Key staff -Policy Council -Governing Board 	<ul style="list-style-type: none"> -Key staff communicated CA findings, program recommendations, and finalized CA report -Policy council and governing board reviewed, commented, and approved the CA report 	<ul style="list-style-type: none"> -Reference the Office of Head Start's Community Assessment: The Foundation for Program Planning in Head Start -Review HSPPS 45 CFR 1302.11(b)(1) (i-vi) and Head Start Act

Community Assessment Sources

A comprehensive list of CA sources can be found under References starting on page 60. External data was collected from reliable sources such as government agencies and national organizations. External data sources include:

- U.S. Census Bureau
- United for Alice
- Data USA
- Feeding America
- WA State Employment Security Department (ESD)
- WA State Department of Health (DOH)
- WA Prep for Healthy Youth
- Centers for Disease Control and Prevention (CDC)
- Head Start Early Learning and Knowledge Center (ECLKC)
- National Center for Homeless Education (NCHE)
- County Health Insights
- Adoption and Foster Care Analysis and Reporting System (AFCARS)
- Office of Financial Management (OFM)
- WA Office of Superintendent of Public Instruction (OSPI)
- Federal Reserve Economic Data (FRED)
- AWB Institute
- The Annie E. Casey Foundation – Kids Count Data Center
- Washington State Department of Social and Health Services (DSHS)
- County Health Rankings
- Washington State Department of Health Women, Infants and Children (WIC)
- WA State Department of Children, Youth, and Families (DCYF)

- Early Support for Infants and Toddlers (ESIT) – data from local NEWESD 101 office
- Community Assessment Resources gathered via various local agencies – Appendix B and Appendix C

Internal data sources include:

- Eastern Washington University Early Head Start Program Information Report: 2022–2023
- Eastern Washington University Early Head Start Community Needs Assessment Family Survey
- Eastern Washington University Early Head Start Community Needs Assessment Field Staff Survey
- Eastern Washington University Early Head Start Annual Community Assessment Update 2023
- Eastern Washington University Early Head Start Annual Community Assessment Update 2022
- Eastern Washington University Early Head Start Annual Report: 2022–2023
- Eastern Washington University Early Head Start Annual Report: 2021–2022
- Eastern Washington University Early Head Start Federal Grant Narrative Year 5: 2023–2024
- Eastern Washington University Early Head Start Federal Grant Narrative Year 1: 2019–2024
- Eastern Washington University Early Head Start Policy Council August 25th Meeting Minutes
- Eastern Washington University Early Head Start Parent Committee August 9th Meeting Minutes
- Eastern Washington University Early Head Start Health Services Advisory Committee (HSAC) September 6th Meeting Minutes
- Eastern Washington University Early Head Start Great Start September 18th All-Staff Meeting Minutes

- Eastern Washington University Early Head Start ChildPlus Data: Department's Data Tracking Software

The majority of the CA data collected was published between 2020–2022 with some data points from 2019 and 2023.

Methods of Data Collection

The following methods of data collections were used:

- Demographic WA state and county data referenced from reliable government sources
- Anonymous CA surveys sent to all EWU EHS enrolled and waitlisted families
- Anonymous CA surveys sent to all EWU EHS field staff
- CA information collected during EWU EHS Policy Council meeting
- CA information collected during EWU EHS Parent Committee meeting
- CA information collected during HSAC meeting from local health care providers
- Interviewed field staff from all counties during an all-staff meeting to collect CA data

The use of translation services and interpreters was applied, if necessary, throughout the CA process.

Methods of Data Analyses

The methods used for data analyses include:

- Quantitative analyses represented in graphs, as percentages, and data tables for:
 - WA state and Tri-County demographics
 - Community Needs Assessment Family Survey results
 - Community Needs Assessment Field Staff Survey results

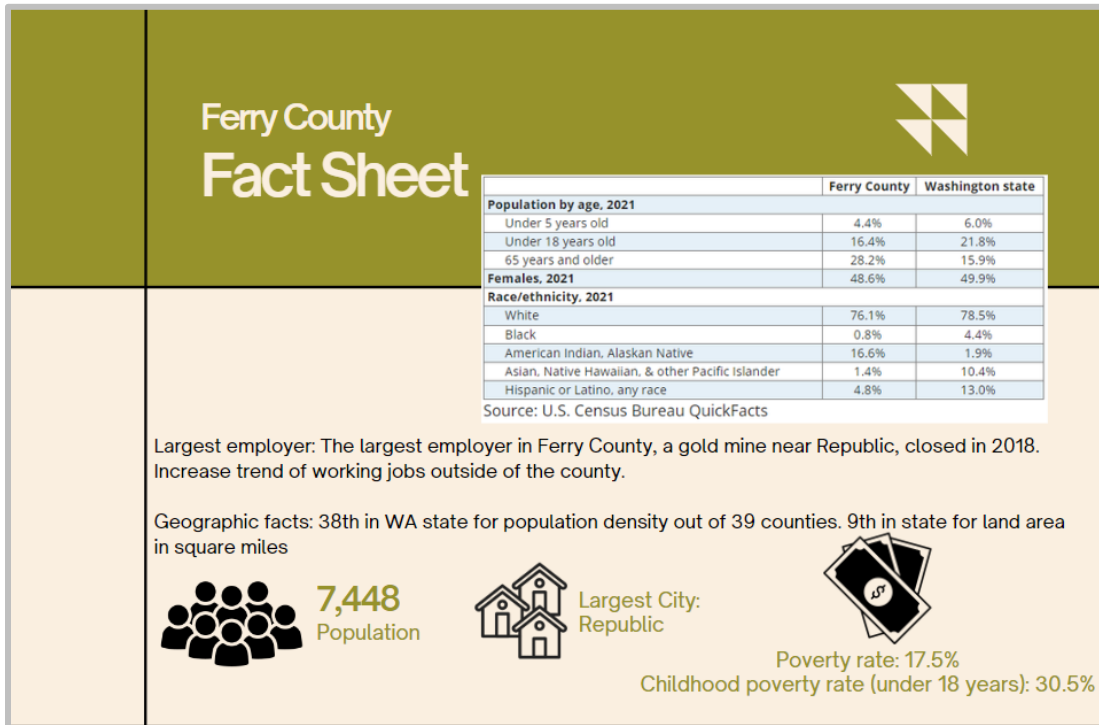
- EWU EHS Program Information Report (PIR) data
- EWU EHS ChildPlus data
- Qualitative analyses included as:
 - Quotes from family and field staff open-ended survey questions
 - Quotes from policy council, parent committee, HSAC, and staff meetings
 - Summaries of important comments and themes derived from community assessment survey responses
 - Summaries of important comments and themes derived from volunteer parent, HSAC, and field staff meetings and interviews
- Identifying trends and themes via both recent quantitative and qualitative community assessment data
- Utilizing past internal and external data sources such as the last two year's program annual reports, community assessment reports, and PIRs to synopsise service area trends, patterns, changes, and establish comparisons

Section 3: Service Area Data

Overview of the Service and Recruitment Areas

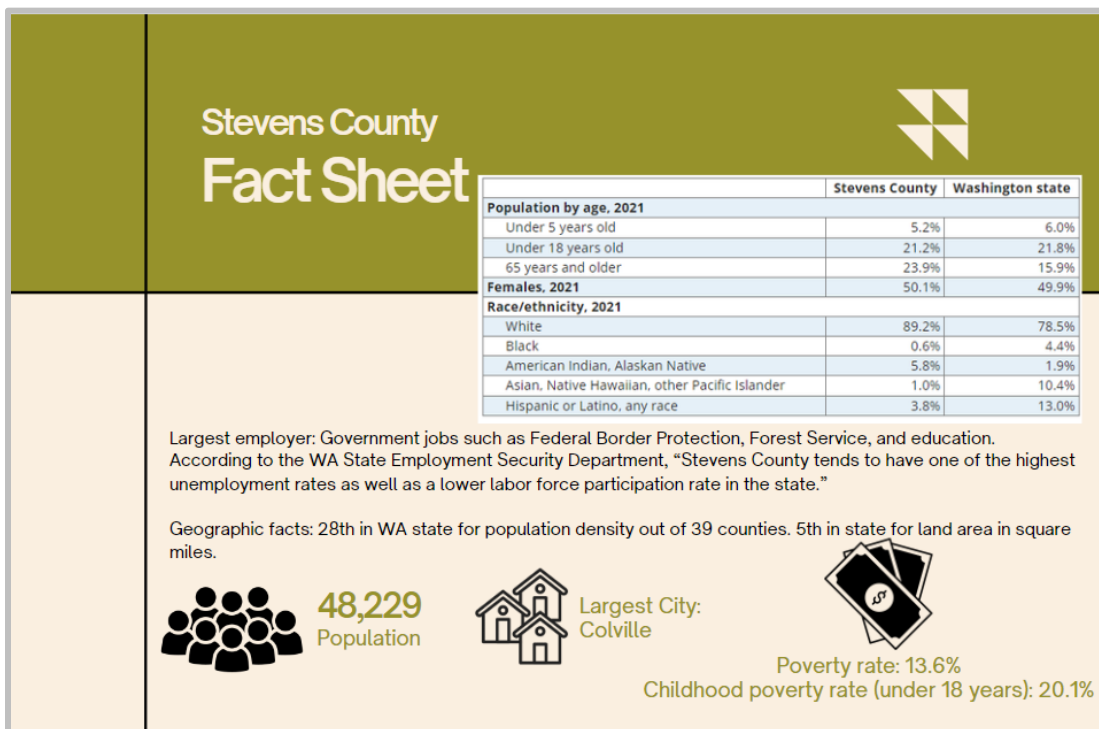
EWU EHS's defined service and recruitment area as designated by the Head Start federal grant includes Ferry, Pend Oreille and Stevens County, excluding tribal lands, located in the remote northeastern corner of Washington State. The geographic service area covers over 6,000 square miles serving prenatal persons and children age birth to three years old. The home-visit populations are spread throughout the region. These counties are federally designated frontier areas and medically underserved areas.

Figure 2: Ferry County Fact Sheet



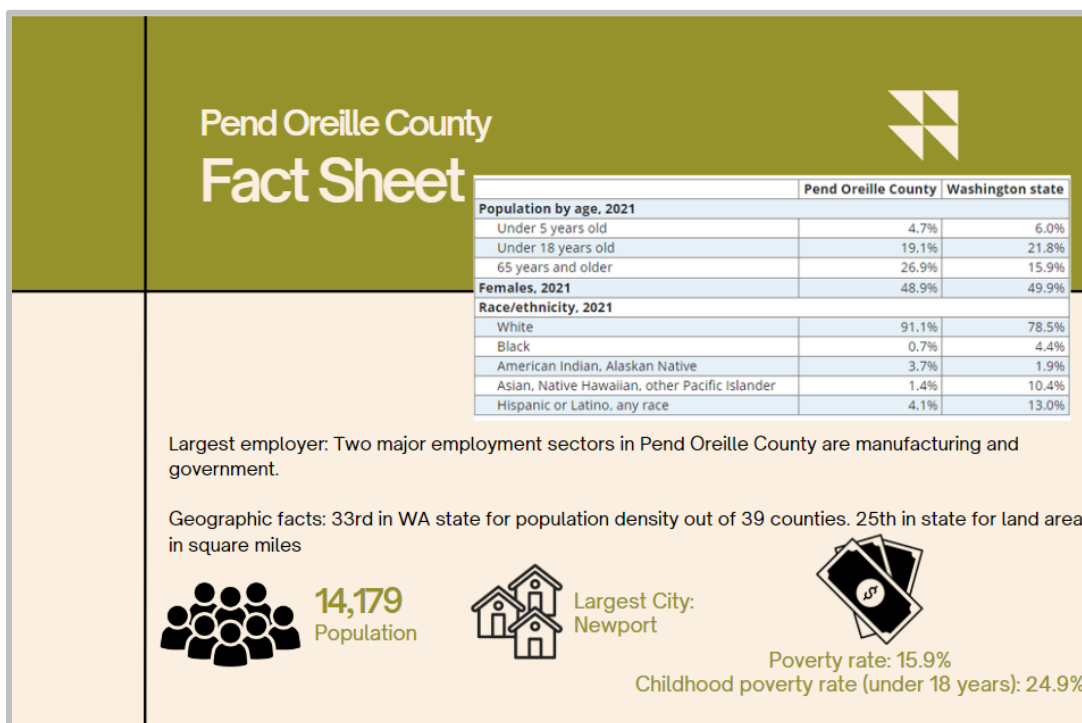
Source: U.S Census Bureau, 2022; Washington State Employment Security Dept., 2022

Figure 3: Stevens County Fact Sheet



Source: U.S Census Bureau, 2022; Washington State Employment Security Dept., 2022

Figure 4: Pend Oreille County Fact Sheet



Source: U.S Census Bureau, 2022; Washington State Employment Security Dept., 2022

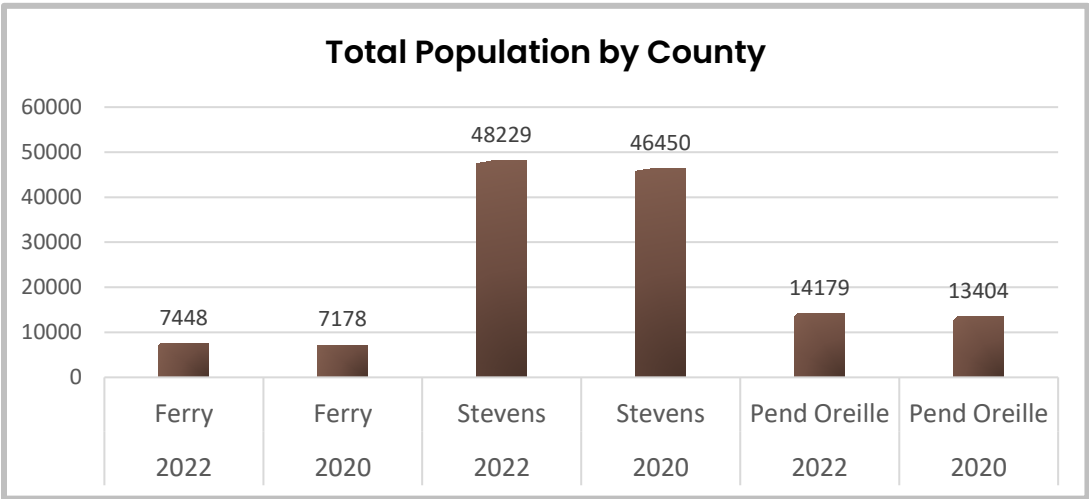
Service and Recruitment Area Demographics

The HSPPS requires demographic data about the eligible children and families in EWU EHS's service and recruitment area.

A. General Demographics

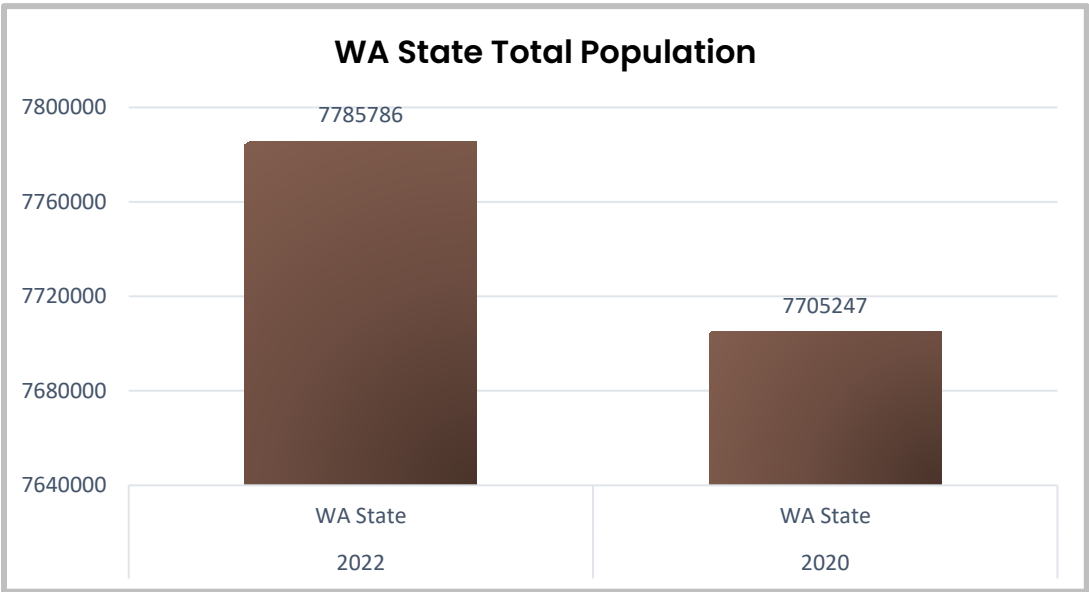
The total population of each county in EWU EHS's service and recruitment area slightly increased from years 2020 to 2022. See Figure 5 for the total population by county, and Figure 6 to compare the Tri-Counties' total population to WA state's total population.

Figure 5: Total Population by County



Source: U.S Census Bureau, 2020-2023

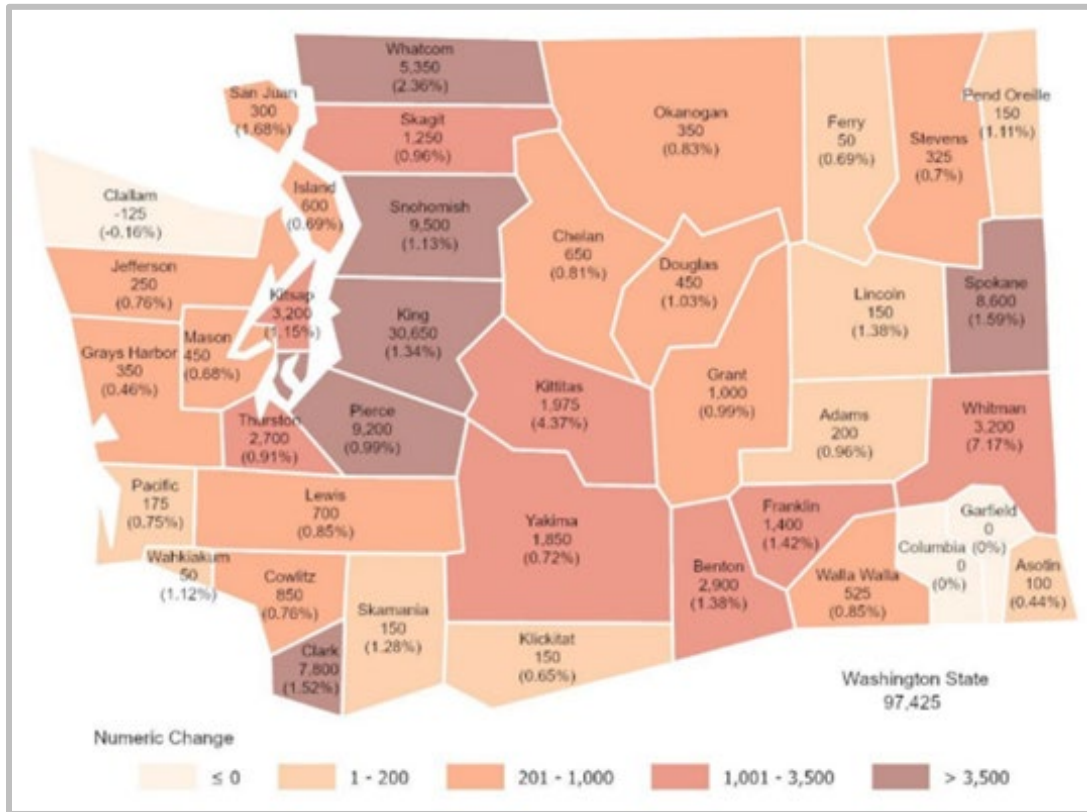
Figure 6: WA State Total Population



Source: U.S Census Bureau, 2020-2023

Figure 7 shows the WA state 2023 population changes by county.

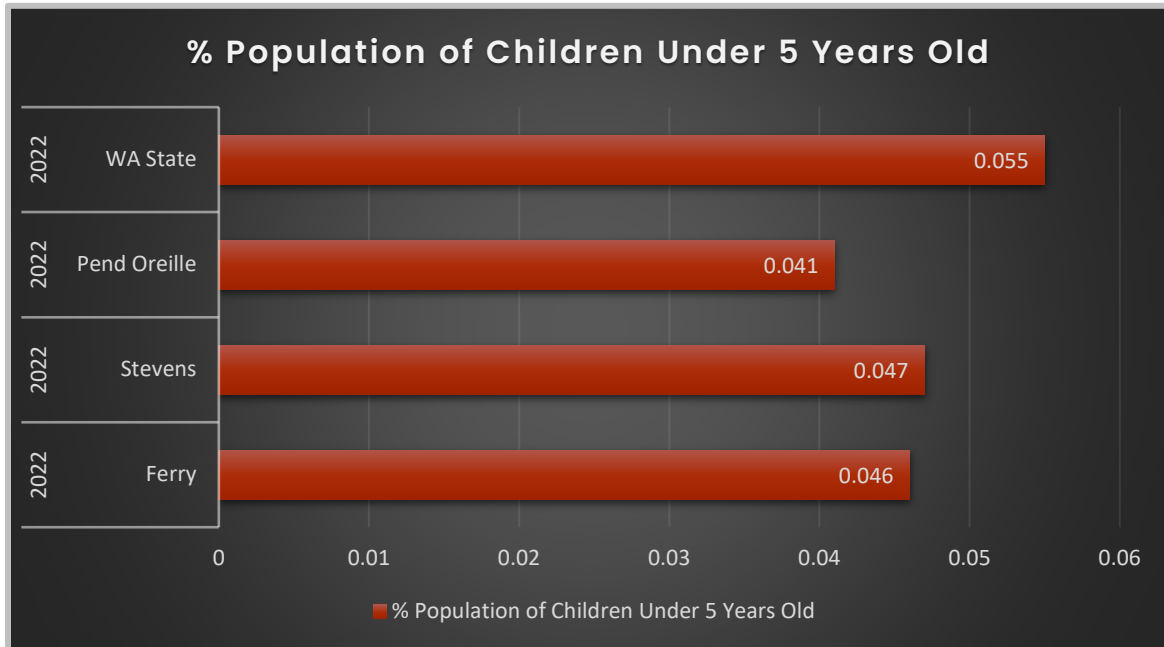
Figure 7: Distribution of Population Change by County



Source: Office of Financial Management (OFM), 2023

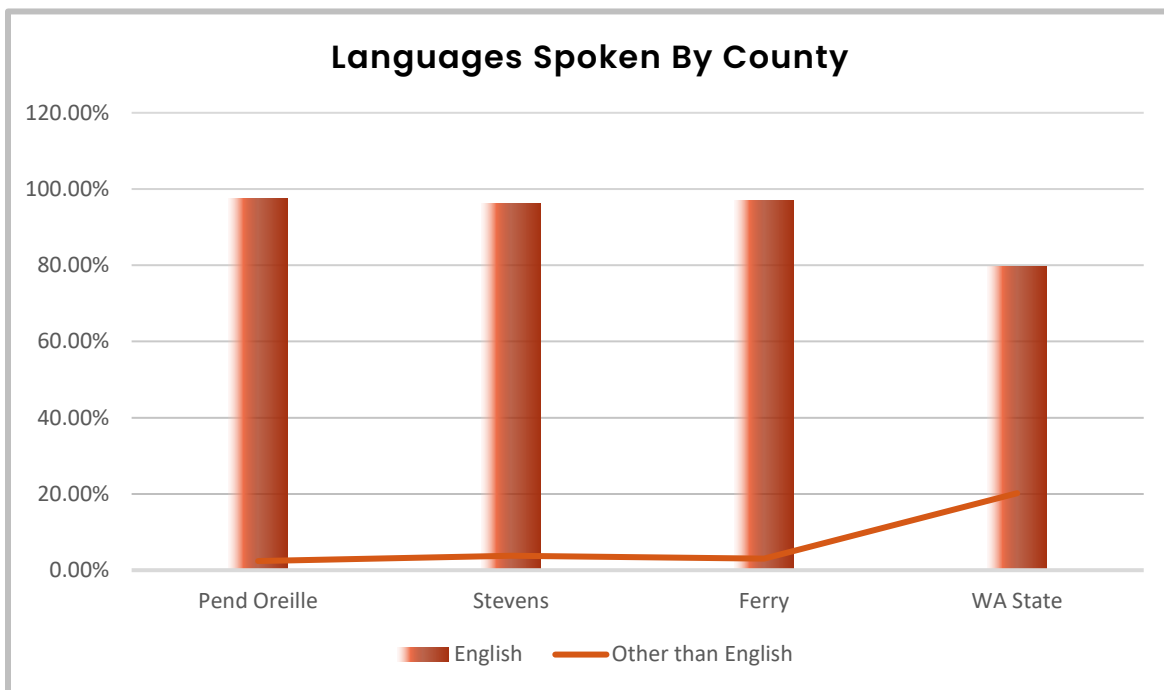
According to the Office of Financial Management (OFM), Ferry, Stevens, and Pend Oreille counties are defined as rural counties with a population density less than 100 persons per square mile or counties smaller than 225 square miles. As of April 1, 2023, the figures include Ferry County at 3.31, Stevens County at 19.12, and Pend Oreille County at 9.80. Figure 8 displays the percent of population of children under 5 years old, Figure 9 provides demographics about the languages spoken in EWU EHS's service area, and Table 4 displays race and Hispanic origin demographics.

