



## MEMORANDUM

**TO:** Trustees

**FROM:** Marcia Hayes-Harris, Program Committee Member **BOARD ACTION REQUIRED**

**DATE:** November 14, 2025

**SUBJECT:** Approve Supplemental Early Childhood Program Evaluation Support

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### BACKGROUND

In May 2025, Trustees awarded \$2,860,949 to 14 Early Childhood (EC) funded partners (one project withdrew in August 2025). Early Childhood Program Director Denise Carter and Data and Performance Analyst Xinyue Zhang met individually with each project this summer to support the development of individualized program evaluation plans and data collection approaches to support funded projects. This work is intensive and time consuming requiring a steep learning curve within a compressed timeframe. Therefore, it has been determined that in order to provide the level of high-quality program evaluation support required by the 13 EC projects, MHB would need to increase its bandwidth to meet the timeframe during which this work needs to be completed. For this reason, staff are recommending to engage Limitless Horizons, the same consulting firm that provided similar capacity-building support to first year funded partners, including early childhood providers, in FY23.

### CONSULTING ENGAGEMENT DESCRIPTION

In partnership with MHB, Limitless Horizons will provide hands-on technical assistance, structured peer learning, and responsive feedback loops to surface insights, address challenges, and provide actionable recommendations to inform MHB's ongoing Early Childhood evaluation strategy. The proposed consulting engagement will be conducted over an eight-month period at a cost of \$50,000. The end result will be to strengthen MHB Early Childhood partners' capacity to evaluate their programs' impact effectively.

### Project Goals

- Strengthen the capacity of funded partners for data collection. Implement MHB's data approach by facilitating, reinforcing, and troubleshooting adoption with funded partners so tools, timelines, and reporting are used consistently.
- Create a continuous learning and feedback system both internally and externally. Gather feedback, surface refinements, and share lessons within the cohort.
- Strengthen funded partner operations: establish response expectations, confirm an assigned data person, etc.

**CITY OF ST. LOUIS MENTAL HEALTH BOARD OF TRUSTEES**

**APPROVE SUPPLEMENTAL EARLY CHILDHOOD PROGRAM EVALUATION SUPPORT**

**RESOLUTION**

**WHEREAS**, the City of St. Louis, Missouri has levied taxes pursuant to the laws of the State of Missouri Sections 210.860 – 210.861 RSMo. (2005 and 2020) to fund the Community Children’s Services Fund (CCSF) and the Board is entrusted with administering this fund; and

**WHEREAS**, on November 3, 2020, city voters approved Proposition R, which authorized a tax levy rate increase to \$0.2443 on each \$100.00 assessed valuation for the Community Children’s Services Fund with the additional tax revenue dedicated to providing early childhood programs and services for children from birth through age five (5); and

**WHEREAS**, in May 2025, Trustees awarded \$2,860,949 to 14 Early Childhood (EC) funded partners for FY 2026; and

**WHEREAS**, the development of individualized program evaluation plans and approaches to support the variety of early childhood projects funded is intensive and time consuming requiring a steep learning curve within a compressed timeframe; and

**WHEREAS**, the fund balance in the Community Children’s Services – Early Childhood Fund as of November 1, 2025 is \$3.92 million which is sufficient to support the cost of the recommended consulting engagement at \$50,000;

**NOW THEREFORE BE IT RESOLVED:**

The Board of Trustees directs the Executive Director to enter into a consulting agreement with Limitless Horizons in the amount of up to \$50,000 from the Community Children’s Services – Early Childhood Fund, to increase MHB’s bandwidth to provide high-quality program evaluation services for its 13 early childhood funded partners through the remainder of FY 2026.

**APPROVED THIS 20<sup>th</sup> DAY OF NOVEMBER 2025:**

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| Board Chair/Officer Name (printed): | Signature: |
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**ATTEST:**

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| Board Officer Name (printed): | Signature: |
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