Figure 8: Percent of Population of Children Under 5 years Old



Source: U.S Census Bureau, 2022

Figure 9: Languages Spoken By County



Source: U.S Census Bureau, 2022

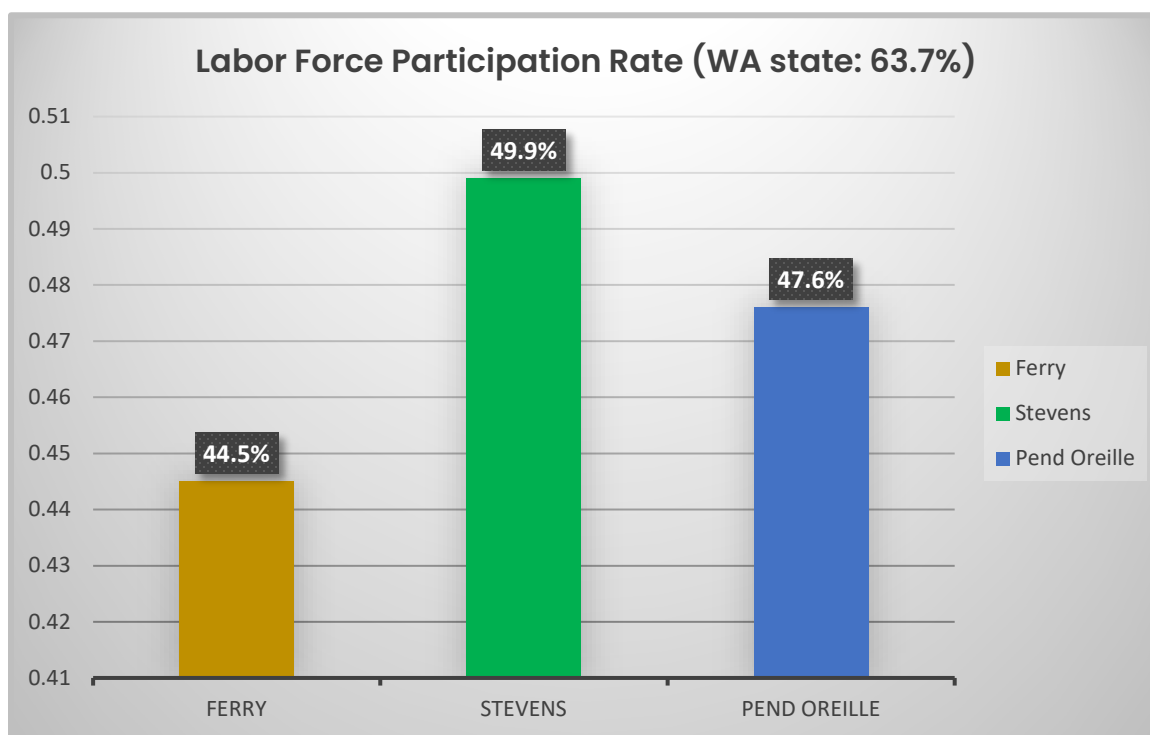
Table 4: Race and Hispanic Origin by County

County	White (non- Hispanic)	Black or African American	American Indian & Alaska Native	Asian	Hispanic or Latino	2 or More Races
Ferry	72.3%	0.9%	16.0%	1.1%	5.8%	5.3%
Stevens	86.0%	0.6%	5.5%	0.8%	4.4%	3.6%
Pend Oreille	87.1%	0.7%	3.7%	1.1%	5.2%	3.6%
WA State	65.1%	4.6%	2.0%	10.5%	14.0%	5.3%

Source: U.S Census Bureau, 2022

The labor force participation rate represents the proportion of the total population 16 years of age and over that is in the labor force. EWU EHS's service area has a lower population in the labor force compared to WA state.

Figure 10: Labor Force Participation Rate



Sources: U.S Census Bureau, 2021

The Tri-Counties have higher rates of unemployment compared to WA state.

Table 5: Employment Status by County

County	Unemployment Rate (WA state: 3.8%)
Ferry	6.0%
Stevens	4.1%
Pend Oreille	4.3%

Source: Washington State Employment Security Dept., 2023

Table 6 displays data about education status with Ferry, Stevens, and Pend Oreille counties having lower percentages of bachelor's degrees or higher compared to WA state.

Table 6: Education Status

Location	High School Graduate	Bachelor's Degree or Higher	Five-Year High School Graduation Rate
Ferry	90.2%	17.9%	68.75%
Stevens	92.4%	20.8%	76.16%
Pend Oreille	92.8%	22.1%	93.20%
WA State	91.9%	37.3%	85.45%

Sources: U.S Census Bureau, 2017-2021; AWB Institute, 2021-2022

Demographics for expectant mothers and births are found in tables 7 and 8. In 2020, the Tri-Counties had higher fetal deaths, induced abortions, and birth rates per 1,000 women between the ages of 15 to 44 years compared to WA state. The data reflects some risky pregnancy behaviors at a higher percentage in the Tri-Counties compared to WA state. For example, WA state had a lower percentage of births where the mother smoked during pregnancy compared to the Tri-Counties. The teen pregnancy rate for Ferry and Stevens County was higher than WA state's teen pregnancy rate in 2020. However, the Tri-Counties revealed strengths with high percentages of breastfeeding mothers.

Table 7: Total # of Live Births/Pregnancy Rate; Teen Pregnancy Rate (ages 15–19); Rate of Births, Induced Abortions, and Fetal Deaths per 1,000 Women (ages 15–44)

Location	Total # of Live Births	Teen Pregnancy Rate (ages 15–19)	Rate of Births, Induced Abortions, and Fetal Deaths per 1,000 Women (ages 15–44)
Ferry	64	36 births per 1,000	76.8
Stevens	407	13 births per 1,000	67.8
Pend Oreille	114	Not found	68
WA State	83,101	10.1 births per 1,000	66.6

Source: WA State Department of Health, Centers for Disease Control and Prevention, County Health Insights; 2020

Table 8: % of Births Where the Mother Smoked During Pregnancy; % of Births Where the Mother Initiated Breastfeeding; % Low Weight Births (227–2499 grams); % of Preterm Birth

Location	% of Births Where the Mother Smoked During Pregnancy	% of Births Where the Mother Initiated Breastfeeding	% Low Weight Births (227–2499 grams)	*% of Preterm Birth
Ferry	11.1	92.9	Not listed	7.3
Stevens	10.5	93.3	6.6	7
Pend Oreille	8.7	96	Not listed	7.7
WA State	4.4	93.7	7	9.1

Source: WA State Department of Health, 2020; County Health Insights, 2019–2021

*Note: Preterm birth defined as the percent of singleton births with an estimated gestation age of less than 37 weeks.

B. Income and Poverty Status

In comparison to WA state, the Tri-Counties have less per capita income, significantly lower median household incomes, higher percentages of people in poverty with Ferry County being almost double compared to the overall state of WA, and high percentages of the population living below the poverty line.

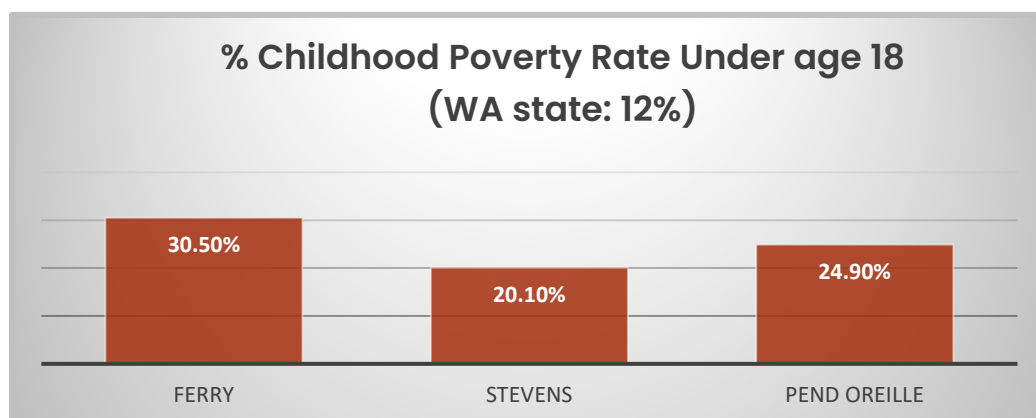
Table 9: General Income and Poverty Status

Location	Per Capita Income	Median Household Income	Persons in Poverty	Percentage of Population Living Below the Poverty Line (National Average: 12.8%)
Ferry	\$28,068	\$45,907	17.5%	17.1%
Stevens	\$30,518	\$57,206	13.6%	12.8%
Pend Oreille	\$31,346	\$59,134	15.9%	9.8%
WA State	\$43,817	\$82,400	9.9%	10.2%

Sources: U.S Census Bureau, 2022; Data USA, 2020, 2022

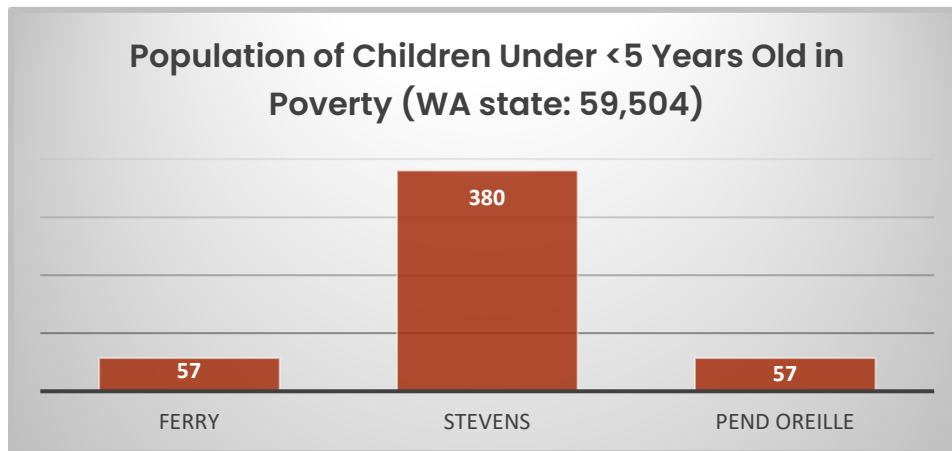
The child poverty rate is the percentage of individuals in a county under 18 years of age and living with families whose income falls below the Federal Poverty Level (FPL) for their family size (U.S Census Bureau, 2021). The childhood poverty rate is higher in all three service area counties compared to WA state with Ferry and Pend Oreille being more than double WA state's rate.

Figure 11: % Childhood Poverty Rate (Under age 18)



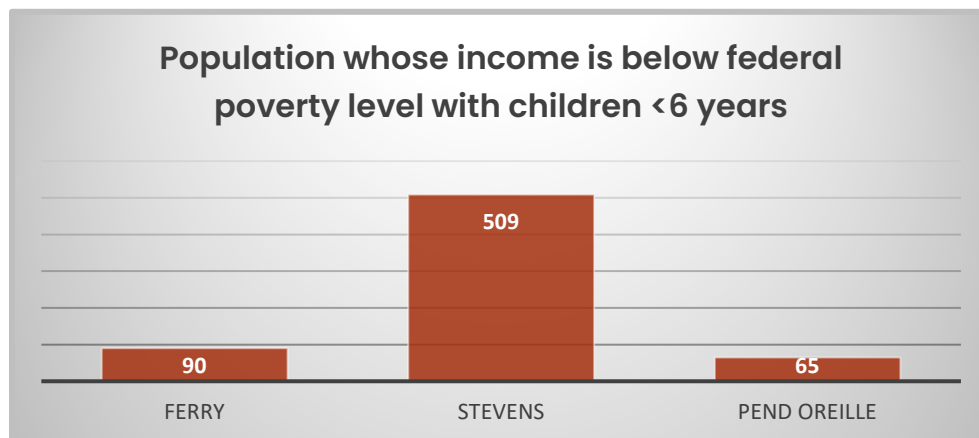
Sources: U.S Census Bureau, 2021; Data USA, 2020, 2022

Figure 12: Population of Children Under <5 Years Old in Poverty



Sources: U.S Census Bureau, 2021; Data USA, 2020, 2022

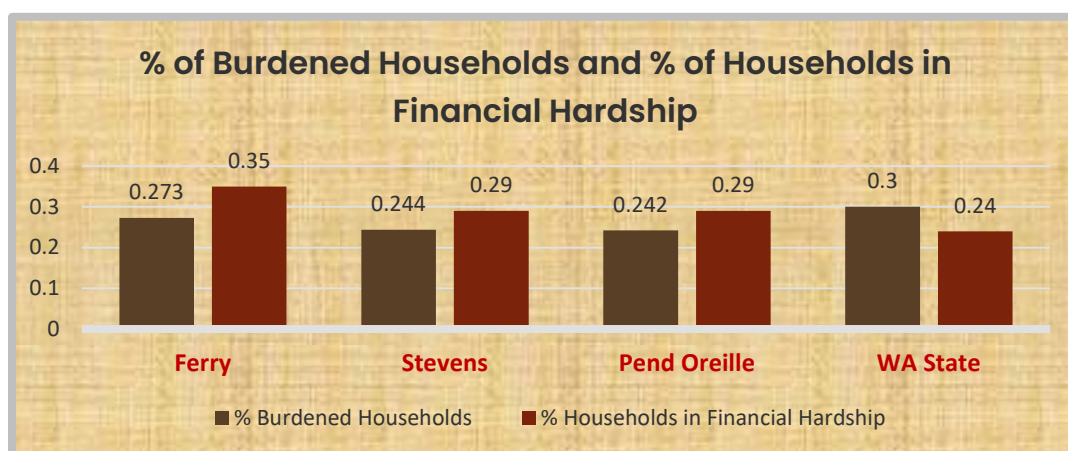
Figure 13: Population whose income is below federal poverty level with children <6 years



Sources: U.S Census Bureau, 2021; Data USA, 2020, 2022

According to the Federal Reserve Economic Data (FRED), “burdened households are those households who pay 30 percent or more of their household income on housing (such as rent or mortgage expenses).” The United for Alice organization, defines households in financial hardship as “the percentage of households in a county with annual incomes above the Federal Poverty Level but below the ALICE threshold, the amount needed to cover the basic costs of living.” ALICE stands for Asset Limited, Income Constrained, Employed. This refers to those earning more than the Federal Poverty Level, but not enough to afford the basics where they live. Ferry, Stevens, and Pend Oreille County have a higher percentage of households in financial hardship compared to WA state.

Figure 14: % of Burdened Households and % of Households in Financial Hardships



Sources: United for ALICE, 2021; FRED, 2021; Kids Count Data Center, 2019

C. Homelessness

Tables 10–12 display the number of children experiencing homelessness enrolled at local education agencies (LEA) during the 2019–2020 school year, 2020–2021 school year, and 2021–2022 school year. The data was gathered for Ferry, Stevens, and Pend Oreille County in collaboration with McKinney–Vento Local Education Agency Liaisons. For comparison purposes, in 2021 the National Center for Homeless Education (NCHE) reported WA state’s percentage of enrolled homeless students at 3%. The figures in the tables below demonstrate how numerous school districts throughout the Tri-Counties are well above the state’s 3% of enrolled homeless students. For example, during the 2020–2021 school year the Wellpinit School District in Stevens County had 16.3% of enrolled students who were homeless which is more than five times WA state’s percentage of homeless students that school year.

Table 10: % Homeless Children by School District in Ferry County

School District	% Homeless Children	School Year
Keller	8.3	2019–2020
Curlew	6	2019–2020
Orient	0	2019–2020
Inchelium	0	2019–2020
Republic	2.1	2019–2020

Keller	9.1	2020-2021
Curlew	3.6	2020-2021
Orient	0	2020-2021
Inchelium	0	2020-2021
Republic	2.2	2020-2021
Keller	6.7	2021-2022
Curlew	10.6	2021-2022
Orient	0	2021-2022
Inchelium	0	2021-2022
Republic	0.3	2021-2022

Source: WA Office of Superintendent of Public Instruction (OSPI), 2019-2022

Table 11: % Homeless Children by School District in Stevens County

School District	% Homeless Children	School Year
Onion	0	2019-2020
Chewelah	5.9	2019-2020
Wellpinit	12.8	2019-2020
Valley	2.3	2019-2020
Colville	1.5	2019-2020
Loon Lake	0	2019-2020
Summit Valley	0	2019-2020
Evergreen	0	2019-2020
Columbia	5.6	2019-2020
Mary Walker	7.1	2019-2020
Northport	9.7	2019-2020
Kettle Falls	2.2	2019-2020
Onion	0	2020-2021
Chewelah	6.3	2020-2021
Wellpinit	16.3	2020-2021
Valley	2.8	2020-2021
Colville	2.3	2020-2021
Loon Lake	0.4	2020-2021
Summit Valley	0	2020-2021
Evergreen	0	2020-2021

Columbia	6.8	2020-2021
Mary Walker	1.3	2020-2021
Northport	9	2020-2021
Kettle Falls	2.4	2020-2021
Onion	0	2021-2022
Chewelah	7.1	2021-2022
Wellpinit	0.3	2021-2022
Valley	3.3	2021-2022
Colville	2.9	2021-2022
Loon Lake	0	2021-2022
Summit Valley	0	2021-2022
Evergreen	0	2021-2022
Columbia	2.9	2021-2022
Mary Walker	2.1	2021-2022
Northport	9.1	2021-2022
Kettle Falls	3	2021-2022

Source: WA Office of Superintendent of Public Instruction (OSPI), 2019-2022

Table 12: % Homeless Children by School District in Pend Oreille County

School District	% Homeless Children	School Year
Newport	10.3	2019-2020
Cusick	17.7	2019-2020
Selkirk	8.1	2019-2020
Newport	9.2	2020-2021
Cusick	15.6	2020-2021
Selkirk	7.9	2020-2021
Newport	7.3	2021-2022
Cusick	16.5	2021-2022
Selkirk	6.4	2021-2022

Source: WA Office of Superintendent of Public Instruction (OSPI), 2019-2022

D. Foster Care Status

Table 13 provides data about the enrolled EWU EHS children in foster care. Table 14 provides data about eligible children in foster care.

Table 13: Enrolled EWU EHS Children in Foster Care

Children in Foster Care	Total
2018–2019	23
2019–2020 (no report due to COVID)	0
2020–2021	23
2021–2022	22
2022–2023	12

Source: EWU EHS ChildPlus Data, 2018–2023

Table 14: Number of Eligible Children in Foster Care

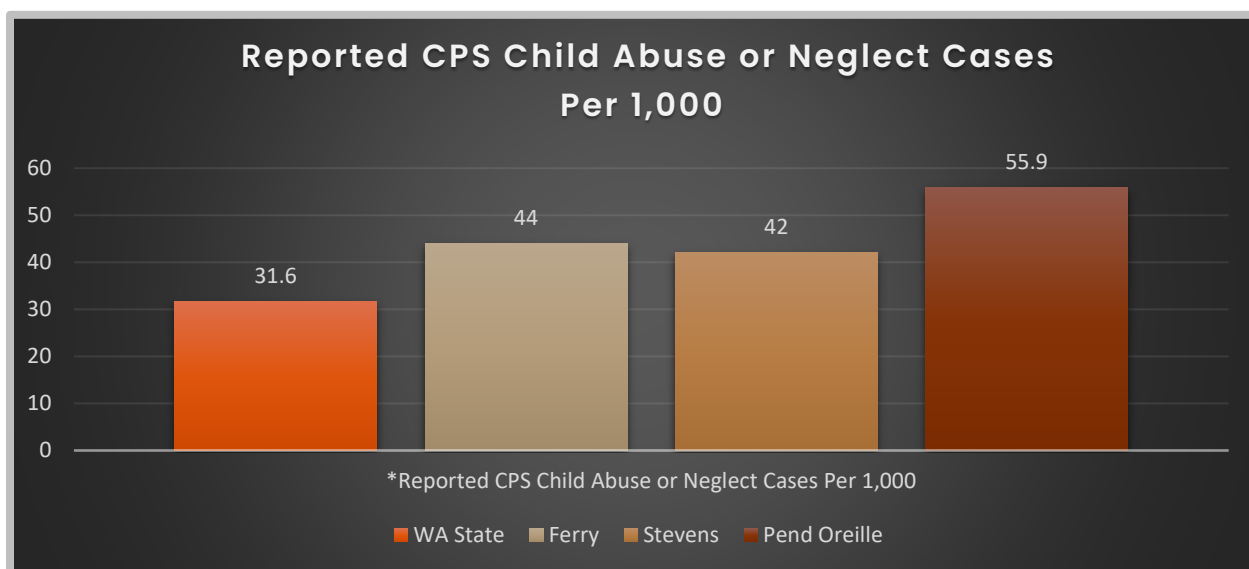
Location	*# of Eligible Children in Foster Care	Year
WA State	8,894	2021
Ferry	14	2021
Stevens	56	2021
Pend Oreille	27	2021
Ferry	10	2022
Stevens	48	2022
Pend Oreille	20	2022
Ferry	13	2023
Stevens	52	2023
Pend Oreille	24	2023

Sources: WA State Adoption and Foster Care Analysis and Reporting System (AFCARS), 2021; WA State Department of Children, Youth, and Families (DCYF), Office of Innovation, Alignment, and Accountability (OIAA), RPT Placements, 2021, 2021, 2023.

*Notes: This includes counts of children/adults, ages 0–21, in DCYF custody during calendar year. Children may be counted in multiple years if they were in out of home care across the years

Figure 15 displays the reported Child Protective Services (CPS) child abuse or neglect cases per 1,000 children. Note that all three service area counties have higher reported child abuse and neglect cases compared to WA state.

Figure 15: Reported CPS Child Abuse or Neglect Cases Per 1,000



Source: County Health Insights, 2020

*Note: Child abuse is measured as the number of children 0–17 years of age who were reported to Child Protective Services (CPS) as victims of abuse or neglect and were accepted for further action. The rate is reported per 1,000 children. The incidence of abuse is likely higher than the rates indicate because not all abuse gets reported to CPS.

E. Children with Disabilities

The CA team collaborated with Early Support for Infants and Toddlers (ESIT), a local community partner also known as NEWESD 101, to gather data about children with disabilities. ESIT serves children in the Tri-Counties from birth to age three with disabilities or developmental delays. Table 15 shows ESIT's data pull for the time period between Sept. 1st 2021 to Sept. 1st 2023. ESIT reported serving a total of 59 children with an Individualized Family Service Plan (IFSP).

Table 15: Early Support for Infants and Toddlers (ESIT) data pull for the time period of 9/1/21 – 9/1/23

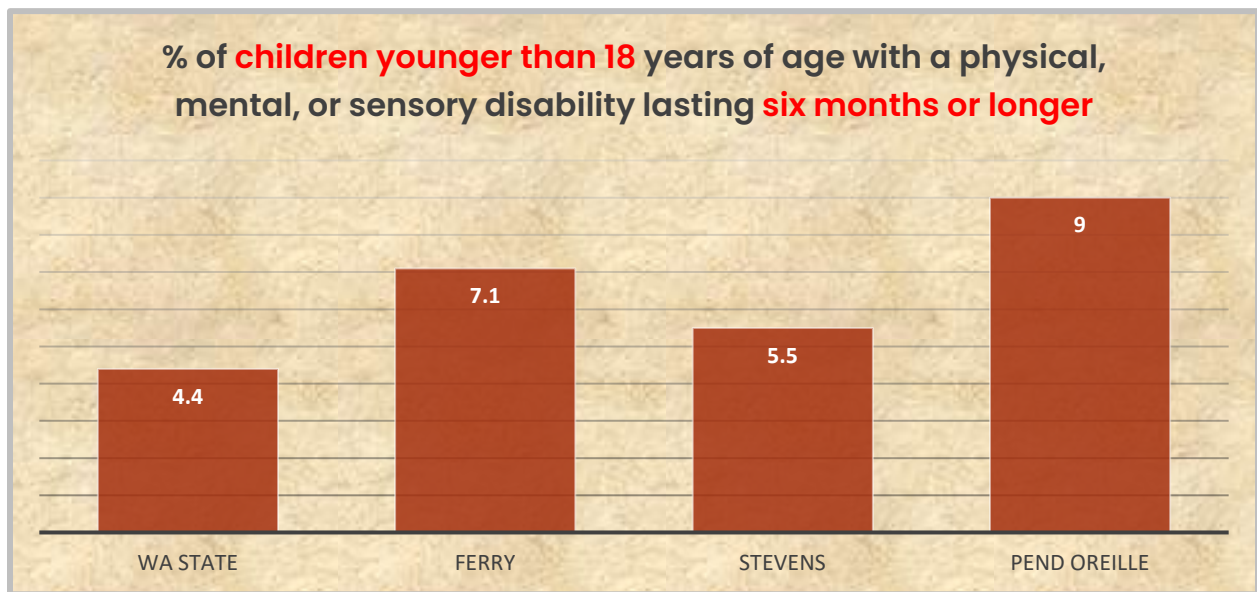
Disability Service	# of Children Receiving ESIT Service
Service Coordination	59
Speech/Language Pathology	32
Occupational Therapy	25
Physical Therapy	28

Special Instruction	4
Hearing Services	3
Family Training	3
Counseling	2
Nutrition Service	3
Transportation and Related Costs	4

Source: Early Support for Infants and Toddlers (ESIT)/NEWESD 101, 2021-2023

According to County Health Insights, from year 2017-2021, the Tri-Counties reported a higher percentage of children younger than age 18 with a physical, mental, or sensory disability lasting six months or longer compared to WA state's percentage. Pend Oreille was more than double the state's percentage.

Figure 16: % of children younger than 18 years of age with a physical, mental, or sensory disability lasting six months or longer



Source: County Health Insights, 2017-2021

Table 16: % of children <5 years of age with a physical, mental, or sensory disability lasting six months or longer

Location	% of children <5 years of age with a physical, mental, or sensory disability lasting six months or longer
WA State	Not provided
Ferry	2.8
Stevens	1.1
Pend Oreille	0

Source: County Health Insights, 2017–2021

See Appendix B for information about available community resources that support children with disabilities in all three service area counties.

Section 4: Identified Needs

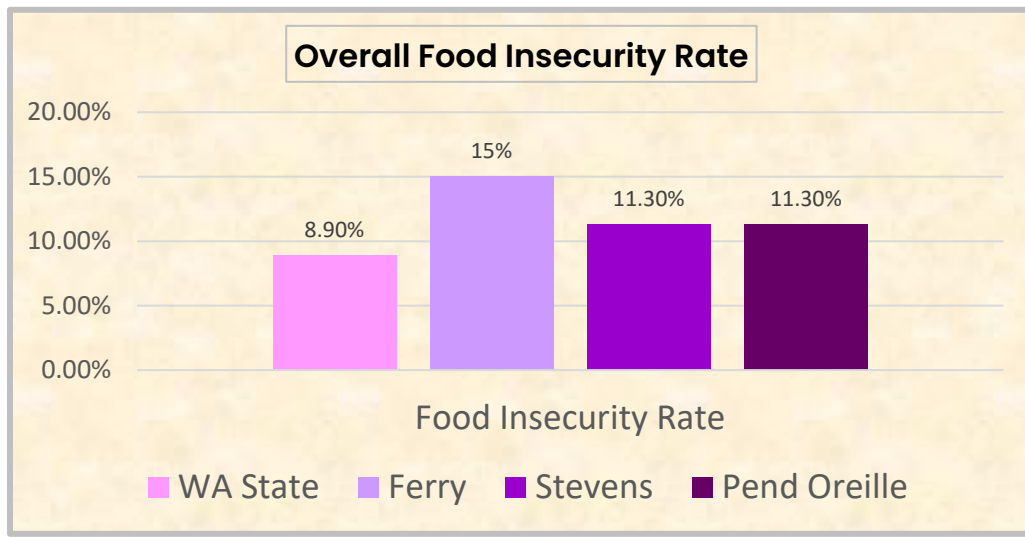
Nutrition

Nutrition was noted as a significant community need throughout the CA process. The CA revealed the following themes regarding nutrition across the Tri-Counties:

- Rising cost of groceries being the number one barrier to obtaining adequate nutrition
- Lack of quality produce and nutritious options
- Families report feeling dissatisfied with virtual Women, Infants, and Children (WIC) nutrition services and prefer in-person help
- Location of grocery stores being inconvenient or miles away
- Busy schedules being a barrier to obtaining adequate nutrition and cooking healthy meals

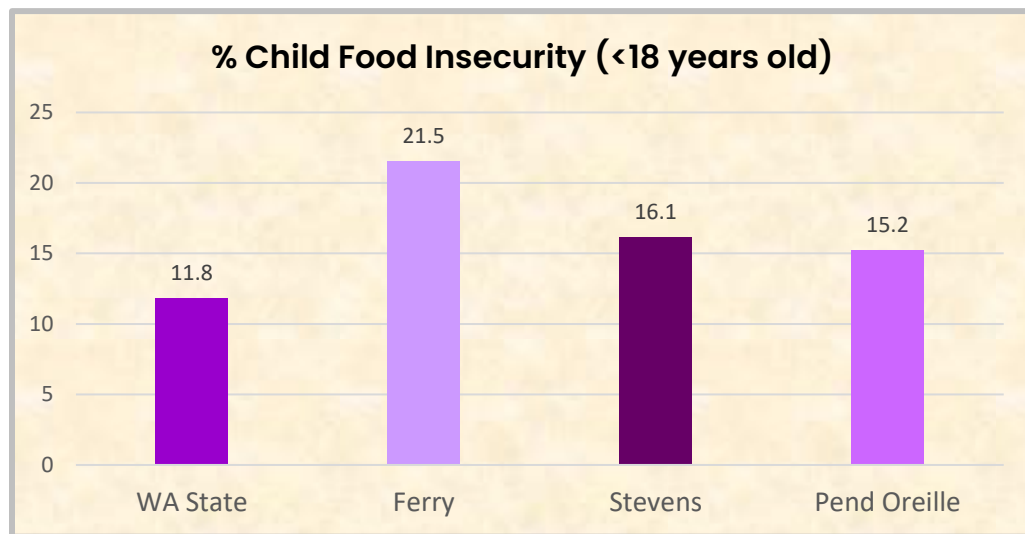
According to Feeding America (2021), food insecurity is defined as people experiencing limited access to healthy foods. For comparison, the WA state food insecurity rate is 8.9% and all three service area counties are at higher rates. The rate of children under age 18 experiencing food insecurity is also higher in the Tri-Counties than it is in WA state. See Figures 17 and 18 for details.

Figure 17: Food Insecurity Rate



Source: Feeding America, 2021

Figure 18: % Child Food Insecurity (less than age 18)



Source: Feeding America, 2021

The use of government food assistance programs such as Supplemental Nutrition Assistance Program (SNAP) and Temporary Assistance to Needy Families (TANF) is greater in the Tri-Counties compared to WA state's average utilization of these programs.

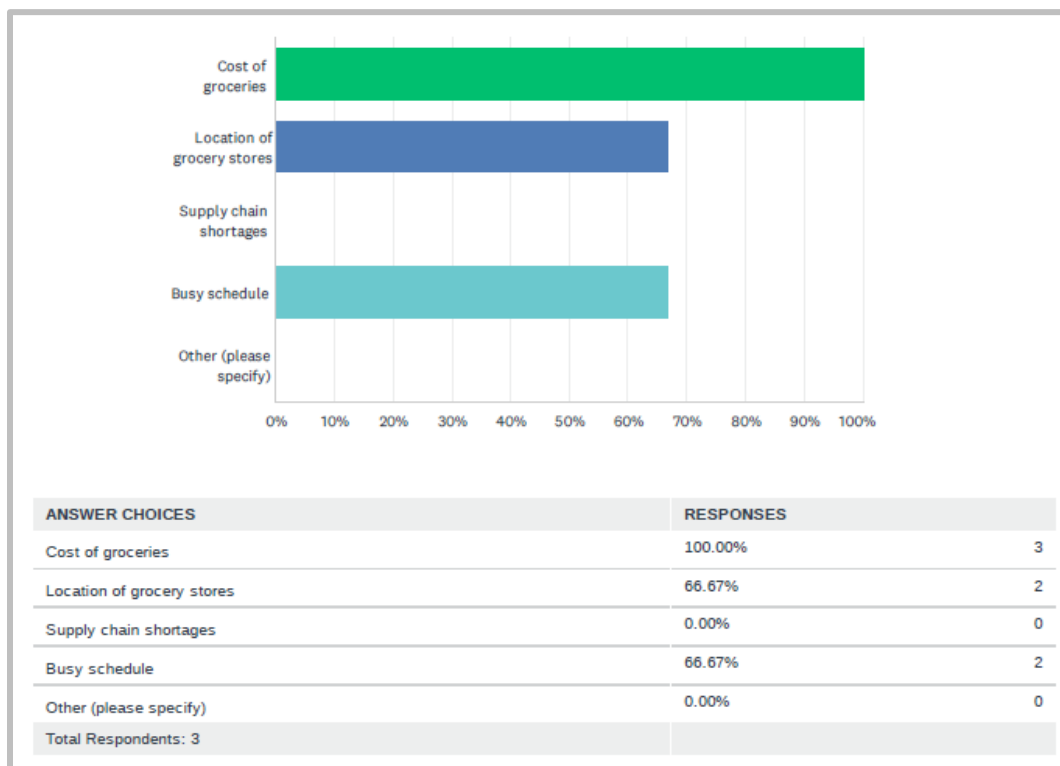
Table 17: Use of Food Assistance

Location	Supplemental Nutrition Assistance Program (SNAP) Recipients per 100 persons	Temporary Assistance to Needy Families (TANF) Child Recipients age birth-17	Women, Infants and Children (WIC) Nutrition Program Participants
WA State	15.36	4.49	195,655
Ferry	28.60	9.06	208
Stevens	22.19	6.02	919
Pend Oreille	25.16	8.51	263

Source: DSHS, 2021; WA State Dept. of Health, 2022

EWU EHS's past two annual community assessment updates revealed a trend with families reporting an inability to meet adequate nutrition needs every month. Based on the 2023 EWU EHS Community Needs Assessment Family Survey, the cost of groceries was reported as the largest barrier preventing households from having adequate nutrition available. Location of grocery stores and busy schedules were tied as the second greatest barriers to meeting nutrition needs (see Figure 19 for family survey results). Parents interviewed at the EWU EHS Parent Committee Meeting reported that the local grocery stores tend to sell "expired foods and low-quality produce." 40% of parent survey respondents reported they would benefit from menu planning and cooking classes. Policy council parents explained that there are few grocery store options, limited food options at local markets, food prices are high, and it is hard to find fresh foods. A parent explained that "a community garden in Pend Oreille County would be difficult because it is hard to grow foods with so much clay in the soil." Some parents noted they drive over an hour to find better produce and more variety. A parent stated in the survey that "it's difficult to budget food costs. When the paycheck comes in twice a month, it's hard to buy a big shopping cart full of groceries that will last. It ends up that we have to travel frequently to shop adding to the cost because of fuel prices." Parents expressed that they feel guilt around not being able to buy their children costly snacks. Service area health care providers attending the EWU EHS HSAC meeting and field staff reported findings around nutrition needs that were consistent with what parents shared. A local registered dietitian attending the EWU EHS HSAC meeting noted that there seems to be more issues with feeding and more parents seeking help about picky eaters.

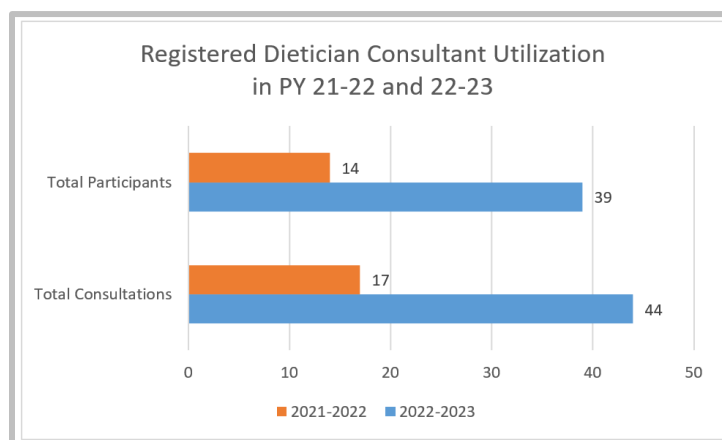
Figure 19: Family Survey Question Results: What barriers prevent your household from having adequate nutrition available?



Source: EWU EHS Community Needs Assessment: Family Survey, 2023

The utilization of EWU EHS’s licensed Registered Dietitian Consultant significantly increased during this past year compared to 2021-2022. Families report being eager to learn more about nutrition.

Figure 20: EWU EHS Registered Dietitian Consultant Utilization



Source: EWU EHS ChildPlus Data, 2021-2023

Mental and Social Needs

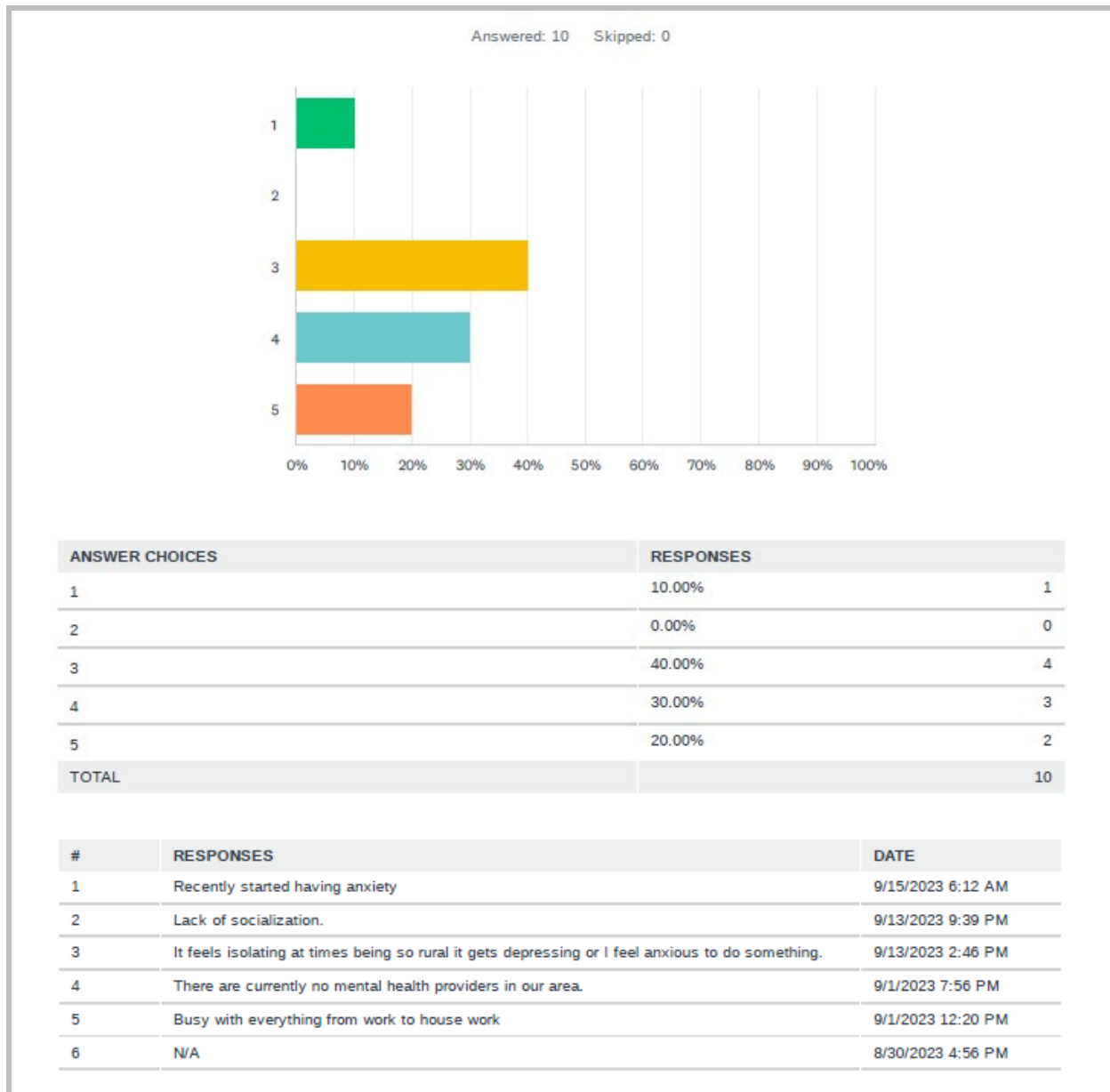
Mental Health

The enrolled families, policy council, HSAC, and field staff report the following conclusions about EWU EHS's service area's mental and social health:

- An increase in anxiety and depression across all ages including children.
- Limited mental health providers that accept state insurance. Enrolled parents report that when they are able to schedule a mental health counseling appointment with the local agency, NEW Alliance, providers seem to treat patients on state insurance rudely and/or rush during the session. Families report having a hard time finding mental health counselling services they trust.
- Counseling via telehealth is challenging to do with poor internet connectivity
- Lack of social supports in the community
- Lack of sleep causing poorer mental health
- Overall regression in all stages of development and increased social anxiety among families
- Overbooked schedules and feeling fatigued
- Illnesses and various viruses impacting families' well-being.
- Increases in domestic violence and substance use
- Field staff noticing higher levels of overall stress

EWU EHS's past two annual community assessment updates revealed a trend with families reporting an increase in anxiety and feelings of isolation. Based on the 2023 EWU EHS Community Needs Assessment Family Survey, families reported that there is a lack of mental health providers in their area and themes of parents reporting feelings of anxiety (see Figure 21).

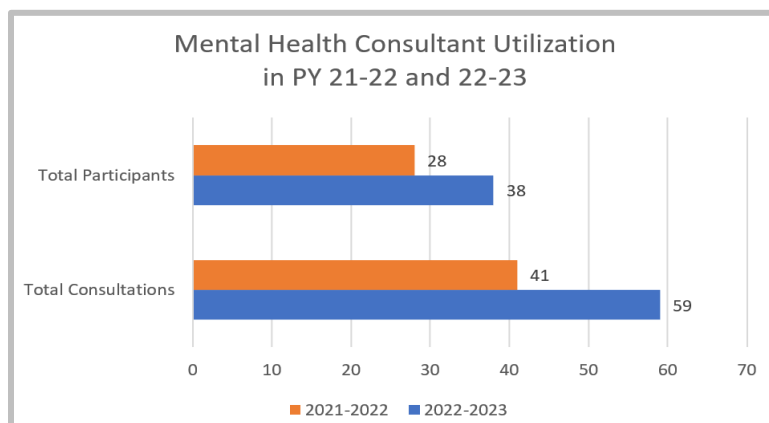
Figure 21: Family Survey Question Results: How would you rate your overall social and mental health over this past year on a scale from 1 to 5? 1 being very poor social and mental health and 5 being excellent social and mental health?



Source: EWU EHS Community Needs Assessment: Family Survey, 2023

The utilization of EWU EHS's licensed mental health consultant increased during this past year compared to the utilization during 2021-2022.

Figure 22: EWU EHS Mental Health Consultant Utilization



Source: EWU EHS ChildPlus Data, 2021-2023

Figure 23: Field Staff Survey Question Results: What have you observed in the community's and your caseload's overall social and mental health?

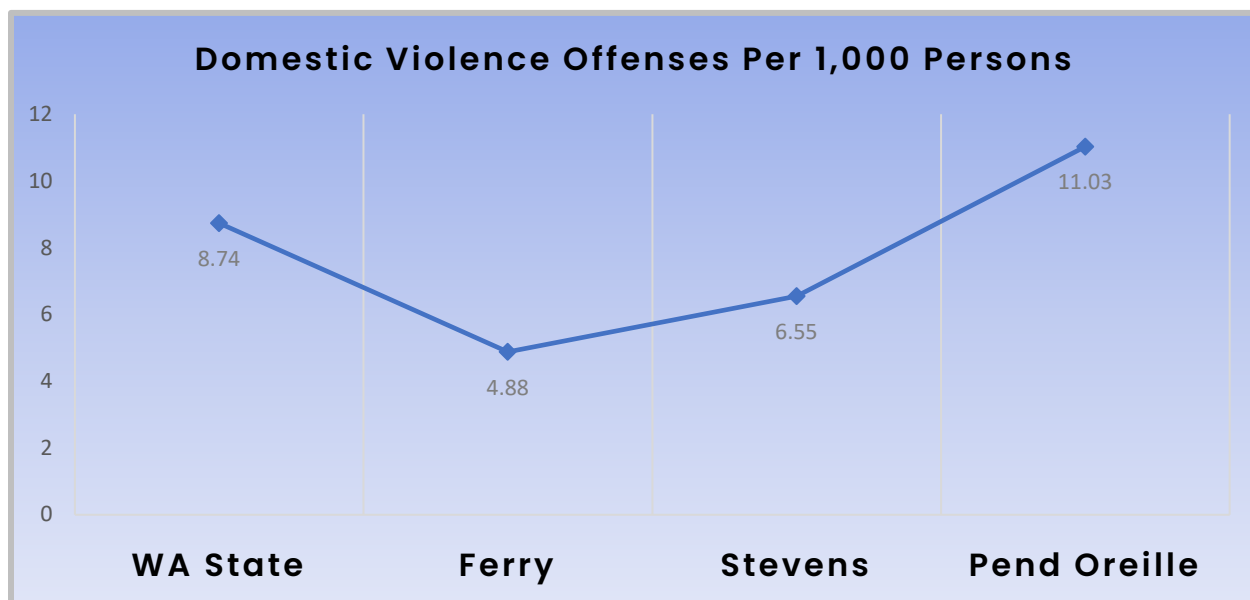
#	RESPONSES	DATE
1	post partum depression is more prevalent and there are more people feeling lonely	9/14/2023 3:23 PM
2	State insurance only offered only at new alliance., do not take private insurance.	9/13/2023 7:29 AM
3	Yes	9/12/2023 11:08 AM
4	Fair	9/1/2023 12:37 PM
5	n/a	8/31/2023 11:56 AM
6	Increase in isolation, feelings of being overwhelmed	8/31/2023 8:54 AM
7	I've noticed families are isolated, decreased social interactions or community involvement and increased mental health issues among parents.	8/30/2023 2:36 PM
8	Most of the moms I visit have reported feeling lonely, like there is no community to be involved in and struggle making friends.	8/30/2023 2:27 PM
9	> IT has been at a high for my caseload. I have noticed more families wanting counseling services but can't find any in person openings. Families not interested in Teletherapy.	8/30/2023 1:42 PM
10	I'm not sure.	8/30/2023 1:11 PM
11	mental health is really struggling with everyone right now. Increased antisocial behavior too. People are more "homebody" then they were before COVID	8/30/2023 1:02 PM
12	People seem easily overwhelmed, tired more often, and more often anxious than before the pandemic. Workloads seem higher and there seems to be less workers and less support than before.	8/30/2023 12:51 PM
13	Seen more homeless people.	8/30/2023 12:49 PM

Source: EWU EHS Community Needs Assessment: Field Staff Survey, 2023

Domestic Violence and Substance Use

Field staff reported an increase in crimes throughout the Tri-Counties specifically noting a rise in domestic violence and substance use. Figure 24 displays the data for the Tri-Counties' domestic violence offenses per 1,000 persons with Pend Oreille County being higher than WA state.

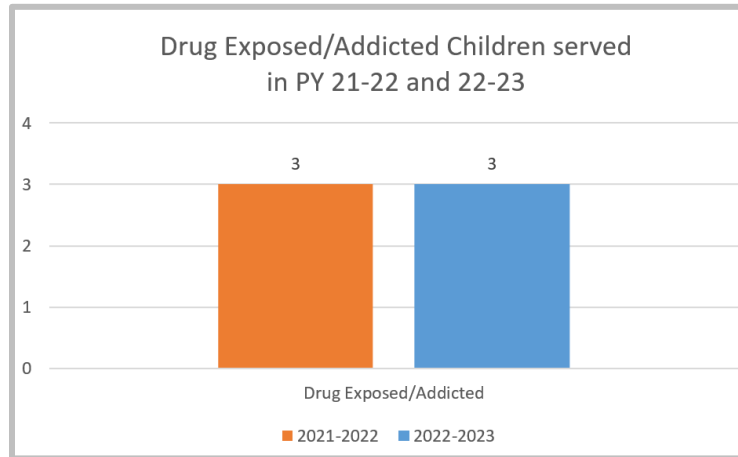
Figure 24: Domestic Violence Offenses per 1,000 Persons in 2021



Source: WA State DSHS, 2021

An EWU EHS field staff quoted on the Community Needs Assessment Field Staff Survey that "there is a higher number of people abusing illegal substances, and domestic violence seems to be more prevalent as well." Figure 25 displays the number of children enrolled in the EWU EHS program that were exposed to drugs in 2021-2022 and 2022-2023.

Figure 25: Drug Exposed/Addicted Children Served



Source: EWU EHS ChildPlus Data, 2021-2023

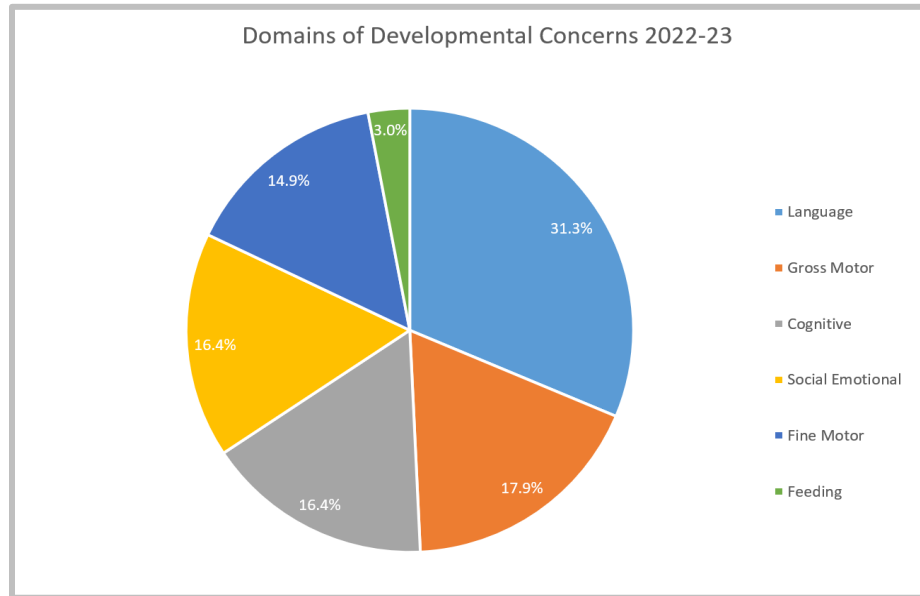
Developmental Concerns

The enrolled families, policy council, HSAC, and field staff report noticing a rise in early childhood developmental concerns including:

- Top two concerns are with speech and social-emotional developmental delays
- Reduced motivation in both parents and children
- Toileting delays
- Reading delays
- Delayed crawling and walking
- Greater need for physical and occupational therapy services
- Lack of providers for developmental services or dissatisfaction in local services
- Families struggling to get their child on an Individualized Education Program (IEP), and failing to find available services once the child is on an IEP

According to EWU EHS program ChildPlus data, language is the largest domain of developmental concerns for enrolled children at 31.3% with gross motor as the second largest concern at 17.9% and social emotional as a close third at 16.4% (see Figure 26).

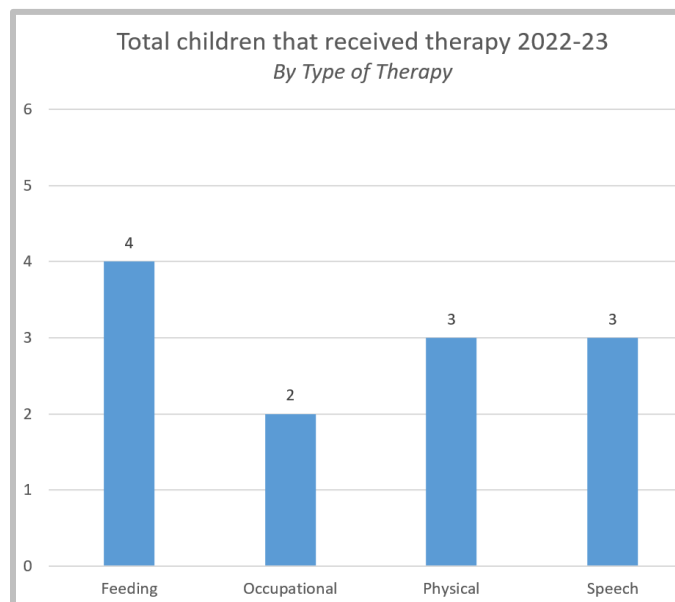
Figure 26: EWU EHS Domains of Developmental Concerns in 2022-23



Source: EWU EHS ChildPlus Data, 2022-2023

Figure 27 displays the types of therapies EWU EHS enrolled children received in 2022-2023. Feeding ranked the highest therapy type with speech and physical tied as the second.

Figure 27: EWU EHS Total Children that Received Therapy 2022-23



Source: EWU EHS ChildPlus Data, 2021-2023

Suggested Solutions

Interventions and tools suggested by parents, HSAC, and field staff regarding how to address developmental concerns being seen in the community and on caseloads include:

- Increase the use of the LENA language technology during home visits
- Host more community EWU EHS Development Fairs
- Host more EWU EHS play groups and socialization opportunities for both the parent and child
- Offer parents help with understanding Individualized Education Programs (IEPs) and what is needed for a child to get an IEP
- Contract with therapists to provide staff trainings about developmental milestones and red flags
- Assist families with accessing local therapy providers and offer help with navigating insurance and scheduling appointments
- Staff could provide more education and awareness around developmental concerns

Enrolled families offered the following suggestions for how EWU EHS could help improve the community's social and mental health:

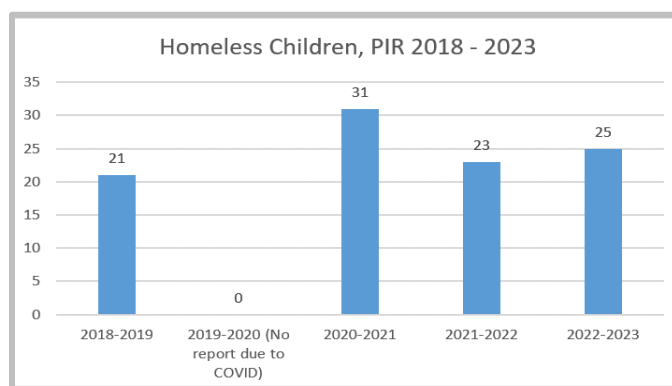
- Offer more Play and Learn socializations for children and parents.
- Offer more socialization opportunities solely for parents such as a "Parents Night Out," "Mom Groups," and "Dad Groups."
- Budgeting classes for parent to help with financial stressors
- A need for more father-focused events targeting topics around mental health
- Help families navigate insurance and schedule appointments with a mental health counselor
- Provide more education and awareness around mental health topics.

Housing and Childcare Needs

Housing

Enrolled families and field staff ranked a lack of housing availability and lack of childcare options as top service area needs. According to families and field staff, monthly rent has increased considerably presenting affordability issues for families. Landlords are hesitant with accepting housing assistance vouchers, and there are long waitlists for housing assistance programs. Many rentals avoid renting to families with young children. It is also challenging to find a rental that accepts pets. A parent explains that the “the quality of what is available for sale or rent is poor, and many houses in the area have major foundation issues.” Hiring a contractor or construction company is limited and costly. A parent survey respondent mentioned recently getting evicted. Field staff note that homelessness seems to be increasing in every town as well as the amount of families living in campers. When comparing the past two EWU EHS Annual Reports, enrolled children experiencing homelessness increased from 15% in 2021-2022 to 16% in 2022-2023.

Figure 28: Enrolled Children Experiencing Homelessness



Source: EWU EHS ChildPlus Data, 2018-2023

Childcare Needs:

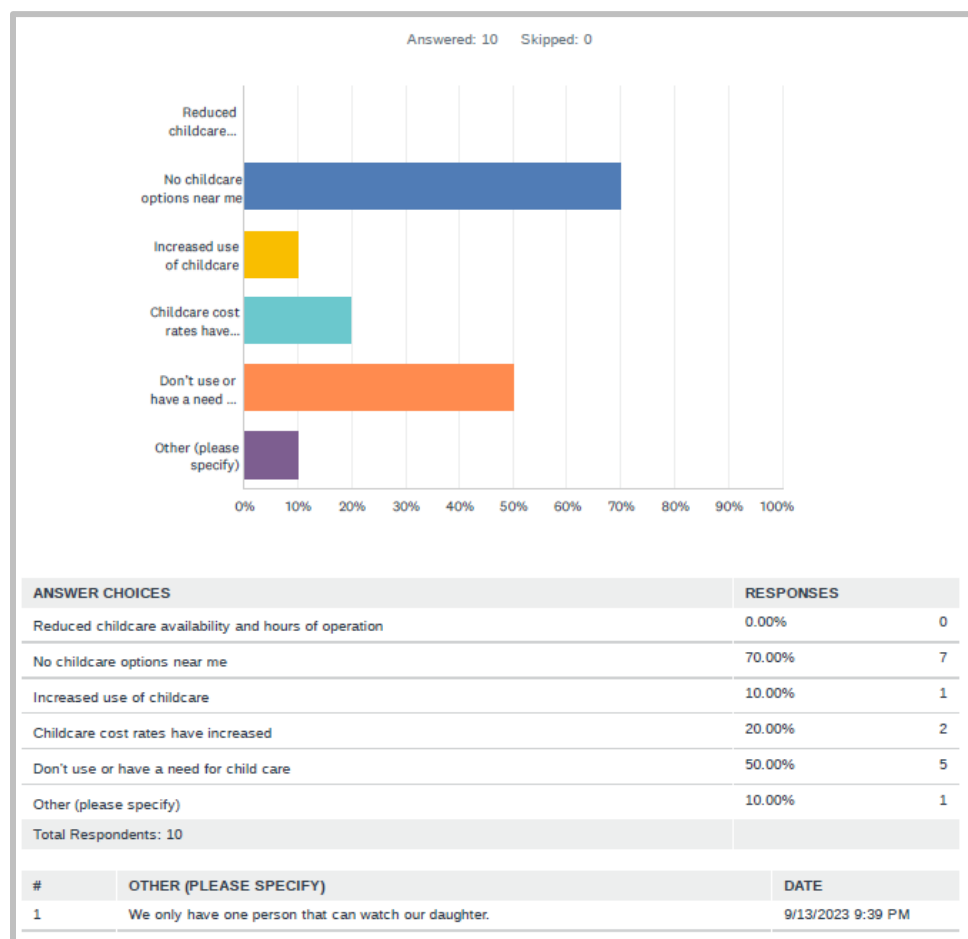
The enrolled families, policy council, and field staff report the following conclusions about EWU EHS’s service area’s childcare access:

- No childcare options close to where the family resides
- Reduced childcare hours of operation or operational hours that do not fit parent’s work schedule
- Childcare sites switching to private pay only

- Parents unable to work due to lack of childcare options
- Many childcare sites do not accept children under age 3
- Long waitlists lasting over 2 years
- Some childcare centers unwilling to accommodate children with special needs

During an EWU EHS Parent Committee meeting, a parent reported that she “travels over 40 miles from Lone to Colville for childcare since there is currently no childcare options in the Metaline Falls/Lone area.” Another parent explained that she was on a waitlist for childcare for over 2 years. Many parents reported no longer being employed because of the stress of finding childcare and/or the cost of childcare. Figure 29 displays the family survey results regarding childcare access.

Figure 29: Family Survey Question Results: Have you experienced any changes in childcare access over this past year? Select all that apply.



Source: EWU EHS Community Needs Assessment: Family Survey, 2023

Health and Access to Medical Providers

General Health Demographics

The County Health Rankings and Roadmaps program ranks counties in each U.S. state from a better to worse health status based on many factors such as physical inactivity, food insecurity, alcohol and drug use, and community safety. In Washington state the rankings are based on 39 counties. A ranking closer to 1 means the county is considered healthier, and a ranking at a higher number closer to 39 means the county has poorer health. The Tri-Counties rank higher on the scale as they are medically underserved areas, federally designated healthcare shortage areas, and federally designated dental shortage areas.

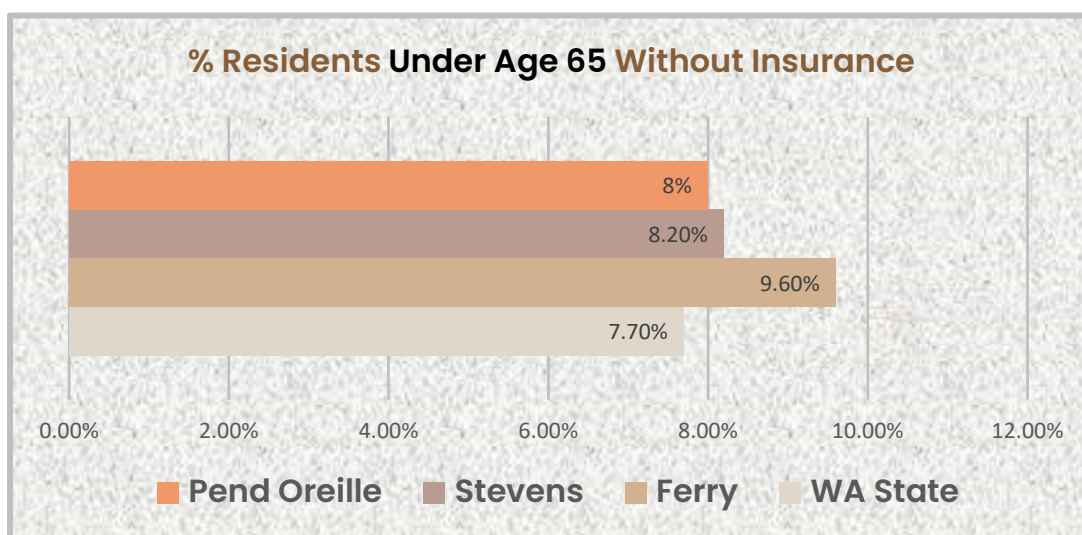
Table 18: County Health Ranking

County	Health Ranking out of 39 Counties
Ferry	39 out of 39
Stevens	19 out of 39
Pend Oreille	38 out of 39

Source: County Health Rankings, 2023

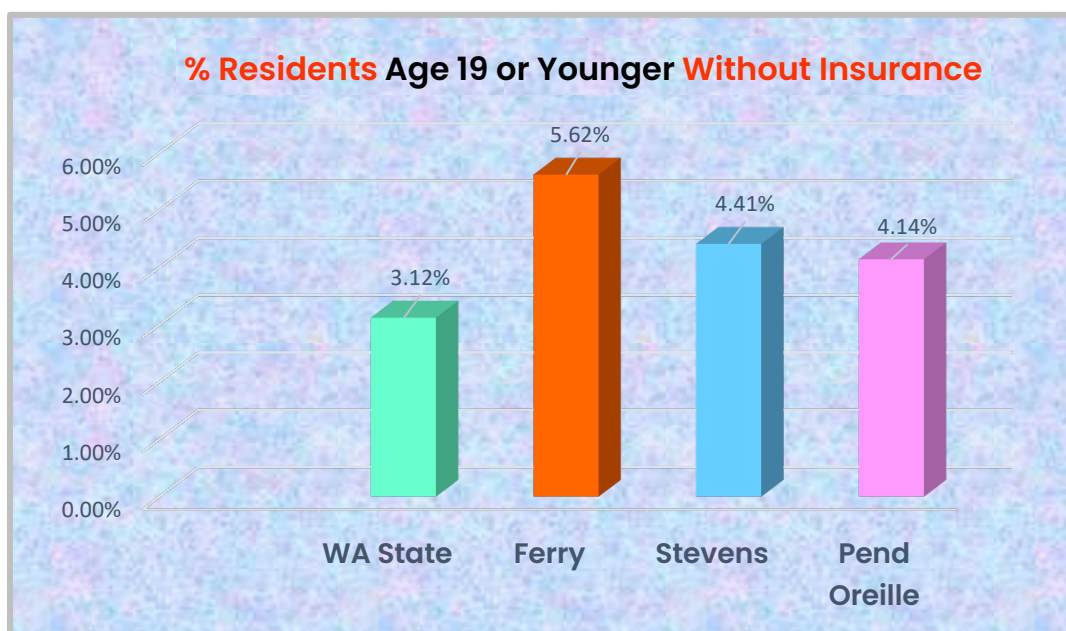
The percentage of residents without health insurance coverage is greater in the Tri-Counties compared to WA state (see Figure 30 and 31). The percentage of residents with Medicaid health coverage is significantly higher in Ferry, Stevens, and Pend Oreille county compare to the state's percentage (see Figure 32).

Figure 30: Health Insurance Coverage



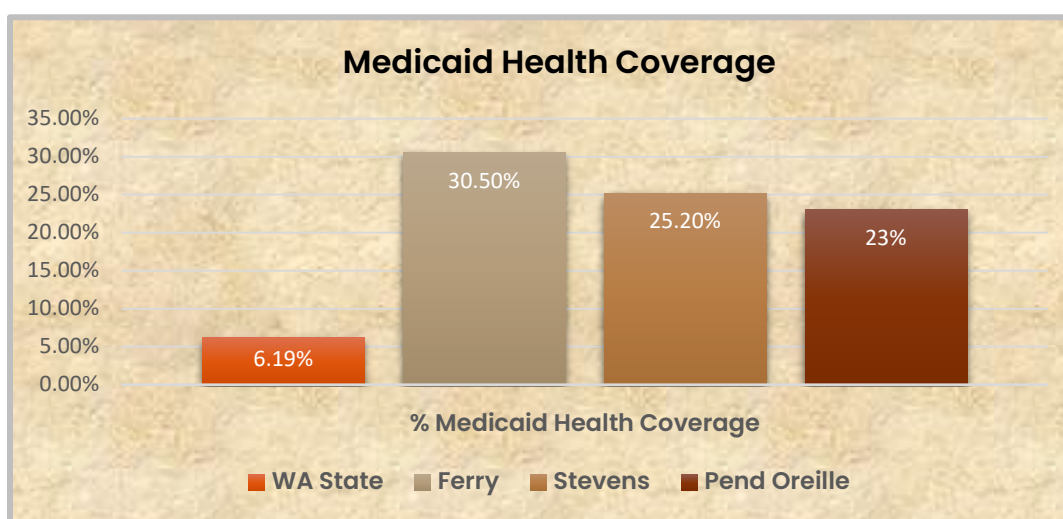
Source: U.S Census Bureau, 2022; Data USA, 2022

Figure 31: % Residents Age 19 or Younger Without Insurance



Source: U.S Census Bureau, 2022; Data USA, 2022

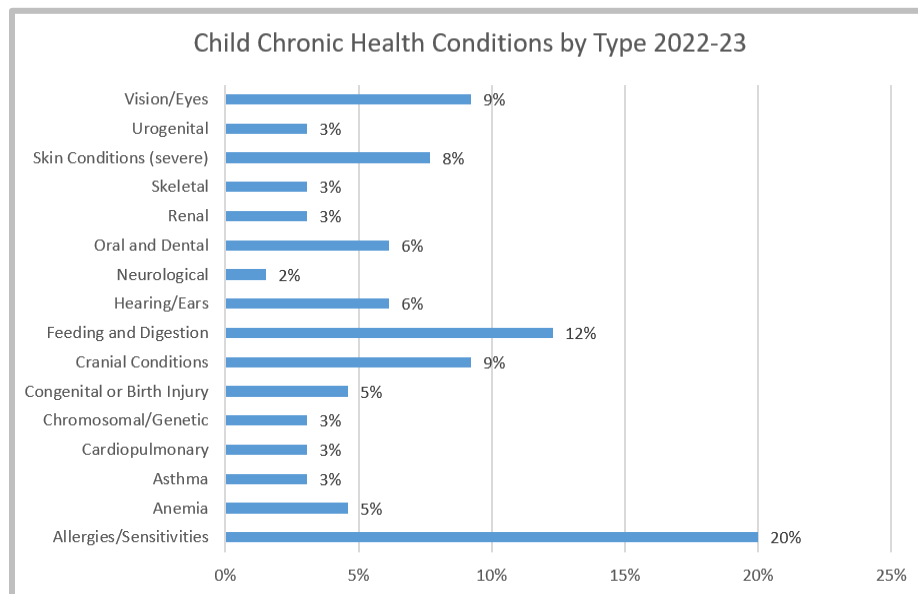
Figure 32: Medicaid Health Coverage



Source: Data USA, 2020

According to EWU EHS program ChildPlus data, allergies/sensitivities is reported as the largest EWU EHS enrolled child chronic health condition with feeding and digestion as the second largest. See Figure 33 for more details about enrollees' health conditions.

Figure 33: Child Chronic Health Conditions by Type



Source: EWU EHS ChildPlus Data, 2018-2023

Access to Medical Providers

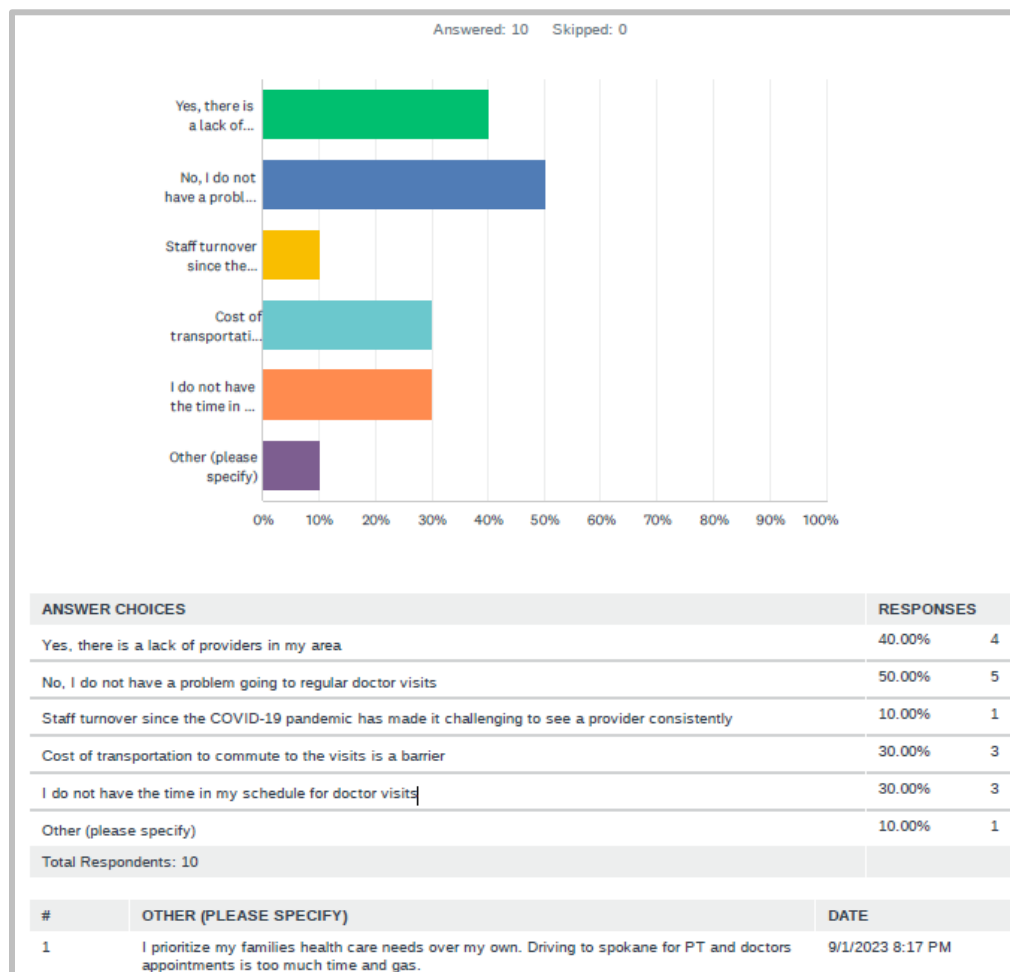
The family surveys, staff surveys, HSAC meeting, and discussions during parent meetings concluded that families are experiencing barriers to attending regular doctor and dental visits. These barriers include:

- A lack of local medical and dental providers
- The cost of transportation especially with the medical home not being located near the family
- Difficulty commuting far to appointments via poorly managed winter roads
- Longer distances needed to travel to specialty care or therapy services
- Long waitlists
- The inability to find the time to schedule regular visits
- Fear of feeling judged or misunderstood
- Shortage of dentists that accept state insurance and/or pediatric patients
- High provider turnover causing less satisfaction in services
- Telehealth is challenging to do with poor internet connectivity

- Challenges with scheduling and tracking appointments as well as navigating insurance
- Fear of being exposed to illnesses
- Parents struggle attending appointments if they can't bring their children with them
- Parents going to urgent care more and receiving less preventative care

EWU EHS's past two annual community assessment updates revealed a trend with families reporting barriers to attending medical and dental appointments. Based on the recent 2023 EWU EHS Community Needs Assessment Family Survey, families reported the barriers to attending regular doctor appointments outlined in Figure 34.

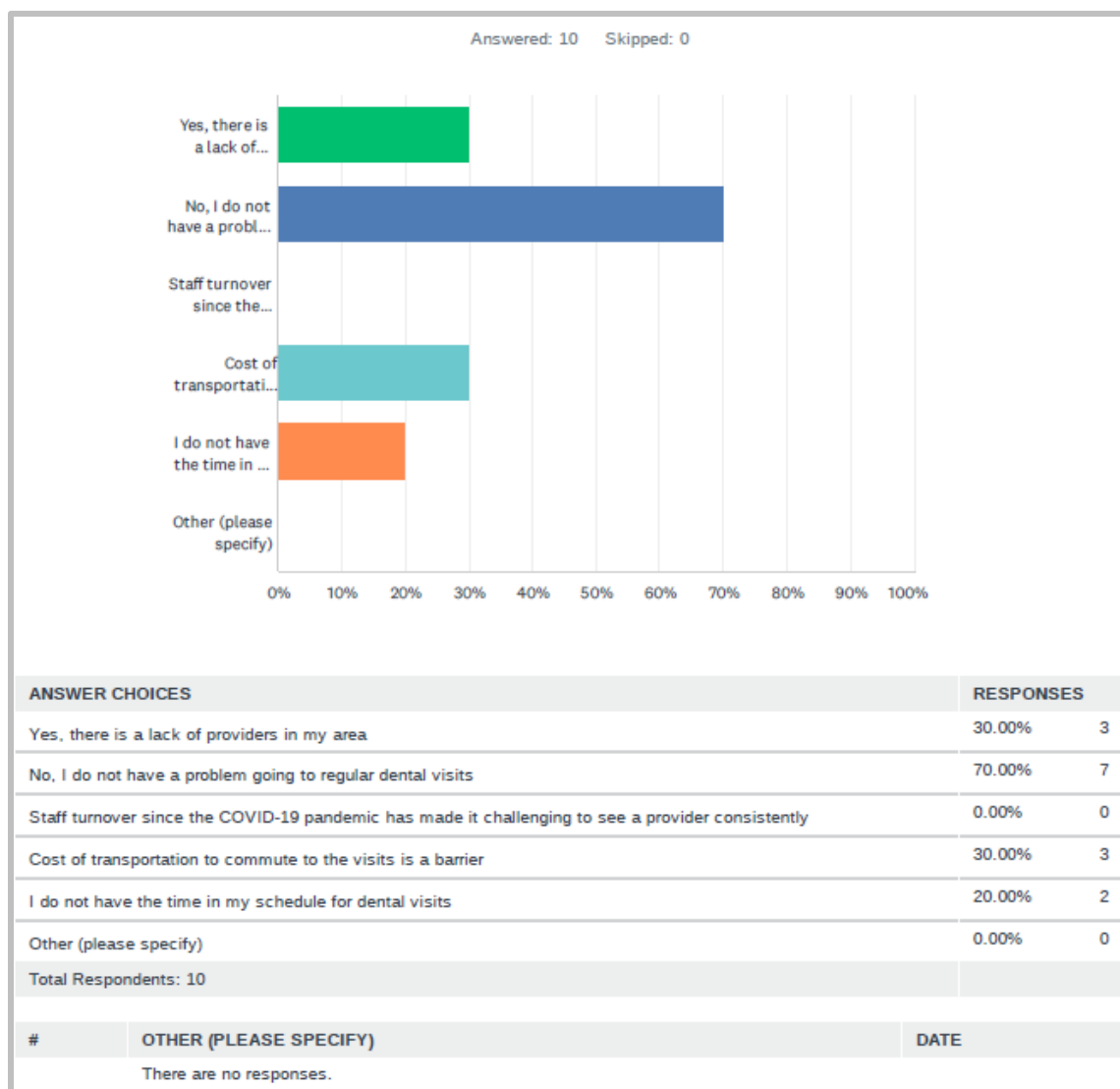
Figure 34: Family Survey Question Results: Do you feel there are barriers for yourself and family with making it to regular doctor appointments? Select all that apply.



Source: EWU EHS Community Needs Assessment: Family Survey, 2023

The 2022–2023 EWU EHS Annual Report reported that 73% of enrolled children had a dental exam or an oral health screening from their physician. Families reported the barriers for attending regular dental appointments outlined in Figure 35.

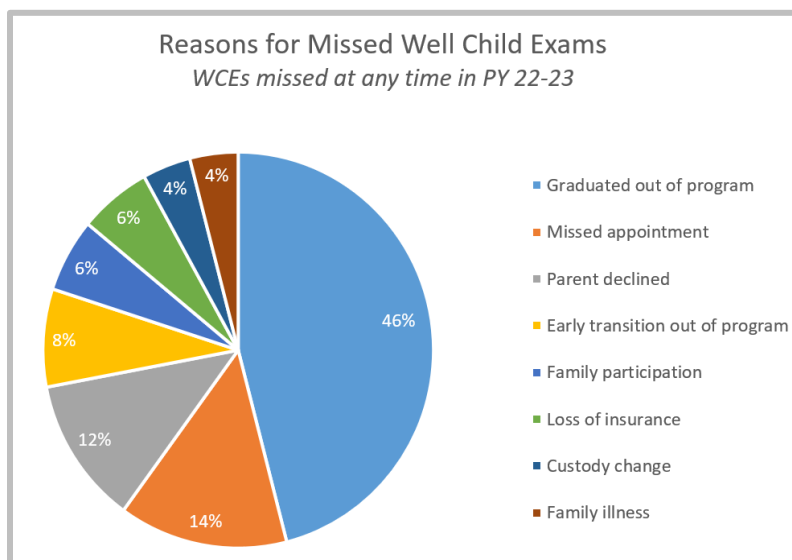
Figure 35: Family Survey Question Results: Do you feel there are barriers for yourself and family with attending regular dental appointments? Select all that apply.



Source: EWU EHS Community Needs Assessment: Family Survey, 2023

Figure 36 displays reasons enrolled children missed well child exams in 2022–2023.

Figure 36: Reasons for Missed Well Child Exams



Source: EWU EHS ChildPlus Data, 2022–2023

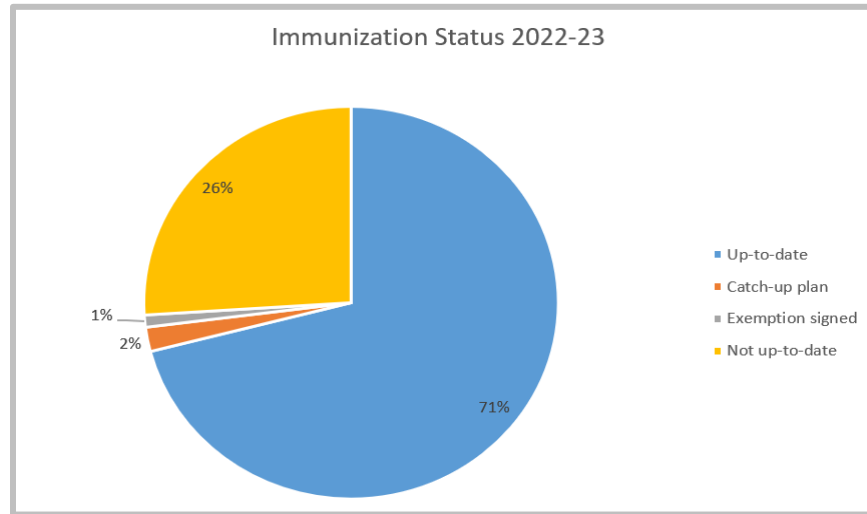
Families report commuting over two hours to Spokane WA for medical appointments because they are dissatisfied with local providers or there are no providers in their area. One parent survey respondent stated they have “gone through four different primary doctors in the past 4 years” due to turnover. Another parent survey respondent explained that the town of “lone does not currently have a provider who will see children under the age of 12 so if my kids are sick I have to take a whole day off from work to get them care.”

Local medical providers attending the EWU EHS HSAC meeting discussed how families struggle to make their appointments with having to schedule them so far in advance, gas vouchers are not covering the high cost of fuel, and waitlists even for immunizations and regular check-ups are lasting months.

A respondent from the EWU EHS Community Needs Assessment Field Staff Survey noted that some families “lost trust in doctors during COVID and got comfortable not going to the doctor. They have not made medical care a priority since the pandemic.”

Staff reported that some families lost trust in vaccinations altogether since the COVID-19 pandemic. Figure 37 displays enrolled families’ recent immunization statuses with 26% of families not up-to-date.

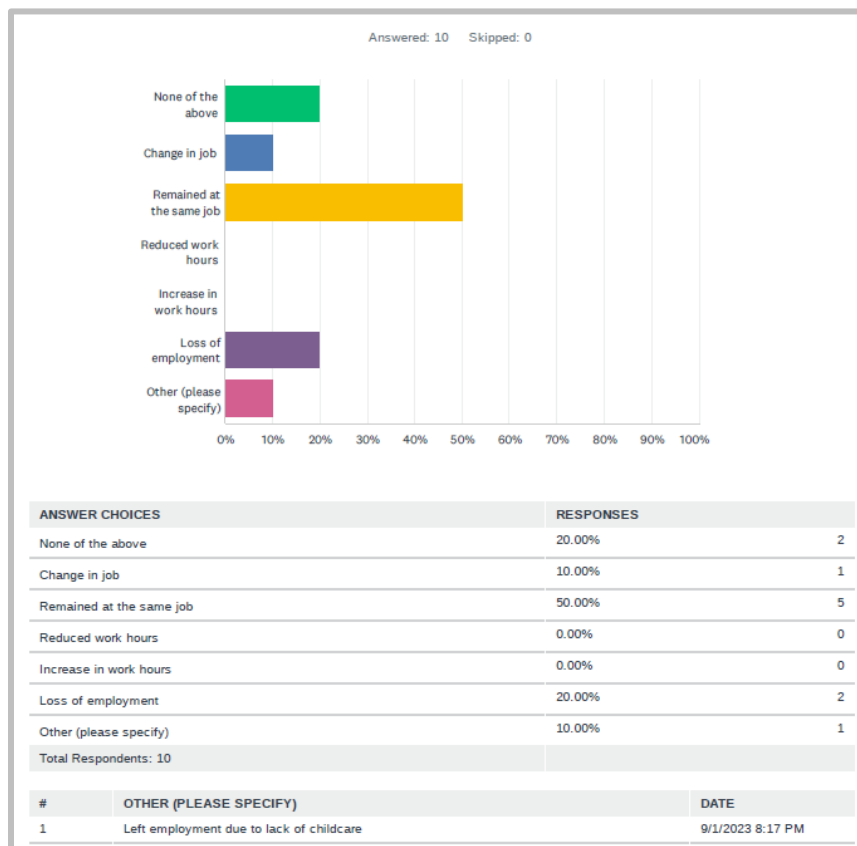
Figure 37: Immunization Status



Source: EWU EHS ChildPlus Data, 2022-2023

Employment and Education

Figure 38: Family Survey Question Results: Have you experienced a change in employment status over the past year?



Source: EWU EHS Community Needs Assessment: Family Survey, 2023

According to the Community Needs Assessment Family Survey, 5 out of the 10 respondents remained at the same job, 1 respondent had a change in their job, 2 respondents loss employment, and 1 left a job due to the lack of childcare (see Figure 38).

Family survey respondents report that a change in employment status was caused by the following reasons:

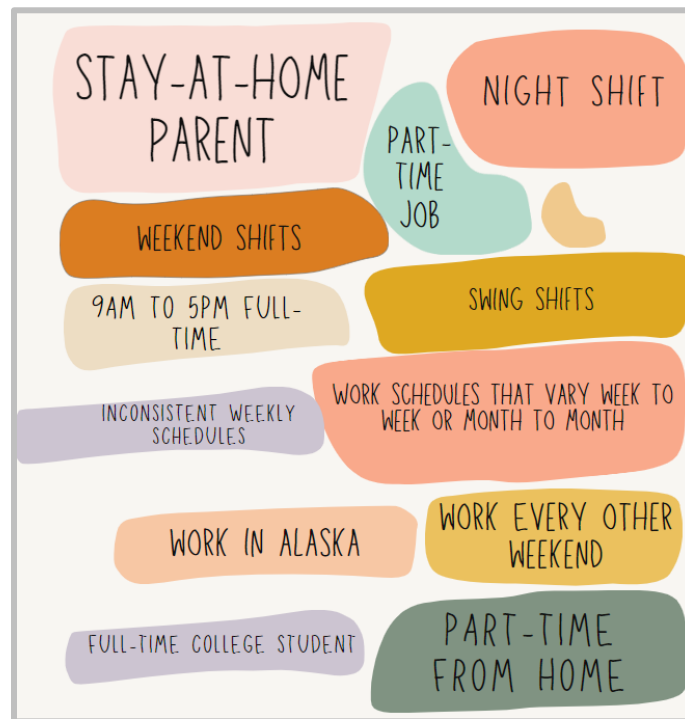
- Parents leaving the workforce due to unaffordable or lack of childcare options
- Limited to no job opportunities close to residence
- Long commute times to work site sometimes lasting greater than 2 hours
- Unable to work due to no public transportation
- Reentering the workforce due to rising costs and no longer affording to be a single income household
- Increasing work hours to cover increasing cost of living leading to less family time
- Fear employment may cause a loss in government assistance programs such as Supplemental Nutrition Assistance Program (SNAP)

None of the respondents experienced a change in education status, however, 30% reported they would contemplate going back to college if they received support in tuition assistance and childcare support.

The enrolled families, policy council, and field staff report that the typical work, school, and training schedules of eligible families vary from household to household. For example, some parents work full-time while other parents stay-at-home with the children.

Figure 39 summarizes the typical work, school and training schedules of parents with eligible children.

Figure 39: Typical Work, School and Training Schedules of Parents with Eligible Children



Section 5: Community Resources and Strengths

Tri-County Childcare Programs

Table 19 displays other community child development services, childcare centers, and family childcare programs in the Tri-Counties. In Pend Oreille County, there is one childcare center that offers home visiting services for ages 3–5 years. However, EWU EHS is currently the only child development program in Pend Oreille, Stevens, and Ferry County offering home visiting services to children birth to age 3 as well as prenatal parents. Many of the childcare centers have waitlists, take private pay only or accept limited state pay, serve preschoolers or older, and/or have limited hours of operation. Ferry county currently has no childcare options for under age 3. Due to the lack of childcare access, a handful of parents report they rely on extended family and/or neighbors to help with childcare. A parent committee volunteer noted that when she works part-time her mother is able to babysit her children but not on a consistent or reliable basis.

Table 19: Other Childcare Centers and Development Services

Childcare Center	Location	Hours	Ages	Cost	Waitlist	Home Visit
Pend Oreille County						
Lucky Nine Childcare	381 Pend Oreille Homes Rd, Newport WA 99156	M-F 6:30am-6:30pm	Birth – 12 years 10 Slots	Private/accepts state \$45/day	Yes – Currently 3 on waitlist	N
Newport Parent Co-Op	430 W. 3 rd St. Newport WA 99156	Parent & Child Class: T & Th 8:45am-10:45am 3 Year Old Class: T: 12pm-2pm M & Th 12-pm-2:30pm PreK: M & W: 8:45-11:45 Sept-May	Birth – 2 years (with parent) 3-5 years	Private/Non-Profit Family Day: Full Time, \$80 Part Time, \$60 Preschool (3's) & PreK (4's): \$120 full-time \$80 part-time	Yes – 0 currently	N
Head Start	200 S. Calispel Newport, WA 99156	8-2:30 M-Th 8-12 F	3-5 years 37 Slots	Federally Funded preschool	Yes – 20 +	4x/year
Storybook Cottage	201 E. 2 nd St N Oldtown, ID 208-437-1234	M-F 6am-6pm	4 wks -12 years	Private/accepts Washington Childcare Subsidy/ Depends – would not quote over the phone.	Waitlist – 0	No
Yount Daycare	208-448-2961 467 5 th St. Priest River, ID	6:30-6	6 wks-12 years 26 slots	Cost Varies/ takes WA State Daycare Subsidy	Y	N
Newport School District Developmental Preschool	1201 W. 5th St Newport, WA 99156 509.447.0656 newportsd@newportgriz.com	School District Developmental Preschool – 2 classes Times: AM 7:45-10:45 PM 11:45-2:30	3-5 years	Publicly Funded	N	N
Camas Center	1821 N. LeClerc Cusick, WA 99119 509-447-7210	6:30-6	1 mo-13 years Licensed for 95	State Prices – Varies	Y – 20	N

Childcare Center	Location	Hours	Ages	Cost	Waitlist	Home Visit
Stevens County						
Smart Start Learning Center	706 S. Elm Street Colville, WA 99114	T-F 6:30-5:30 33 Slots	18 mo.- 13 years	Takes Washington State Childcare Subsidy Cost Varies	N	N
Dominion View Daycare	Michelle Burton 400 Dominion View Rd. Colville, WA 99114	M-F 6:00-5:30	Birth-13 years 12 Slots	Cost Varies WA State Childcare Subsidy – Unknown	Unknown	N
A Lot Like Home Childcare	Sharyl Ratel 315 S. Alder Colville, WA	M-F 4am- 5:30pm	Birth-13 years 12 slots	Cost Varies	Unknown	N
Bright Beginnings Preschool	295 East Dominion Ave. Colville, WA 99114 (509) 684-2686	Preschool: 3-4 year old: 12:30-2:30 M-Th 5-6 year old: 8-12 M-Th	3-5 years	No Subsidy accepted \$210 3-4 year olds \$310 4-5 year olds	Not Currently	N
Lil Hands Daycare	465 E. 8 th Ave. Kettle Falls, WA 99141	M-F 5:30-5:30	Birth-13 years 12 Slots	Unknown	Unknown	N/A
Kettle Falls Early Learn Center	735 Meyers St. Kettle Falls, WA 99141 (509) 738-6625 ext. 7	M-F 7am- 5pm	2.5-13 years 50 slots	Unknown	Unknown	N/A
Head Start – Colville	E. 347 Astor Colville, WA 99114 (509) 684-9128 217 S. Hofstetter Colville, WA 99114	Full day & half day 8am -3:30pm	3-5 years 40 slots	\$0	Unknown	4x/year
Head Start – Chewelah	N. 600 3rd Street E. Chewelah, WA 99109	8am-12pm	3-5 years	\$0	Unknown	4x/year
Head Start – Kettle Falls	700 S. Oak Street Kettle Falls, WA 99141	8am-12pm	3-5 years	\$0	Unknown	4x/year

Childcare Center	Location	Hours	Ages	Cost	Waitlist	Home Visit
ECEAP – Springdale	c/o Mary Walker Elementary 500 N. 4th (physical) PO Box 159 (mailing) Springdale, WA 99173	8am–12pm	3–5 years	\$0	Unknown	Unknown
Valley Early Learning Center	c/o Valley School District 3030 Huffman Road Valley, WA 99181	School Day	3–5 years	\$0	Unknown	Unknown
Loon Lake School District	4001 Maple Street Loon Lake, WA 99148	School Day	3–5 years	\$0	Unknown	Unknown
Colville Tribal Head Start	27 Short Cut Rd. Inchelium, WA 99138 509-722-7604 www.colvilletribes.com	School Day	Prenatal–5 years	\$0	Unknown	Unknown
Ferry County						
ECEAP – Republic	Republic School District 30306 E Hwy 20 Republic, WA 99166 (509) 755-3327	Part Day or School Day	3–5 years	\$0	Unknown	Unknown
Curlew School District	47 Curlew School Rd Curlew, WA 99118 (509) 779-4931	School Day	3–5 years	\$0	Unknown	Unknown
ECEAP Northport School District	404 10 th Street Northport, WA 99157	School Day	3–5 years	\$0	Unknown	Unknown

Community Resources

Appendices B and C list available community resources in the Tri-Counties that address needs of eligible children and their families including: parent education programs, legal services, employment services, crisis assistance programs, libraries, nutrition services, mental health services accepting low-income families, dental offices accepting Medicaid, medical centers accepting low-income families, public transportation, supermarkets, thrift stores, low-income housing and rental assistance programs, internet assistance programs, services for children with disabilities, and child development centers and programs.

Community Gaps

This community assessment process revealed the following summary of community gaps or lack of accessibility to services:

- Lack of medical and dental providers especially pediatric, therapeutic, and specialty services
- Lack of childcare availability and options
- Lack of housing and rental options including low-income housing options
- Lack of mental health services including Infant and Early Childhood Mental Health Services
- Lack of employment options close to where families live
- Lack of grocery stores including stores with quality produce and fresh foods
- Lack of city parks or the city park is outdated and unsafe for younger children
- Lack of public transportation
- Lack of quality internet services
- Limited help for children with autism and Individualized Education Programs (IEP)
- Limited family-friendly community events or options for parents to connect
- Libraries offering less events for younger children

Community Strengths

The enrolled families, policy council, HSAC, and field staff report the following conclusions about EWU EHS's service area's strengths:

- Small communities where people care about each other and know one another
- More families coming together to carpool to events, appointments, etc.
- Chewelah hosts fun community activities like the farmers' market and holiday celebrations
- Locals continue to enjoy the outdoors and agricultural activities.
- Local parents forming Facebook groups to connect with each other and share early childhood supplies
- Catholic Charities helps with diapers, car seats, and other necessities
- EWU EHS play group socializations now being offered in Lone and Metaline Falls
- Higher attendance and family engagement at EWU EHS community events
- More parents seeking involvement and volunteer opportunities with EWU EHS
- Neighbors coming together during wildfires, pandemic, winter storms, etc.

Section 6: Recommendation and Priorities

The EWU EHS community assessment data has revealed a lack of accessibility in childcare services and options throughout the Tri-Counties. Therefore, to address this key issue facing eligible children and families EWU EHS will explore options and feasibility for sustainable childcare services to support program families in obtaining appropriate and high-quality childcare.

Program Goal 1: EWU EHS will explore options and feasibility for sustainable childcare services to support program families in obtaining appropriate and high-quality childcare.

The EWU EHS community assessment data has revealed a lack of accessibility to medical providers throughout the Tri-Counties. Therefore, to address this key issue facing eligible children and families EWU EHS will extend and deepen partnerships

within the local medical community to increase access to medical and therapy professionals for EHS families and staff.

Program Goal 2: EWU EHS will extend and deepen partnerships within the local medical community to increase access to medical and therapy professionals for EHS families and staff.

The EWU EHS community assessment data has revealed a lack of accessibility in mental health services and reported overall poor mental health in the Tri-Counties. Therefore, to address this key issue facing eligible children and families EWU EHS will coordinate increased access to mental health services and mental health education to improve the self-reported mental health of children, families, and staff.

Program Goal 3: EWU EHS will coordinate increased access to mental health services and mental health education to improve the self-reported mental health of children, families, and staff.

References

- 2023 population trends – Office of Financial Management.* Office of Financial Management (OFM). (n.d.).
https://www.ofm.wa.gov/sites/default/files/public/dataresearch/pop/april/ofm_april_poptrends.pdf
- About NEWESD.* NorthEast Washington Educational Service District 101. (n.d.).
<https://www.esd101.net/about>
- The AFCARS Report: Washington – ACF.* Adoption and Foster Care Analysis and Reporting System (AFCARS) FY 2021 data. (n.d.).
<https://www.acf.hhs.gov/sites/default/files/documents/cb/afcars-tar-wa-2021.pdf>
- All Births Dashboard – County.* Washington State Department of Health. (n.d.).
<https://doh.wa.gov/data-and-statistical-reports/washington-tracking-network-wtn/county-all-births-dashboard>
- Burdened households (5-year estimate).* Economic Research Federal Reserve Bank of St. Louis. (2022, December 8). <https://fred.stlouisfed.org/series/DP04ACS053065>
- Centers for Disease Control and Prevention. (2023, September 12). *National Center for Health Statistics: Washington.* Centers for Disease Control and Prevention.
<https://www.cdc.gov/nchs/pressroom/states/washington/wa.htm>
- Child Nutrition Program Reports.* Washington Office of Superintendent of Public Instruction. (n.d.). <https://ospi.k12.wa.us/policy-funding/child-nutrition/child-nutrition-program-reports>
- Child Poverty Statistics in the U.S.* Kids Count Data Center. (n.d.).
<https://datacenter.aecf.org/data/tables/7244-children-living-in-households-with-a-high-housing-cost-burden#detailed/2/2-53/false/2048,1729,37,871,870,573,869,36,868,867/any/14287,14288>
- Community assessment: The Foundation for Program Planning in Head Start.* ECLKC. (2023, August 28). <https://eclkc.ohs.acf.hhs.gov/program-planning/community-assessment-foundation-program-planning-head-start/community-assessment-foundation-program-planning-head-start>

County Profile. ESDWAGOV – Ferry, Stevens, and Pend Oreille County profile. (n.d.).
<https://esd.wa.gov/labormarketinfo/county-profiles/ferry>

Data Hub for Eastern Washington. County Health Insights. (2023, March 21).
<https://countyhealthinsights.org/county/pend-oreille/>

Eastern Washington University Early Head Start Annual Community Assessment
Update 2023

Eastern Washington University Early Head Start Annual Community Assessment
Update 2022

Eastern Washington University Early Head Start Annual Report: 2022–2023

Eastern Washington University Early Head Start Annual Report: 2021–2022

Eastern Washington University Early Head Start ChildPlus Data: Department’s Data
Tracking Software

Eastern Washington University Early Head Start Community Needs Assessment Family
Survey

Eastern Washington University Early Head Start Community Needs Assessment Field
Staff Survey

Eastern Washington University Early Head Start Federal Grant Narrative Year 5: 2023–
2024

Eastern Washington University Early Head Start Federal Grant Narrative Year 1: 2019–
2024

Eastern Washington University Early Head Start Great Start September 18th All–Staff
Meeting Minutes

Eastern Washington University Early Head Start Health Services Advisory Committee
(HSAC) September 6th Meeting Minutes

Eastern Washington University Early Head Start Parent Committee August 9th Meeting Minutes

Eastern Washington University Early Head Start Policy Council August 25th Meeting Minutes

Eastern Washington University Early Head Start Program Information Report: 2022–2023

Home – Washington State Report Card. Washington Office of Superintendent of Public Instruction. (n.d.). <https://washingtonstatereportcard.ospi.k12.wa.us/>

Home. AWB Institute. (2021a, June 1). <https://www.awbinstitute.org/>

Interactive map and Graphs: Quick Facts about Washington State Adolescents. Washington State Personal Responsibility Education Program. (n.d.). https://www.waprepforhealthyyouth.org/resources/interactive_map.html

Monthly Employment Report. Employment Security Department Washington State. (n.d.). <https://esd.wa.gov/labormarketinfo/monthly-employment-report#:~:text=Washington's%20economy%20increased%20by%2011%2C900,rate%20decreased%20to%203.8%20percent>

National Center for Homeless Education: Washington. National Center for Homeless Education (NCHE). (n.d.). <https://profiles.nche.seiservices.com/StateProfile.aspx?StateID=56>

Overall (all ages) hunger & poverty in Washington: Map the meal gap. Overall (all ages) Hunger & Poverty in the United States. (n.d.). <https://map.feedingamerica.org/county/2021/overall/washington>

Population density and land area criteria used for rural area assistance and other programs. Office of Financial Management. (2023, June 29). <https://ofm.wa.gov/washington-data-research/population-demographics/population-estimates/population-density/population-density-and-land-area-criteria-used-rural-area-assistance-and-other-programs>

Research Center Washington. UnitedForALICE. (n.d.). <https://www.unitedforalice.org/county-reports-mobile/washington>

Risk and Protection Profiles for Substance Abuse Prevention Planning. Washington State Department of Social and Health Services. (n.d.).
<https://www.dshs.wa.gov/ffa/research-and-data-analysis/county-and-state>

Small Area Income and Poverty Estimates (SAIPE). United States Census Bureau. (n.d.).
https://www.census.gov/data-tools/demo/saipe/#/?s_state=53&s_county=53019&s_district=&s_geography=county&s_measures=u18

U.S. Census Bureau Quickfacts: United States. United States Census Bureau. (n.d.).
<https://www.census.gov/quickfacts/fact/table/US/PST045222>

Washington State Department of Children, Youth & Families. DCYF. (n.d.).
<https://www.dcyf.wa.gov/>

Washington State Department of Health WIC Data by County. Washington State Department of Health Women, Infants and Children (WIC) Nutrition Program WIC Data by County – Federal Fiscal Year 2022 (FFY22). (n.d.).
<https://doh.wa.gov/sites/default/files/2023-01/960-221-WICAnnualReport-DataSheet-County-FFY22.pdf?uid=64caf7d5703bc>

Washington State. Data USA. (n.d.). <https://datausa.io/profile/geo/washington>

Washington: Data by County. County Health Rankings & Roadmaps. (n.d.).
<https://www.countyhealthrankings.org/explore-health-rankings/washington?year=2023>

An abstract graphic design featuring overlapping organic shapes in yellow, red, and light grey on a darker grey background. The word "Appendices" is written in a bold, red, sans-serif font, positioned in the lower-left area of the composition.

Appendices

Appendix A: Community Assessment Team

Team Member	Title
Carolyn Pike	Director
Sharon Sundheim	Family Engagement & Resource Manager
Megan Batie	Resource Support Specialist
Lorrie Pirnie	Data Systems & Quality Improvement Manager
Jeana Nichols	Program Planning & Rural Engagement Manager
Tracie Johnson	Administrative Program Specialist
Policy Council	EWU EHS Policy Council Parent Volunteers
Governing Board	<p>Governing Board Members:</p> <ul style="list-style-type: none"> ○ Bob Whaley, J.D., EWU EHS Governing Board Chair ○ Mary Voves, EWU Vice President for Business and Finance and Treasurer at EWU, EWU EHS Governing Board Vice Chair ○ Deborah Danner, EWU Associate Vice President for Human Resources ○ Annika Scharosch, EWU Title IX Coordinator, Associate Vice President of Civil Rights, Compliance and Enterprise Risk Management ○ Shanna Davis, PhD., Associate Professor for EWU School of Psychology
Health Services Advisory Committee	<p>Attendees:</p> <ul style="list-style-type: none"> ○ Mary Sandall; Women, Infants, and Children Nutrition Program (WIC), Early Childhood Education and Assistance Program (ECEAP), EWU EHS Registered Dietitian Consultant ○ Jenyne West; Colville School District, Physical Therapist ○ Elle Taylor, Rural Resources ○ Donna Bachand; EWU College of Health Science and Public Health, Nursing Dept. ○ Sharon Sundheim, EWU EHS staff ○ Olivia Beardslee, Rural Resources ○ Mary Schauer, ESD 101 ○ Jeana Nichols, EWU EHS staff
Community Partners	<p>Rural Resources</p> <p>Early Support for Infants and Toddlers (ESIT)</p>
Parent Committee	Parent volunteers
Field Staff	EWU EHS Parent Child Educators and Field Staff Managers

Appendix B: Available Tri-County Resources for Children with Disabilities

Childcare Center	Location	Hours	Ages	Cost	Waitlist	Home Visit
Stevens, Pend Oreille, Ferry						
Children & Youth with Special Needs	NETCHD	Individual Basis. Works with families to connect to resources	0-18	N	n/a	
Washington Elks Therapy Program for Children	253-472-6223 or 1-800-825-3557 waelks@waelks.net	T-F 8:30am-4pm	0-21 / \$0	No- WA Elks Therapy Program Funds	Individual Basis. Program is for children who fall through the cracks due to insurance transportation or other reasons.	Y
ESIT Early Services for Infants and Toddlers	4202 S Regal St Spokane, WA 99223 Phone: 509-789-3800 Fax: 509-323-2765	Screenings to connect families to therapy services	Children with disabilities b-3 with 25% delay in 1 area for his/her age, has a diagnosed disability such as hearing loss, vision impairment, neurologic disorder, etc.	0	N	Initial Screening service, yes. Services vary.
PAVE						Advocacy for parents of children with disabilities

Appendix C: Available Tri-County Community Resources

Pend Oreille County			
Resources	Name	Contact Information	Resource Type
Community College/ Parent Education Program	Spokane Community College – Newport Campus	1204 W Fifth St. Newport, WA 99156 509-447-3835 / 888-323-2399 Email: NorthernCounties@scc.spokane.edu	GED HS Diploma Associate Degrees Certificates
	WorkFirst (must be enrolled in TANF)	https://workfirst.wa.gov/	Vocation Training GED Prep
	WorkSource	956 S. Main, Ste. B Colville WA 99114 509-685-6158	Employment Training Training Assistance
	Rural Resources Employment & Training program	956 S. Main Street Colville, WA. 99114 509-685-6018 (e_t@ruralresources.org) 1800776-2178	Paid internships, paid on the job training and educational opportunities
Legal Services	Family Crisis Center	730 W 1st St Newport WA 99156 509-447-2274	Supportive Legal assistance
	Rural Resources	333211 Hwy 2, #200 Newport, WA 99156 509-447-9997	Supportive Legal Services & Financial Assistance
	Pend Oreille County Court Facilitator	For an appointment call (509) 447-2435 or email townbey@pendoreille.org	Fee: \$10
	NW Justice	www.nwjustice.org/home 1-888-201-1014 509-684-7652	Free and low-cost legal assistance
	Washington law help	www.washingtonlawhelp.org	Legal information, forms and links to lawyers
	Disability Rights Washington	www.disabilityrightswa.org 1-800-562-2702	Legal Support & Services
	Tenant Rights	www.tenantsunions.org 1-206-723-0500	Tips and tools for tenants
Employment Services	Work First (must be enrolled in TANF)	https://workfirst.wa.gov/	Employment Services

	WorkSource	956 S. Main, Ste. B Colville WA 99114 509-685-6158	Employment Training Training Assistance
	Rural Resources Employment & Training program	956 S. Main Street Colville, WA. 99114 509-685-6018 (e_t@ruralresources.org) 1800776-2178	Paid internships, paid on the job training and educational opportunities
Crisis Assistance Programs (Domestic Violence Shelters, Homeless Shelters, Etc.)	Family Crisis Network	730 W 1st Street, Newport WA 99156 509-447-2274	Advocacy, Shelter, Counseling, Housing Assistance
	Rural Resources Community Action	509-684-6841 Energy Assistance 509-684-8421 Housing/Shelter	Crisis services
	Domestic Violence Hotline	509-684-4597 or 1-800-767-6081	Family Support Center
Libraries	Pend Oreille County Library – Newport Branch	116 S Washington Ave. Newport, WA 99156 1-800-366-3654	Monday–Saturday 10–7
	Pend Oreille County Library – Calispel Valley Branch	107 S. 1 st Ave. Cusick WA 99119 1-800-366-3654	T. 10–7 W–Th 10–6 F–S 10–5
	Pend Oreille County Library – Ione Branch	210 Blackwell St. Ione, WA 99139 1-800-366-3654	T–Th 10–6 F–S 10–5
	Pend Oreille County Library – Metaline Branch	302 Park St. Metaline Falls, WA 99153 1-800-366-3654	M 10–6 W 10–7 F 10–5
Nutrition Services (Food Banks, Local WIC office, etc.)	Youth Emergency Services Food Pantry Cupboard (for youth)	Newport HS & Pend Oreille River School Cusick HS & Middle School	Nutrition Services for teens
	Newport Food Bank	310 West Pine Street Newport WA 99156 509-447-1168	Open Tuesdays 10–2
	North County Food Bank	40015A N Collins Rd Elk, WA 99009	Monday: 10–2 Wed: 8:30–12
	Cusick Food Pantry	402 Riverside Road. Cusick	Tuesday 9–10:30

		In the basement of the Pend Oreille Bible Church	
	NEW Hunger Coalition Emergency Food Bank of Ione	St. Bernard Catholic Church 302 8 th Ave. Ione, WA 99136 509-442-3223	Th 11:30am-12:30pm
	Second Harvest	Occasional Mobile Food bank throughout the TriCounty area	
	Family Crisis Network Kathy's Cupboard	730 W 1st St Newport WA 99156 509-447-2274	509-447-2274, option 2 for housing. Provides: Ready to Eat House food items and utensils, Seasonal Clothing & Supplies, Personal Care needs
	WIC	605 Highway 20 Newport, WA 99156 509-447-3131 https://www.netchd.org/192/Women-Infants-Children-WIC	Supplemental nutrition services for pregnant & breastfeeding women and children 0-5
	SNAP	(877) 501-2233 https://www.washingtonconnection.org/	Food Assistance for income eligible families
Mental Health Services for Low-Income Families	Pend Oreille County Counseling Services	105 S. Garden Avenue Newport, WA 99156 Phone: 509-447-5651	Currently Accepting New Patients
	Family Crisis Network	730 W 1st St Newport WA 99156 509-447-2274	Trauma based Therapy: Currently have a waitlist (varies of time frame)
	Aegis Counseling Services	Dr. Grady Hoaglund 405 West Walnut St. Newport, WA 99156 509-869-4578	*Accepting New Patients
# of Dental Offices Accepting Medicaid in each county	1	Camas Center Medical & Dental Clinic 1821 LeClerc Rd. N. #1 Cusick, WA 99119 509-447-7111	3 Dental offices in Newport – all serve pediatric patients only 1 accepts Medicaid insurance *accepting new patients

Hospitals, prenatal, and pediatric services accepting Low-Income Families	Newport Hospital & Health Services	714 W. Pine Street Newport, WA 99156 509-447-2441	Emergency Department Labor & Delivery
	Newport Health Center Family Practice Center	714 W. Pine Street, Building C Newport, WA 99156 509-447-3139	Family Practice OB Perinatal Nurse Practitioner *Accepting New Patients
	Camas Center Medical & Dental Clinic	1821 LeClerc Rd. N. #1 Cusick, WA 99119 509-447-7111	Family Practice / *Accepting New Patients 2 fulltime providers & 1 parttime provider
	Northeast Washington Community Health Program	208 Cedar Creek Terr lone, WA 99139 509-442-3514	Family Practice *Accepting New Patients over 12 years old
	Newport Express Care Clinic	221 N. Cass Avenue Newport WA 99156 509-447-3139	Express Care, no appt necessary 8:30-4:30 Mon-Fri 10-:30-12:30 Sat
Public Transportation	Dial-a-Ride / Rural Resources	1-800-776-9026	
	Special Mobility Services	1-877-264-RIDE	Contact at least 2 working days in advance for requests, except emergencies. Rides to medical, dental and counseling appointments for people using medical coupons who have no other transportation options.
	DSHS Medical Coupon Transportation	1-800-925-5438	Prior Approval Necessary
Local Supermarkets	Safeway	121 W Walnut St. Newport, WA 99156	
	Super One	86 Tank Rd. Oldtown, ID 83822	

Thrift Stores	2 Chics Thrift	201 S Washington Newport WA 99156 509-671-5646	
	Second Chances	400 N Washington Newport WA 99156 208-610-4309	
	New 2 You	5616 U.S. Rte. 2 Priest River, ID 83856	Approx. 7 miles from Newport
	Priest River Community Church Thrift Store	6042 US Rte. 2 Priest River ID, 83856 208-448-0707	Approx. 7 miles from Newport
	Clothing Closet	6083 US Rte. 2 Priest River, ID 208-448-4703	Approx. 7 miles from Newport
Low-Income Housing & Rental Assistance Programs/Locations	Family Crisis Center	730 W 1st St Newport WA 99156 509-447-2274	<p>Many different programs: Unexpected costs, must be below 80% of area medium income</p> <p>Assists with past due rent including current month</p> <p>Past due utility bill but can't be current utility bill</p> <p>Deposits & first month rent for homeless or sleeping in substandard portion / assists with portion of bill or full (case by case)</p> <p>Occasional grants for mortgages (current covid req)</p> <p>Eviction assistance services</p>

	Rural Resources		Multiple Programs at Different times HUD (closed) TBRA (Closed) Energy Assistance Programs
	PUD Neighbors in Need Program	509-447-3137	Energy Assistance Need Grant
	DSHS	877-501-2233 or online	Housing & Essential Needs Referrals: Rent & Utility Assistance, Move-In Costs, Personal Health & Hygiene, Cleaning Supplies Must have a temporary change of income due to a disability either mental or physical (usually due to waiting on SSI)
	Willow Glen	1600 W. 7 th St, Newport WA 99156 509-447-0207	Apartments / Subsidized
	Riverbend Village Apartments	1701 W 7th St, Newport, WA 99156 509-447-0207	Apartments / Subsidized
	Kaniksu Village Apartments	109 E 5 th Ave., Metaline Falls, WA 99153 509-446-4100	Apartments / Subsidized
	Pend Oreille Apartments	104-108 W 4th Ave, Metaline Falls, WA 99153 951-337-3482	Section 8 / TBRA
Internet Assistance Programs	Affordable Connectivity Program	Can Call RR for help setting Up Judy Potter, 509-684-8421, ext. 7273 Terry Williams, 509-684-8421, ext. 6166 https://www.getinternet.gov	\$30 off internet for family receiving SNAP, WIC, section 8 housing, veterans' pension, Federal Pell Grant or free/reduced school lunch
	Family Crisis Center	730 W 1st Street, Newport WA 99156 509-447-2274	Grant / current COVID requirement

Child Development Programs	Children & Youth with Special Needs	509-447-3131 (Newport Office) 509-684-2262 (Colville Office) 509-775-3111 (Republic Office)	Ferry, POC, Stevens Counties Birth-17 years
	Washington Elks Therapy Program for Children	253-472-6223 or 1800-825-3557 Email: waelks@waelks.net	Ferry, POC & Stevens Counties 0-3 years Referral Required In Home Services Short term OT and PT therapy services. Ages birth to 21 years.
	Newport Hospital Rehabilitation services	509-447-2441 714 W. Pine Street Newport, WA. 99156	Speech therapy and swallowing/feeding Toddlers & children OT/Behavioral & Development Issues
	ESIT Early Services for Infants and Toddlers	NEW ESD101/ESIT	Therapy services for children age birth to 3 years old with a 25% delay or 1.5 standard deviation below their age in one or more developmental areas.
	Department of Social & Health Services	Dshs.wa.gov/dda/services-and-information-request 1-800-319-7116	Support and services for families and children with qualifying disability before age 18.
	PAVE	1-800-572-7368 ext. 115 www.wapave.org http://wapave.org/get-help/	Parent training & information to help parents advocate for their child with disabilities.

Stevens County			
Resources	Name	Contact Information	Resource Type
Community College & Parent Education Program	Spokane Community College – Colville Campus	985 S Elm St. Colville WA 98114 509-685-2120 / 800-276-8040 NorthernCounties@scc.spokane.edu Kerrin Langford Enrollment Onboarding advisor Kerrin.Langford@scc.spokane.edu 509-279-6737	GED HS Diploma Associate degrees Certificates College and Career transitions

	WorkFirst (Must be enrolled in TANF)	https://workfirst.wa.gov/	Vocation Training GED Prep
	WorkSource	956 S. Main, Ste. B Colville WA 99114 509-685-6158	Employment Training Training Assistance
	Rural Resources Employment & Training program	956 S. Main Street Colville, WA. 99114 509-685-6018 (e_t@ruralresources.org) 1800776-2178	Paid internships, paid on the job training and educational opportunities
Legal Services	Northwest Justice	www.nwjustice.org/home 1-888-201-1014 509-684-7652	Free and low-cost legal assistance
	Stevens County Court Facilitator	509-684-7575	Family Law \$20 no fee waiver
	Washington law help	www.washingtonlawhelp.org	Legal information, forms and links to lawyers
	Disability Rights Washington	www.disabilityrightswa.org 1-800-562-2702	
	Tenant Rights	www.tenantsunions.org 1-206-723-0500	
Employment Services	Work First (Must be Enrolled in TANF)	https://workfirst.wa.gov/	Employment Services
	WorkSource	956 S. Main, Ste. B Colville WA 99114 509-685-6158	Employment Training Training Assistance
	Rural Resources Employment & Training program	956 S. Main Street Colville, WA. 99114 509-685-6018 (e_t@ruralresources.org) 1800776-2178	Paid internships, paid on the job training and educational opportunities
	Working Connections Childcare	Call 1-844-626-8687 or apply online at: www.washingtonconnection.org/home/	Childcare subsidy
	Seasonal Childcare	Call 1-844-626-8687 or apply online at: www.washingtonconnection.org/home/	Help paying for childcare for eligible families who are seasonally employed in

			agricultural work, live in designated counties and are receiving TANF benefits
	DSHS Vocational Rehab	1-888-330-5739	
Crisis Assistance Programs (Domestic Violence Shelters, Homeless Shelters, Etc.)	Rural Resources Community Action	509-684-6841 Energy Assistance 509-684-8421 Housing/Shelter	Crisis services
	NE Washing Alliance Counseling Svcs	509-684-4597 or 1-800-767-6081	Crisis Line/ Counseling services
	Domestic Violence Hotline	509-684-4597 or 1-800-767-6081	Family Support Center
	NEW Family Life Center	Colville	Pregnancy Temporary housing
Libraries of Stevens County http://thelosc.org	Colville	195 S. Oak Street Colville, WA. 99114 509-684-6620	
	Chewelah	311 E. Clay Ave Chewelah, WA. 99109 509-935-6805	Monday-Friday: 10am-6pm Sat/Sun: Closed
	Northport	521 Center Ave Northport, WA. 99157 509-732-8928	Monday-Friday: 10am-6pm Sat/Sun: Closed
	Lakeside	5919 Hwy 291 Suite 2 Nine Mile Falls, WA. 99026 509-315-8339	Monday-Friday: 10am-5pm Sat/Sun: Closed
	Loon Lake	4008 Cedar Street Loon Lake, WA. 99148 509-233-3016	Monday-Tuesday: 10am-5pm Wednesday: Closed Thursday-Friday 10am-5pm Sat/Sun: Closed
	Kettle Falls	615 Meyers Street Kettle Falls, WA. 99141 509-738-6817	Monday-Friday: 10am-6pm Sat/Sun: Closed
	Hunters	5014 Hunters Old School Rd Bldg. #11 Hunters, WA. 99137 509-890-0916	Wednesday: 10am-4pm Friday: 10am-4pm

	Northport	521 Center Ave, Northport, WA 99157 509-732-8928	Tuesday, Thursday, Friday: 10am-5pm
	Library Lockers	Hunters Fruitland Gifford Onion Creek Northport SCFD13 Echo Ridge Fire Station	
Nutrition Services (Food Banks, Local WIC office, etc.)	Colville WIC	509-684-2262	
	Colville Food Bank	210 S Wynne St, Colville, WA 99114 509-684-2971	T, W, F 10:00-12:30
	Kettle Falls Food Bank	472 Meyers St, Kettle Falls, WA 99141 509-738-2326	M-Th 10-2
	Northport Food Bank	111 Center Ave, Northport, WA 99157 509-732-6183	M 8-2
	Chewelah Food Bank	302 E Main Ave, Chewelah, WA 99109 509-936-9155	Th 10-2
	Second Harvest	Occasional Mobile Food bank throughout the TriCounty area	
Mental Health Services for Low- Income Families	NEW Alliance counseling center Chewelah Office	E. 301 Clay Ave, Room 201 Chewelah Municipal Bldg Chewelah, WA 99109 509-935-4808	
	NEW Alliance counseling center Colville Office	165 E. Hawthorne Avenue Colville, WA 99114 509-684-4597	
# of Dental Offices Accepting Medicaid in each county	Colville Pediatric Dentistry	266 E. 1 st Ave Colville, WA. 99114 509-685-7265 Colvillepediatricdentistry.com	*Accepting New Patients
	NEW Dental Clinic	370 N. Main Street Colville WA 509-684-1440	*Accepting New Patients
	NEW Health programs	518 E. Clay Ave Chewelah, WA. 99109 509-935-8111	*Accepting New Patients
	Springdale Community Dental Clinic	105 North 2 nd Street Springdale, WA. 99173 509-258-7543	*Accepting New Patients - Pregnant Women and children only
	NEW Health - Lake Spokane	5952 Blackstone Way Suite 100 Nine Mile Falls, WA. 99026 509-464-0002	*Accepting New Patients - State Only

	Community Dental Clinic		Waitlist & Scheduling begins in February
Hospitals, prenatal, and pediatric services accepting Low-Income Families	Providence MT. Carmel Hospital	982 E. Columbia Ave Colville, WA. 509-685-5362-Rehab services 509-685-5100-Hospital	Pediatric Rehabilitation therapy services includes OT, PT and SLP Childbirth classes, dietary education, fetal non stress testing, first through third trimester ultrasound, maternal labor evaluation. Childbirth services, breastfeeding support
	Providence St. Joseph Hospital	500 E. Webster Ave. Chewelah, WA. 99109 509-935-5272	Pediatric speech therapy
	NEW Health - Colville Medical	358 N. Main St. Colville, WA 99114 509-684-1440	*Accepting new patients M-F: 7:00am-5pm
	NEW Health - Lake Spokane Community Medical Clinic	5952 Blackstone Way Suite 100 Nine Mile Falls, WA. 99026 509-464-3627	*Accepting New Patients? M-F: 7:30am-5pm
	NEW Health - Loon Lake Medical Center	3994 Colville Rd. Loon Lake, WA 509-233-8412	*Accepting New Patients? Tu-F: 8-5
	NEW Health - Springdale Medical Center	114 S. Main Street Springdale, WA 99173 509-258-4234	*Accepting New Patients? Monday - Thursday: 8-5
Public Transportation	Dial-a-ride / Rural Resources	1-800-776-9026	
	Commuter Bus / Rural Resources	1-800-776-9026	
	Chewelah Shuttle Service / Rural Resources	1-800-776-9026	

	Special Mobility Services	1-877-264-RIDE	
	DSHS Medical Coupon Transportation	1-800-925-5438	Prior Approval Necessary
Local Supermarkets	Safeway	10 W. Colville Ave. Chewelah, WA 99109 509-935-8383	
	Safeway	391 N Main St, Colville, WA 99114 (509) 684-3782	
	Super One Foods	1250 N Hwy, Colville, WA 99114 509-684-9788	
	Walmart	810 N Hwy, Colville, WA 99114 509-684-3209	
	Harvest Foods	260 W 3rd Ave, Kettle Falls, WA 99141 509-738-6644	
Thrift Stores	Habitat for Humanity	Colville 509-684-2385	Clothing, furniture & housewares
	Goodwill industries	Colville-509-684-6162	Clothing, furniture & housewares
Low-Income Housing & Rental Assistance Programs/Locations	Foundational Community Supports	Rural Resources Jeff Vacura at 508-684-8412 ext. 7223	Supportive housing services for families on Medicaid with complex health needs find and maintain housing.
	Rural Resources Community Action	509-684-8421	Homeless services Transitional Housing Operating & Rent assistance
	Catholic Charities	251 N Main St C Colville, WA 99114 (509) 685-7388	
Internet Assistance Programs	ACP Affordable Connectivity Program	Apply here www.affordableconnectivity.gov Or get help at the Colville Library M-F 3-6pm	\$30 off internet for family receiving SNAP, WIC, section 8 housing, veterans' pension, Federal Pell Grant or free/reduced school lunch

Child Development / Daycare Centers & Programs	Children & Youth with Special Needs	509-447-3131 (Newport Office) 509-684-2262 (Colville Office) 509-775-3111 (Republic Office) M-T 7:30am-4:30pm www.netchd.org	Help connecting families to services who have children from birth to 18 years with chronic health condition.
	ESIT Early Services for Infants and Toddlers	NEW ESD101/ESIT	Therapy services for children age birth-3 years with a 25% delay or 1.5 standard deviation below their age in 1 or more dev areas.
	Department of Social & Health Services	Dshs.wa.gov/dda/services-and-information-request 1-800-319-7116	Support and services for families and children with qualifying disability before age 18.
	Washington Elks Therapy Program for Children	253-472-6223 or 1800-825-3557 Email: waelks@waelks.net	Short term OT and PT therapy services. Ages birth-21 years.
	Providence MT. Carmel Hospital	982 E. Columbia Ave Colville, WA. 509-685-5362-Rehab services 509-685-5100-Hospital	Pediatric Rehabilitation therapy services includes OT, PT and SLP. Childbirth classes, dietary education, fetal non stress testing, 1 st -3 rd trimester ultrasound, maternal labor evaluation. Childbirth services, breastfeeding support
	Horse Heritage Ed Program	P O Box 48 Valley, WA. 99181 509-844-2556 www.horseheritage.org www.facebook.com/horseheritage	Adapted horseback riding, equine facilitated learning, hippotherapy.
	PAVE	1-800-572-7368 ext. 115 www.wapave.org http://wapave.org/get-help/	Parent training & information to help parents advocate for their child with disabilities.

Ferry County			
Resources	Name	Contact Information	Resource Type
Community College / Parent Education Program	Spokane Community College – Republic Campus	63 N. Keller St. Ste. B PO Box 739 Republic, WA 99166 509-775-3675 / 800-276-8040 ext. 6410 NorthernCounties@scc.spokane.edu	GED HS Diploma Associate degrees Certificates
	WorkFirst (Must be enrolled in TANF)	https://workfirst.wa.gov/	Vocation Training GED Prep
	WorkSource	956 S. Main, Ste. B Colville WA 99114 509-685-6158	Employment Training Training Assistance
	Rural Resources Employment & Training program	956 S. Main Street Colville, WA. 99114 509-685-6018 (e_t@ruralresources.org) 1-800-776-2178	Paid internships, paid on the job training and educational opportunities
Legal Services	Northwest Justice	www.nwjustice.org/home 1-888-201-1014 509-684-7652	Free and low-cost legal assistance
	Washington law help	www.washingtonlawhelp.org	Legal information, forms, links to lawyers
	Disability Rights Washington	www.disabilityrightswa.org 1-800-562-2702	
	Tenant Rights	www.tenantsunions.org 1-206-723-0500	
Employment Services	Curlew Job Corps	1-800-733-JOBS	
	Work First (Must be Enrolled in TANF)	https://workfirst.wa.gov/	Employment Services
	WorkSource	956 S. Main, Ste. B Colville WA 99114 509-685-6158	Employment Training Training Assistance
	Rural Resources Employment	956 S. Main Street Colville, WA. 99114	Paid internships, paid on the job training and

	& Training program	509-685-6018 (e_t@ruralresources.org) 1800776-2178	educational opportunities
	Working Connections Childcare	Call 1-844-626-8687 or apply online at: www.washingtonconnection.org/home/	Childcare subsidy
Crisis Assistance Programs (Domestic Violence Shelters, Homeless Shelters, Etc.)	Rural Resources Crime Victim Services	42 Klondike Rd Republic, WA 99166 509-775-0742	Crime Victim Services
	Connections Domestic Violence & Sexual Assault	509-775-3331 or 1-800-269-2380	
Libraries	North Central Regional Library	794 S. Clark Avenue Republic, WA. 99166 509-775-3328 www.ncrl.org/locations	
Libraries	North Central Regional Library	11 River Street Curlew, WA. 509-779-0321 www.ncrl.org/locations	
Nutrition Services (Food Banks, Local WIC office, etc.)	Republic WIC	509-775-3111	
	The Peoples Pantry of Ferry County	925 S Keller St, Republic, WA 99166	
	Curlew Community Food Pantry	10 S Main Curlew, WA 99118	Thurs: 9:30 am - 11 am (1st & 3rd Thursday)
Mental Health Services for Low-Income Families	NEW Alliance counseling center Republic Office	65 N. Keller PO Box 1120 Republic, WA 99166 509-775-3341	*Accepting New Patients
# of Dental Offices Accepting Medicaid in each county	1	Republic Dental Clinic 194 N. Portland Street Republic WA. 99166 509-775-3169	
		Inchelium Community health Center confederated tribes of Colville 39 Shortcut Road Inchelium, WA. 99138 509-722-7006	

Hospitals, prenatal, and pediatric services accepting Low-Income Families	Ferry County Memorial Hospital	36 Klondike Road Republic, WA. 99166 509-775-3866	Emergency services
	Republic Medical Clinic	10 Ros Circle Republic, WA 99166 509-775-3153	Family Medicine
Public Transportation	Dial-a-ride / Rural Resources	1-800-776-9026	
	Special Mobility Services	1-877-264-RIDE	
	DSHS Medical Coupon Transportation	1-800-925-5438	Prior Approval Necessary
Local Supermarkets	Ferry County Co-op and Kettle Crust Bakery	PO Box 335 34 North Clark Avenue, Republic, WA 99166 (509) 775-3754	Summer Store Hours (June 1 - Sept 30) <u>Monday - Friday:</u> 8 am to 6 pm <u>Saturday:</u> 10 am to 5 pm Winter Store Hours (Oct 1 thru May 31) <u>Monday - Friday:</u> 9 am - 6 pm <u>Saturday:</u> 10 am - 4 pm
	Anderson Grocery	711 S Clark Ave, Republic, WA 99166 509-775-3378	
	Republic Market	970 S Clark Ave, Republic, WA 99166 509-775-2534	
	Curlew Store	2 River St, Curlew, WA 99118 509-779-0854	
	Inchelium Community Store	38 Short Cut Rd, Inchelium, WA 99138 Phone: (509) 722-3305	
Thrift Stores	Malo Trading Post	Malo 509-779-4644	Clothing, furniture, and housewares

	Rose & Crown thrift shop	Republic 509-775-8970	Clothing, furniture, and housewares
Low-Income Housing & Rental Assistance Programs/Locations	Ferry County Joint Housing Authority	(509) 755-3924 https://www.ferry-county.com/services/ferry_county_housing_authority.php	Sec. 8 Resources
	Rural Resources	42 Klondike Rd Republic, WA 99166 509-775-0742	*HUD Support *TBRA Support *Other Housing Assistance *Low Income Housing
	Frontier Springs Apartments	11 NorthStar Ln, Republic, WA 99166 509-775-2973	
	ESD In School Homeless Youth Liaisons	509-789-3800 Curlew School District 509-779-4931 Inchelium School District 509-722-6181 ext. 100 Keller School District 509-634-4325 Orient School District 509-684-6873 Republic School District 509-775-3171	Youth
Child Development Programs	Republic Therapy Clinic	10 Ros Circle Republic, WA. 99166 509-775-8400	PT and OT
	Curlew Therapy Clinic	9 Kettle River Road Curlew, WA. 99118 509-779-0831	PT
Internet Assistance Programs	ACP Affordable Connectivity Program	Apply here www.affordableconnectivity.gov Or get help at the Colville Library M-F 3-6pm	\$30 off internet for family receiving SNAP, WIC, section 8 housing, veterans' pension, Federal Pell Grant or free/reduced school lunch

Appendix D: Data Table: Status of Eligible Tri-County Children and Families

Item (upper right letter refers to source referenced below table)	Year Published	Washington State	Ferry County	Stevens County	Pend Oreille County
General Demographics					
Population ^a	2022	7,785,786	7,448	48,229	14,179
Population ^a	2020	7,705,247	7,178	46,450	13,404
Population % Change ^a	2020-2022	1.0	3.8	3.8	5.8
Rural Population: Counties with a population density less than 100 persons per square mile or counties smaller than 225 square miles as of April 1, 2023 ^x	2023	N/A	3.31	19.12	9.80
% Persons in poverty ^a	2022	9.9%	17.5%	13.6%	15.9%
% of Population Living Below the Poverty Line (National Average 12.8%) ^c	2022	10.2%	17.1	12.8%	9.8%
% Households in Financial Hardship ^a	2021	24%	35%	29%	29%
% Burdened Households ^o	2021	30.0% R	27.3	24.4	24.2
% Burdened Households ^o	2020	29.0 in 2019 ^a	24.9	25.2	23.3
Per Capita Income ^a	2022	\$43,817	\$28,068	\$30,518	\$31,346
Median Household Income ^a	2022	\$82,400	\$45,907	\$57,206	\$59,134
Food Insecurity Rate ^a	2021	8.9%	15.0%	11.3%	11.3%
Supplemental Nutrition Assistance Program Recipients Per 100 persons ^s	2021	15.36	28.60	22.19	25.16
Temporary Assistance to Needy Families (TANF), Child Recipients (age birth-17) ^s	2021	4.49	9.06	6.02	8.51
Women, Infants and Children (WIC) Nutrition Program Participants ^v	2022	195,655	208	919	263
% Unemployment Rate ^r	2023	3.8%	6.0%	4.1%	4.3%
Domestic Violence Offenses per 1,000 Persons ^s	2021	8.74	4.88	6.55	11.03
Domestic Violence Offenses per 1,000 Persons ^s	2020	7.16	6.29	6.71	7.56
% Residents Under Age 65 Without Insurance ^a	2022	7.5%	9.6%	8.2%	8.0%
Medicaid Health Coverage ^c	2020	6.19%	30.5%	25.2%	23.0%
County Health Rankings ^r	2023	N/A	39/39	19/39	38/39
Labor Force Participation Rate ^a	2021	63.7%	44.5%	49.9%	47.6%
Head Start Eligible Children and Families					
% Population of Children Under 5 ^a	2022	5.5%	4.1%	4.7%	4.6%
% Childhood Poverty Rate (Under age 18) ^b	2021	12%	30.5%	20.1%	24.9%
Population of Children Under <5 Years Old in Poverty ^c	2020	59,504	57	380	57
% of children under age 19 without health insurance ^c	2022	3.12%	5.62%	4.41%	4.14%
Population whose income is below federal poverty level with children <6 years ^c	2022	69,765	65	509	90

% Homeless Children by School District '21	2019	3.0% (k) Percentage of enrolled students who are homeless 2021	Curlew School District: 8.29% Republic School District: 1.33% Keller School District: 35.71% Inchelium: 4.48% Orient: 0	Northport: 3.88 Onion Creek: 17.50 Kettle Falls: 6.26 Colville: 4.89 Columbia (Stevens): 8.97% WellPoint: 20.24% Chewelah: 4.36 Valley: 6.89% Mary Walker: 7.34 Loon Lake: 8.29	Selkirk: 9.89 Cusick: 9.75 Newport: 8.72
% Homeless Children by School District '20	2020		Keller: 8.3 Curlew: 6.0 Orient: 0 Inchelium: 0 Republic: 2.1	Onion: 0 Chewelah: 5.9 Wellpoint: 12.8 Valley: 2.3 Colville: 1.5 Loon Lake: 0 Summit Valley: 0 Evergreen: 0 Columbia: 5.6 Mary Walker: 7.1 Northport: 9.7 Kettle Falls: 2.2	Newport: 10.3 Cusick: 17.7 Selkirk: 8.1

% Homeless Children by School District ^u	2021		Keller: 9.1 Curlew: 3.6 Orient: 0 Inchelium: 0 Republic: 2.2	Onion: 0 Chewelah: 6.3 Wellpinit: 16.3 Valley: 2.8 Colville: 2.3 Loon Lake: 0.4 Summit Valley: 0 Evergreen: 0 Columbia: 6.8 Mary Walker: 1.3 Northport: 9.0 Kettle Falls: 2.4	Newport: 9.2 Cusick: 15.6 Selkirk: 7.9
% Homeless Children by School District ^u	2022		Keller: 6.7 Curlew: 10.6 Orient: 0 Inchelium: 0 Republic: 0.3	Onion: 0 Chewelah: 7.1 Wellpinit: 0.3 Valley: 3.3 Colville: 2.9 Loon Lake: 0 Summit Valley: 0 Evergreen: 0 Columbia: 2.9 Mary Walker: 2.1 Northport: 9.1 Kettle Falls: 3.0	Newport: 7.3 Cusick: 16.5 Selkirk: 6.4
# of children in foster care in WA state ^u	2021	8,894	N/A	N/A	N/A
# of Children in Foster Care (ages 0-21) ^v	2021	N/A	14	56	27
# of Children in Foster Care (ages 0-21) ^v	2022	N/A	10	48	20

# of Children in Foster Care (ages 0-21) ^v	2023	N/A	13	52	24
% Child Food Insecurity <18 years old ^z	2021	11.8	21.5	16.1	15.2
Reported CPS Child Abuse or Neglect Cases Per 1,000 ^z	2020	31.6	44	42	55.90
% of children younger than 18 years of age with a physical, mental, or sensory disability lasting six months or longer ^z	2017-2021	4.4	7.1	5.5	9.0
% of children <5 years of age with a physical, mental, or sensory disability lasting six months or longer ^z	2017-2021	Not provided	2.8	1.1	0.0
Pregnant Women and Births Demographics					
Total # of Live Births/Pregnancy Rate ^u	2020	83,101	64	407	114
Teen Pregnancy Rate (15-19) ^z	2020	10.1 births per 1,000 (I)	36 births per 1,000	13 births per 1,000	Not found
Rate of births, induced abortions, and fetal deaths per 1,000 women (15-44) ^z	2020	66.6	76.8	67.8	68.0
% of births where the mother smoked during pregnancy ^z	2020-2021	4.4	11.1	10.5	8.7
% of births where the mother initiated breastfeeding ^z	2020-2021	93.7	92.9	93.3	96.0
% Low Weight Births (227-2499 grams) ^z	2021	7.0%	Not listed	6.6%	Not listed
% of Preterm Birth ^z	2019-2021	9.1	7.3	7.0	7.7

Data Table Sources:

A: U.S. Census Bureau Quickfacts: United States. United States Census Bureau. (n.d.).

<https://www.census.gov/quickfacts/fact/table/US/PST045222>

B: Research Center Washington. UnitedForALICE. (n.d.).

<https://www.unitedforalice.org/county-reports-mobile/washington>

Definition:

ALICE: Asset Limited, Income Constrained, Employed is defined as the percentage of households in a county with annual incomes above the Federal Poverty Level but below the ALICE threshold, the amount needed to cover the basic costs of living

C: Washington State. Data USA. (n.d.).

<https://datausa.io/profile/geo/washington>

D: Small Area Income and Poverty Estimates (SAIPE). United States Census Bureau. (n.d.).

<https://www.census.gov/data-tools/demo/saipe>

Definition:

The child poverty rate is the percentage of individuals in a county under 18 years of age and living in families whose income falls below the Federal Poverty Level (FPL) for their family size

E: Overall (all ages) hunger & poverty in Washington: Map the meal gap. Overall (all ages) Hunger & Poverty in the United States. (n.d.).

<https://map.feedingamerica.org/county/2021/overall/washington>

Definition:

Food insecurity is defined by the United States Department of Agriculture as the lack of access, at times, to enough food for an active, healthy life.

F: Monthly Employment Report. Employment Security Department Washington State. (n.d.).

<https://esd.wa.gov/labormarketinfo/monthly-employment-report>

G: All Births Dashboard – County. Washington State Department of Health. (n.d.).

<https://doh.wa.gov/data-and-statistical-reports/washington-tracking-network-wtn/county-all-births-dashboard>

H: Interactive map and Graphs: Quick Facts about Washington State Adolescents. Washington State Personal Responsibility Education Program. (n.d.).

https://www.waprepforhealthyouth.org/resources/interactive_map.html

Definition:

Teen Pregnancies: Counties are ranked 1 to 39, where counties with the lowest rates for pregnancy, birth, and chlamydia are ranked as 1 and the highest rates are ranked as 39. For graduation rates, the highest graduation rate is ranked as 1 and the lowest is ranked as 39

I: Centers for Disease Control and Prevention. (2023, September 12). National Center for Health Statistics: Washington. Centers for Disease Control and Prevention.

<https://www.cdc.gov/nchs/pressroom/states/washington/wa.htm>

J: Community assessment: The Foundation for Program Planning in Head Start. ECLKC. (2023, August 28).

<https://eclkc.ohs.acf.hhs.gov/program-planning/community-assessment-foundation-program-planning-head-start/community-assessment-foundation-program-planning-head-start>

K: National Center for Homeless Education: Washington. National Center for Homeless Education (NCHE). (n.d.).

<https://profiles.nche.seiservices.com/StateProfile.aspx?StateID=56>

L: Data Hub for Eastern Washington. County Health Insights. (2023, March 21).

<https://countyhealthinsights.org/county/pend-oreille/>

Definitions:

Child abuse is measured as the number of children 0–17 years of age who were reported to Child Protective Services (CPS) as victims of abuse or neglect and were accepted for further action. The rate is reported per 1,000 children.

The incidence of abuse is likely higher than the rates indicate because not all abuse gets reported to CPS.

Percent of singleton births with an estimated gestation age of less than 37 weeks

M: The AFCARS Report: Washington – ACF. Adoption and Foster Care Analysis and Reporting System (AFCARS) FY 2021 data. (n.d.).

<https://www.acf.hhs.gov/sites/default/files/documents/cb/afcars-tar-wa-2021.pdf>

N: Population density and land area criteria used for rural area assistance and other programs. Office of Financial Management. (2023, June 29).

<https://ofm.wa.gov/washington-data-research/population-demographics/population-estimates/population-density/population-density-and-land-area-criteria-used-rural-area-assistance-and-other-programs>

Definitions:

Rural counties are defined as a population density less than 100 persons per square mile or counties smaller than 225 square miles as of April 1, 2023

Population percent change – The difference between the population of an area at the beginning and end of a time period, expressed as a percentage of the beginning population.

O: Child Nutrition Program Reports. Washington Office of Superintendent of Public Instruction. (n.d.).

<https://ospi.k12.wa.us/policy-funding/child-nutrition/child-nutrition-program-reports>

P: Home – Washington State Report Card. Washington Office of Superintendent of Public Instruction. (n.d.).

<https://washingtonstatereportcard.ospi.k12.wa.us/>

Q: Burdened households (5-year estimate). Economic Research Federal Reserve Bank of St. Louis. (2022, December 8).

<https://fred.stlouisfed.org/series/DP04ACS053065>

Definition:

Burdened households are those households who pay 30 percent or more of their household income on housing (such as rent or mortgage expenses).

R: Child Poverty Statistics in the U.S. Kids Count Data Center. (n.d.).

<https://datacenter.aecf.org/data/tables>

S: Risk and Protection Profiles for Substance Abuse Prevention Planning. Washington State Department of Social and Health Services . (n.d.).

<https://www.dshs.wa.gov/ffa/research-and-data-analysis/county-and-state>

T: Washington: Data by County. County Health Rankings & Roadmaps. (n.d.).

<https://www.countyhealthrankings.org/explore-health-rankings/washington?year=2023>

U: Washington State Department of Health WIC Data by County. Washington State Department of Health Women, Infants and Children (WIC) Nutrition Program WIC Data by County – Federal Fiscal Year 2022 (FFY22). (n.d.).

<https://doh.wa.gov/sites>

V: Washington State Department of Children, Youth & Families. DCYF. (n.d.).

<https://www.dcyf.wa.gov/>

Definitions:

Foster care count includes counts of children/adults, ages 0-21, in DCYF custody during calendar year.

Children may be counted in multiple years if they were in out of home care across the years

W: County Profile. ESDWAGOV – Ferry, Stevens, and Pend Oreille County profile. (n.d.).

<https://esd.wa.gov/labormarketinfo/county-profiles/ferry>

Appendix E: Community Needs Assessment Family Survey Questions

Topic Area: Employment and Education

1. What is your typical day-to-day work, school, and/or training schedules? (i.e. stay-at-home parent, you and/or your partner works evenings or nights, you and/or your partner works a 9-5pm job, taking online college classes, work part-time, etc.) Please explain in the comment box below:
 - a. Comment box:
2. Have you experienced a change in employment status over the past year? Please select all answers that apply.
 - a. Change in job
 - b. Remained at the same job
 - c. Reduced work hours
 - d. Increase in work hours
 - e. Loss of employment
 - f. Other:
3. If you experienced a change in employment, was it by choice or due to circumstances such as lack of childcare, long commute to job site, no employment options in your town, etc.? Please explain in the comment box below:
 - a. Comment box:
4. Have you experienced a change in education status? If so, explain in the comment box below:
 - a. Comment box:
 - b. No, I have not experienced a change in education status
5. If you are contemplating going to school, what kinds of support would you need? (i.e. better internet access, tuition assistance, etc.)
 - a. Comment box:

Topic area: Health and Nutrition

6. The tri-counties (Ferry, Stevens, and Pend Oreille) of WA state are designated as medically underserved areas. Do you feel there are barriers for yourself and family with making it to regular doctor appointments (select all the apply)?
 - a. Yes, there is a lack of providers in my area
 - b. No, I do not have a problem going to regular doctor visits
 - c. Staff turnover since the COVID-19 pandemic has made it challenging to see a provider consistently
 - d. Cost of transportation to commute to the visits is a barrier
 - e. I do not have the time in my schedule for doctor visits
 - f. Other:
7. Do you feel there are barriers for yourself and family with attending regular dental appointments (select all that apply)?
 - a. Yes, there is a lack of providers in my area
 - b. No, I do not have a problem going to regular dental appointments
 - c. Staff turnover since the COVID-19 pandemic has made it challenging to see a provider consistently
 - d. Cost of transportation to commute to the visits is a barrier
 - e. I do not have the time in my schedule for dental visits
 - f. Other:
8. Are you satisfied with the medical and dental provider options in your area?
Please explain in the comment box below:
9. Have the food supply shortages since the pandemic affected your household's ability to meet adequate nutrition needs every month?
 - a. Yes
 - b. No

10. If the answer to question 6 is yes, what barriers prevent your household from having adequate nutrition available?
- a. Cost of groceries
 - b. Location of grocery stores
 - c. Supply chain shortages
 - d. Busy schedule
 - e. Other:
11. If you feel you have adequate food resources, would your family benefit from menu planning and cooking classes?
- a. Yes
 - b. No
 - c. Other ideas you feel would be beneficial:
12. Have the supply shortages since the pandemic affected your household's ability to purchase health and safety supplies such as diapers, formula, baby wipes, etc.?
- a. If yes, please explain:
 - b. No
13. Is there anything else you would like to add about your family's health and/or nutrition needs?
- a. Comment box:

Topic area: Childcare and Housing:

14. Have you experienced any changes in childcare access over this past year?
- a. Reduced childcare availability and hours of operation
 - b. No childcare options near me
 - c. Increased use of childcare
 - d. Childcare cost rates have increased

- e. Don't use or have a need for child care
 - f. Other:
15. Has your housing living situation changed over the past year? If yes, please explain:
- a. Yes:
 - b. No

Topic Area: Mental Health and Disabilities

16. How would you rate your overall social and mental health over this past year on a scale from 1 to 5? 1 being very poor social and mental health and 5 being excellent social and mental health?
- a. 1.....2.....3.....4.....5
17. If you chose 1, 2, or 3, please explain why in the comment box below:
- a. Comment box:
18. Do you have any suggestions for how Early Head Start could help improve your social and mental health?
- a. Comment box:
 - b. No suggestions.
19. If your child is receiving therapy services such as speech, physical therapy, or occupational therapy; how do you rate the services on a scale from 1 to 5 with 1 being unsatisfactory and 5 being the most satisfactory?
- a. 1.....2.....3.....4.....5
 - b. No, my child does not receive any type of therapy services.
20. If you chose 1, 2 or 3 please explain why in the comment box below:
- a. Comment box:
21. If your child does do therapy, what types of services are needed and where do you go for services?
- a. Comment box:

Topic area: Community Strengths

22. What were some of your family's biggest stressors or concerns this past year?

Please explain in the comment box below:

23. What do you feel are strengths in your community?

a. Comment box:

Appendix: F: Field Staff Community Needs Assessment Survey Questions

1. What obstacles or challenges have you seen in the community and working with families during this past year? (i.e. increase in homelessness, lack of childcare access, etc.)
2. What is the typical day-to-day work, school, and/or training schedules for the families you serve or people in your community? (i.e. stay-at-home parent, work evenings or nights, work a 9-5pm job, taking online college classes, work part-time, etc.) Please explain in the comment box below:
3. The EWU EHS program has noted a continuous increase in developmental concerns since the pandemic.

Are you seeing any early childhood developmental concerns in your community? If yes, what types of developmental concerns are you seeing? Please explain in the comment box below:
4. What, if any, interventions and tools could be helpful to address developmental concerns being seen in your community and/or within your caseloads?
5. Do you notice if the families are experiencing any barriers to attending regular doctor and dental visits? If so, what are the barriers that you've observed?
6. Have you observed any issues with families obtaining adequate nutrition and food resources?
 - a. Yes
 - b. No
7. If yes to question #6, what barriers are you aware of that prevent families from obtaining adequate food resources? (i.e. cost of groceries, lack of grocery stores, etc.)
8. There are supply shortages and high costs across the nation. Have you noticed any issues with families obtaining health and safety supplies such as diapers, formula, baby wipes, etc.?
9. What have you observed in the community's and your caseload's overall social and mental health?

10. What resources are available in the community for disability services, childcare services, housing assistance, and other assistance programs?
11. What community strengths have you seen over this past year?
12. What additional services do you believe our program could offer to better serve families (i.e. more nutrition assistance, internet assistance, higher education assistance, etc.)?
13. Are there any other issues or new trends you are noticing in the community?

Appendix G: EWU EHS Policy Council August 25th Meeting Minutes

MEETING MINUTES

Friday, Aug. 25th, 2023

EHS Colville Center

146-D Buena Vista Dr., Colville, WA 99114

10:30 – 11:00 a.m.

Executive Committee

- ❖ Discuss upcoming PC orientation and farewell party in Sept. *-ideas for orientation: PC bingo, returning members will be encouraged to do testimonials about what PC has meant to them, icebreakers (2 truths and a lie or true colors game), potluck style food, gift for Amanda*

11:00 – 12:00 p.m.

Policy Council Meeting

- ❖ Take attendance, determine quorum, identify attendance issues per Bylaws

❖ Member name	Present	Absent
Holly Linton	X	
Amanda Brown	X	
Casey Anderson	X	
Jessica Spease	X	
Sally Krausse Larsen	X	
Kelli Janiga	X	
Rachel Dawdy	X	

QUORUM MET? YES OR NO 7 out of 7 voting members present. There was a quorum to conduct business.

- ❖ Review Agenda
- ❖ Updates from Holly and Casey – WSA Head Start Parent Ambassador program

Holly shared the DVR adult w/ disabilities info, Casey-advocating for more father involvement.

- ❖ Approve and certify 2023-24 Policy Council election results, appoint vacant community rep. positions.

✚ ACTION TO CERTIFY AND APPROVE PC ELECTION RESULTS:

Sally motioned 1st to approve and certify the 2023-24 Policy Council election results, Amanda seconded, motion passes with all in favor

✚ ACTION TO APPOINT VACANT STEVENS COUNTY COMMUNITY REP.
POSITION:

Amanda motioned 1st to appoint Nakia to the vacant Stevens county Community Rep. position, Kelli seconded, motion passes with all in favor

✚ ACTION TO APPOINT VACANT STEVENS COUNTY COMMUNITY REP.
POSITION:

Kelli motioned 1st to appoint Emmalyn to the vacant Stevens county Community Rep. position, Sally seconded, motion passes with all in favor

✚ ACTION TO APPOINT VANCANT FERRY COUNTY COMMUNITY REP.
POSITION:

Sally motioned 1st to appoint Stormy to the vacant Ferry county Community Rep. position, Jessy seconded, motion passes with all in favor

✚ Community Needs Assessment Input:

- ❖ The EWU Early Head Start program has noted a continuous increase in developmental concerns since COVID.
 - Are you seeing any early childhood developmental concerns in your community? What types of developmental concerns are you seeing?
 - What, if any, interventions and tools could be helpful to address developmental concerns being seen in your community and/or within your family?
 - If your child does do therapy, where do you go for services? Are you happy with the services you are receiving?

-Policy council parents report seeing an increase in speech delays, reading delays, overall slower development, more child screen time, poorer learning when classes switched to a virtual learning platform, and less social interactions. Challenging to

get to appointments with the cost of fuel, often one vehicle or driver per household, and many providers are located a couple hours away in Spokane WA.

-Staffing issues for developmental services, lack of providers, or dissatisfaction with services. For example, Chewelah hospital has had rotating doctors, one parent had 5 different counselors in a year. Providers are constantly changing and parents report not feeling cared for as patients.

-Interventions and tools that have been helpful include: Lena language program, community Developmental Fairs. Could host a Developmental Fair in Ferry county next year.

-Republic has OT. Newport hospital has OT, SLP, and PT. Deer Park offers OT but parent reports not being satisfied with the space in the facility and the services.

- ❖ What is your typical day-to-day work, school, and/or training schedules (i.e. work nights, weekends, 9 to 5pm, online school, stay at home with the kiddos, etc.)?
 - If comfortable to share, have you experienced a change in employment status over the past year and/or education status? If yes, could you explain?

-More stay-at-home parents since COVID, can't afford childcare or there are not any childcare options that make working feasible.

-Many families working night and weekend shifts.

-Many parents report they wish they could go back to school if they had childcare and the cost of college was lower.

-There are few job opportunities and with the cost of childcare, it makes working not worth it.

-There is a lack of jobs for certain fields such as dental assisting.

-The commute times to work are long and often not in the parent's residing town. Some report commuting more than 2 hours to work site.

-Working may cause a lost in benefits such as SNAP.

- ❖ Have you experienced any changes in childcare access or the need for childcare over this past year? What childcare centers are available in your area and for what age groups?

-Valley Early Learning Center: had reduced the cost of childcare for two working parents. It is about \$800/month per child.

-No daycare centers in Pend Oreille for under 3 years old.

-lone: Kamas Center has cut slots, no ECEAP, would close with short-notice

-Newport has Head Start for 3 years and older

-Limited to no child care options, long waitlists, and high costs.

- ❖ What were some of your family's biggest stressors/concerns this past year?

- What obstacles or challenges have you noticed within the community and/or with your family the past year? (i.e. increase in homelessness, lack of childcare access, mental health declining, financial stress, etc.)

-Biggest stressors reported include: financial stress, healthcare access, availability and cost of food, cost of fuel, and general inflation.

-Housing issues such as not enough rental options, high prices to buy, and the quality of what is available for sale and rent. Finding issues with house foundations and finding a construction company to assist with remodeling. There are long waitlists for housing projects, unaffordable cost for housing projects, and high costs to hire a contractor. Costing around \$1,500 for a 2-bedroom rental. Issues with Airbnbs taking up properties.

-Mental health declining and higher anxiety in the households.

-Stressed by wildfires and poor air quality due to wildfire smoke.

- ❖ Is your family experiencing any barriers to attending regular doctor and/or dental visits? If so, what are the barriers that you've observed? (i.e. lack of providers, transportation, etc.)

-Ferry county dental office quit taking state dental insurance. Lack of dental providers.

-For adult doctor visits, tend to go to urgent care and do less preventive care, medical home is often in a different town than the family lives, 3-week or longer waitlist for appointments or telehealth, and telehealth is challenging to do with poor internet service and parents report less satisfaction with telehealth visits.

-High provider turnover, parents report having less rapport and satisfaction with their providers.

-Challenges with getting appointments scheduled, tracking appointments, and navigating insurance.

- ❖ Are you noticing gaps in service delivery or lack of accessibility to pediatric/family services? If yes, what services are lacking in your community? What do you wish you saw more of (i.e. more community events for parents, more family doctors, etc.)?

-Gaps with healthcare providers and specialists especially pediatric providers.

-Hard to find an OT and speech therapist

-Need for more grocery stores

-More food options at local farmers markets

-Need for community gardens

-Need for more affordable healthy food options.

-Lack of city parks, Valley has no city park, no park in Curlew, the Republic park was turned into a basketball court and families must commute to Grand Forks B.C. to access a park, Newport's park is outdated, Kettle Falls' park is not toddler-safe. The parks are not disabled-friendly.

-Newport library is closing down, and Chewelah's library does not often much for children.

- ❖ Have you experienced or observed in the community any barriers to adequate food and nutrition (i.e. barriers like cost of groceries, supply shortages, lack of grocery stores, etc.)

-Yes, lack of grocery stores, healthy food options, and high costs. Hard to find fresh foods, overall food shortages, and not many grocery stores to choose from.

-Parents report the desire for menu planning and cooking classes. They would also like to learn about couponing.

- ❖ What community strengths have you seen over this past year?

-Community coming together during pandemic and wildfires. People willing to help their neighbors. Enjoying the Early Head Start community events.

- ❖ What additional services do you believe our program could offer to better serve families (i.e. more nutrition assistance, internet assistance, higher education assistance, father focused events, etc.)?
 - How has Early Head Start helped your family? Are you satisfied with the program? Any suggestions?

-Need for more father focused events. Parent reports the Home Visitors should make sure to check-in with Dads about their mental health more often. Father volunteer reports that men tend to self-isolate when coping with poor mental health and rarely ask for help.

-Would like to see more questionnaires around mental health and engagement about mental health topics.

- ❖ Are there any other issues or new trends you are noticing in the community?

-None noted outside what was discussed in the questions above.

- ❖ If time, discuss the Moby wraps, complaints about these wraps at the Dev. Fair Should we consider buying different wraps for our core curriculum?

-Out of time, will discuss at the next meeting.

- ❖ Review of upcoming EWU EHS events including:
 - Orientation and goodbye/thank you party for current PC: regularly planned Sept. 22nd meeting
 - Sept. 22nd electing PC Executive Committee for 2023-2024
 - HSAC (Health Services Advisory Committee) meeting- Sept 6th 3-4pm
 - Quarterly Parent Committee meeting- Nov. 8th
 - Governing Board meeting, parents invited-Sept 13th, 4-4:30p

12:00 – 12:45 p.m.

Lunch Served

12:45 – 1:30 p.m.

Resume Policy Council Meeting

- ❖ Review July PCard and CTA statements

-Reviewed, no questions

- ❖ Review July FRIGITD Budget Report –*Justin out, will review in Aug. meeting*
- ❖ Review and approve July 21st meeting minutes:

📌 ACTION TO APPROVE MEETING MINUTES:

-Jessy motioned 1st to approve the July 21st meeting mins, Kelli seconded, motion passes with all in favor

1:30 – 2:00 p.m.

Wrap Up Activities

- ❖ Reimbursement paperwork and volunteer logs
- ❖ Next meeting: Sept. 22nd in-person PC orientation 10am-3pm
 - Equipment return or annual re-check outs

2:00 p.m.

Policy Council Meeting Adjourns

Meeting adjourned at 2:05pm

Appendix H: EWU EHS Parent Committee August 9th Meeting Minutes

MEETING MINUTES

Wednesday, Aug. 9th, 2022

Via Zoom 10:00–11:30am

<https://ewu.zoom.us/j/84968493843>

All enrolled parents invited

10:00 – 10:15 a.m.

Parent Committee Meeting

- ❖ Introductions including staff, policy council members, and enrolled parents (i.e. where do you live? Who is your home visitor? How many and age of kiddos in the program? Etc.)

Parent Volunteers	Staff
Jessica Spease	Sharon
Bonnie Hoegh	Megan
Stormy Anderson	Jeana

- ❖ Review purpose and mission of parent committees

10:15 – 11:30 a.m.

Parent Committee Community Needs and Events Feedback

📊 Community Needs Assessment Input:

- ❖ The EWU Early Head Start program has noted a continuous increase in developmental concerns since COVID.
 - Are you seeing any early childhood developmental concerns in your community? What types of developmental concerns are you seeing?

-Reading, social skills, motivational skills (both parents and children)

- What, if any, interventions and tools could be helpful to address developmental concerns being seen in your community and/or within your family?

-More socialization opportunities like Play and Learns

-Parents would like more help with understanding IEPs and what is needed for their child to get an IEP

-Newport Hospital newly offering SLP, OT, and PT services

-Play and Learns (Parents noted play and learns provide motivation for parents to be engaged. Also noted how beneficial play and learns are because they can meet with other parents that have different skills different from themselves and offer learning opportunities to each other).

-During this conversation parents noted that they are frustrated with the school districts IEP individualization process.

- If your child does do therapy, where do you go for services? Are you happy with the services you are receiving?

-Services are hard – Most services are located in Spokane & there are long waitlists.

-Services currently being received in Deer Park (OT), Center for Pediatric Therapy in Spokane for feeding therapy.

-Kids are being told they don't qualify for services at the school district.

-No parent advocates

-Frustrated with the lack of medical needs being met in communities. Parents questioned “why are we having so many feeding issues in children”

-Going to Seattle for GI doctor

- ❖ What is your typical day-to-day work, school, and/or training schedules (i.e. work nights, weekends, 9 to 5pm, online school, stay at home with the kiddos, etc.)?

- If comfortable to share, have you experienced a change in employment status over the past year and/or education status? If yes, could you explain?

-One mom chatted about working very part-time. Her Mom babysits when she needs to. She does travel from Lone to Colville for care as there are currently no childcare in the Lone/Metaline Falls area.

-Another Mom noted she stopped working during COVID, husband works in Alaska. This was a blessing in disguise for her. She does chat about the lack of employment opportunities and childcare.

- ❖ Have you experienced any changes in childcare access or the need for childcare over this past year? What childcare centers are available in your area and for what age groups?

-No childcare opportunities in the area where these 3 parents worked.

-In lone, the Camas Center had a 2.5year waitlist for childcare and switched to private pay only.

-Parent reported using her mom for childcare help while working very part-time.

-Parents wish medical and dental offices as well as gyms could provide childcare.

-NE Tri-County Health is conducting a feasibility study for childcare in lone area.

- ❖ What were some of your family's biggest stressors/concerns this past year?
 - What obstacles or challenges have you noticed within the community and/or with your family the past year? (i.e. increase in homelessness, lack of childcare access, mental health declining, financial stress, etc.)

-Flight delays (Dad works out of town) and cost of flights.

-Inflation – cost of groceries, school supplies, and fuel make it challenging, now really have to budget. Working parent needing to pick-up extra shifts to make ends meet.

-Poor quality of fruit and vegetables, time-consuming to cook snacks, not many food options

-Guilt around not buying costly snacks for the children

-No local jobs, especially with the mine closing down

-Long commute times to go to work

-No daycare including for children with special needs

-Lack of resources overall

- ❖ Is your family experiencing any barriers to attending regular doctor and/or dental visits? If so, what are the barriers that you've observed? (i.e. lack of providers, transportation, etc.)

-Lack of doctors, especially specialty including pediatrics and regular sports physicals.

-No dental offices in lone area, have to travel to Spokane.

-Transportation is tough including cost of fuel

-Winter road conditions

-Long waitlists

- ❖ Are you noticing gaps in service delivery or lack of accessibility to pediatric/family services? If yes, what services are lacking in your community? What do you wish you saw more of (i.e. more community events for parents, more family doctors, etc.)?

-Providers especially pediatric doctors and dentists

-Lack of community events for parents and children, park is really old and unsafe.

-Need larger retail stores

-Library doesn't offer activities for children younger than 1st grade.

-Some church activities for teens but few for younger children, missing Vacation Bible Schools

- ❖ Have you experienced or observed in the community any barriers to adequate food and nutrition (i.e. barriers like cost of groceries, supply shortages, lack of grocery stores, etc.)

-Need better produce, lone market has expired foods or doesn't have enough supplies.

-No community gardens

-Clay in the soil, challenging to grow foods

-Cost and quality of groceries

-lone Farmers Market is limited

❖ What community strengths have you seen over this past year?

-EHS local play and learn. Looking forward to more being added.

-Small town people really look out for each other such as carpooling.

-Parents forming Facebook groups to connect with each other.

❖ What additional services do you believe our program could offer to better serve families (i.e. more nutrition assistance, internet assistance, higher education assistance, father focused events, etc.)?

- How has Early Head Start helped your family? Are you satisfied with the program? Any suggestions?

-Happy with referrals

-One Mom noted at this time she would love to have more nutrition information, hands on nutrition trainings, perhaps an in-person parent cooking class.

-More Play and Learns and group socializations

-More parent volunteer opportunities for EHS

-More in-person connections and parent outings

❖ Are there any other issues or new trends you are noticing in the community?

-Doing more EHS events and offering more parent volunteer activities.

✚ What topics would you like to learn more about during these quarterly parent committee meetings? What types of EWU EHS parent and family events would you like to do this year?

-Will cover at next meeting

❖ Evaluations and feedback from participants

❖ Questions?

❖ Date of next meeting: Nov. 8th 10-11:30am

Meeting adjourns at 11:30 a.m.

Meeting adjourned at 11:35am

Appendix I: EWU EHS Health Services Advisory Committee (HSAC) September 6th Meeting Minutes

Health Services Advisory Committee Meeting Agenda

Wednesday, September 6th, 2023

3:00 p.m. – 4:00 p.m.

Via Zoom

Zoom Meeting Link: <https://ewu.zoom.us/j/88361620960>

Phone: +1-253-205-0468

Welcome and Introduction

3:00-3:10p.m.

- Welcome and introduction to the programs and Tri-County HSAC -
introductions and review HSAC purpose and policy
- Take attendance

Mary Sandall, WIC, ECAEP, EWU EHS

Jenyne West, Colville School District, PT

Elle Taylor, Rural Resources

Donna Bachand, EWU CHSPH, Nursing Dept.

Sharon Sundheim, EWU EHS

Olivia Beardslee, Rural Resources

Mary Schauer, ESD 101

Jeana Nichols, EWU EHS

Topics to Discuss

3:10-3:50p.m.

- What are other programs doing for trauma-informed trainings?
-ESD 101 is using the trauma-informed Pyramid Model
-RR-Conscious Discipline, the science of trauma training with Chris Wilson
(<https://beingtraumainformed.com/index.html>)
- Community Assessment Data Collection:

- The Tri-County early childhood programs have noticed a continuous increase in developmental concerns since COVID.
 - Are you seeing any pressing early childhood developmental concerns in your community? What types of disabilities are you seeing?

-Seeing delays mostly in speech and social-emotional development.

-Also seeing toileting delays and more feeding concerns including picky eaters

-Families struggling to get their kids an IEP, then no available services once they receive an IEP.

- What, if any, interventions and tools could be helpful to address developmental concerns being seen in your community? What services and resources are currently being provided by community agencies?

-More emphasis on parent education plans, particularly Conscious Discipline.

-EWU EHS Development Fairs

-More parent willing to learn and seeking education

- What obstacles or challenges have you seen in the community and working with families during this past year? (i.e. increase in homelessness, lack of childcare access, ect.)

-Cost of living, transportation, housing, and mental health

-Finding childcare during the summertime, evenings and nontraditional hours

-Overall, noticing higher levels of stress among families

-More families moving into RVs, inadequate water/power

-No options for childcare

-Poor internet connection

-Income ratio with food costs

- Do you notice if families are experiencing any barriers to attending regular doctor and dental visits? If so, what are the barriers that you've observed?

-Many families struggle to get to appointments, appointments are scheduled so far in advance that families have too many things come up by the time the appt. happens.

-Referrals in Spokane are challenging for families with long commute times.

-Long waitlists, for example immunizations take months to schedule

-Lack of providers and availability

-Gas vouchers are not covering the high costs of fuel and wear and tear on vehicles

-Cost of fuel and transportation

-Meeting Guide App to help track AA substance use support appointments

- Are you noticing gaps in service delivery or lack of accessibility to services? If yes, what services are lacking?

-Behavioral health services: limited staff, referrals to Spokane for mental health services,

-Public transportation

-Childhood autism support

-Infant and Early Childhood Mental Health Services

-ECAPs

- Have you observed any issues with families obtaining adequate nutrition and food resources? If yes, what barriers are you aware of that prevent families from obtaining adequate food resources? (i.e. cost of groceries, lack of grocery stores, ect.)

-Seeing more feeding issues and parent seeking help about picky eaters

-Less fresh food and grocery store options

-High cost of food

- At the last HSAC meeting, we discussed the idea of hosting support groups for parents regarding mental health concerns such as PPD and anxiety.
 - Are there any updates and/or follow-up about this?

- What does the committee suggest for next steps regarding mental health support groups and addressing mental health concerns in the community?

-RR: Training parents in Conscious Discipline. Family Service Advocates working with families.

-Less mental health stigma since COVID

-Parents want skills and want to learn

-WISE Program with New Alliance Counseling Services

-RR: Zoom mental health groups had low attendance, looking for quality programs over quantity. Considering hosting more community-wide parent education programs.

- What community strengths have you seen over this past year?

-EWU EHS Development Fairs with high attendance

-More community and neighborly support

-Parents ready to learn and eager for parent education

-Program trying to do more community events and connect parents with other parents

- What additional services do you believe our program could offer to better serve families (i.e. more nutrition assistance, internet assistance, higher education assistance, ect.)?

-Time ran out

- Are there any other issues or new trends you are noticing in the community?

-Time ran out

Questions and Additional Comments

3:50-4:00p.m.

- Any additional questions or concerns?
- Next meeting is scheduled for Winter 2024. Date/time TBD. Do Wednesday afternoons work?

Thank you for your support! *Meeting adjourned 4:05pm*