



ADMINISTRATION FOR  
**CHILDREN & FAMILIES**

Office of Head Start | 8th Floor Portals Building, 1250 Maryland Ave, SW, Washington DC 20024 | eclkc.ohs.acf.hhs.gov

**To: Board Chairperson**

*Mr. Roger Daniel*

*Board Chairperson*

*Big Sandy Area Community Action Program, Inc.*

*230 Court St.*

*Paintsville, KY 41240*

**From: Responsible HHS Official**

*Ms. Ann Linehan*

*Acting Director, Office of Head Start*

*Ross Weaver for 2/7/14*

Date

## Overview of Findings

From 12/1/2013 to 12/5/2013, the Administration for Children and Families (ACF) conducted a monitoring review of the Big Sandy Area Community Action Program, Inc. Head Start program. We wish to thank the governing body, Policy Council, staff, and parents of your program for their cooperation and assistance during the review. This Head Start Review Report has been issued to Mr. Roger Daniel, Board Chairperson, as legal notice to your agency of the results of the on-site program review.

Based on the information gathered, no area of noncompliance was found during the course of the review. Accordingly, no corrective action is required at this time.

If you are a grantee serving preschool age children in the center-based option, a sample of your preschool classrooms will be observed using the Classroom Assessment Scoring System (CLASS). This classroom observation instrument looks at the teacher/child interactions, as well as interactions between children. The Office of Head Start encourages grantees to consider the CLASS results in planning ongoing efforts to improve classroom quality.

During your review, the team used a sampling methodology that included a random selection of child files, staff files, and class, center, and group observations. If your report includes findings related to evidence that involved sampling, the finding narratives in your report include specific percentages from each sample that were determined by dividing the number of issues found by the total sample size. This methodology, which uses statistically driven random samples, allows the OHS to use information collected through the representative samples to make generalizations regarding your program as a whole.

For example, if, during your review, the team examines a sample of 45 child files, the finding narrative will indicate the percentage of files that were identified with an issue. The percentage will be determined by dividing the number of child files with issues by 45. Likewise, when summarizing information from classroom observations, the total number of classrooms with issues will be divided by the total number observed to determine the percentage of the sample

with problems.

Please contact your ACF Regional Office with any questions or concerns you may have about this report.

**Distribution of the Head Start Review Report**

Copies of this report will be distributed to the following recipients:

Mr. Jeffrey Fredericks, Regional Program Manager

Mrs. Natasha Harris, Policy Council Chairperson

Mr. James Howell, CEO/Executive Director

Mr. Tracy Jenkins, Head Start Director

**Overview Information**

Review Type:	<i>Triennial</i>
Organization:	<i>Big Sandy Area Community Action Program, Inc.</i>
Program Type:	<i>Head Start</i>
Team Leader:	<i>Ms. Marita Allen</i>
Funded Enrollment HS:	<i>1124</i>
Funded Enrollment EHS:	<i>Not Applicable</i>

## Glossary

A glossary of terms has been included to explain the various terms used throughout this report.

Term	Definition
<b>Compliance Measure (CM)</b>	The specific statements that collectively assess the level of program performance for each Key Indicator, focusing on one or more Federal regulations critical to the delivery of quality services and the development of strong management systems.
<b>Strength</b>	A new and/or unique way of reaching the community.
<b>Compliant</b>	No findings. Meets requirements of Compliance Measure.
<b>Concern</b>	An area or areas of performance which need improvement or technical assistance. These items should be discussed with the Regional Office and do not include a timeframe for correction.
<b>Noncompliance</b>	A finding that indicates the agency is out of compliance with Federal requirements (including, but not limited to, the Head Start Act or one or more of the performance standards) in an area or areas of program performance, but does not constitute a deficiency. Noncompliances require a written timeline of correction and possible technical assistance (TA) or guidance from their program specialist, and if not corrected within the specified timeline, can become a deficiency.
<b>Deficiency</b>	<p>An area or areas of performance in which an Early Head Start or Head Start grantee agency is not in compliance with State or Federal requirements (including but not limited to, the Head Start Act or one or more of the regulations) and which involves:</p> <p>(A) A threat to the health, safety, or civil rights of children or staff;</p> <p>(B) A denial to parents of the exercise of their full roles and responsibilities related to program governance;</p> <p>(C) A failure to perform substantially the requirements related to Early Childhood Development and Health Services, Family and Community Partnerships, or Program Design and Management; or</p> <p>(D) The misuse of Head Start grant funds.</p> <p>(ii) The loss of legal status or financial viability, as defined in part 1302 of this title, loss of permits, debarment from receiving Federal grants or contracts or the improper use of Federal funds; or</p> <p>(iii) Any other violation of Federal or State requirements including, but not limited to, the Head Start Act or one or more of the performance standards of this title, and which the grantee has shown an unwillingness or inability to correct within the period specified by the responsible HHS official, of which the responsible HHS official has given the grantee written notice of pursuant to section 1304.61.</p>
<b>Immediate Deficiency</b>	Deficiencies identified during a review that pose imminent harm or danger to children and staff which requires that the grantee take immediate corrective action. The Office of Head Start interprets "immediate corrective action," as specified in the Act, as those situations that must be resolved at the point of discovery or up to 30 days from when the notice of deficiency is given.

**Program Governance**

CM#	Compliance Measure	Compliance Level
GOV 1.1	<p>The program has a governing body composed of:</p> <ul style="list-style-type: none"> <li>• A membership that includes qualifications and expertise in: <ul style="list-style-type: none"> <li>• Accounting or fiscal management (at least 1 member)</li> <li>• Early Childhood Education and Development (at least 1 member)</li> <li>• Licensed attorney familiar with the issues that come before the governing body (at least 1 member)</li> <li>• Additional members who reflect the community, including parents of formerly or currently enrolled Head Start/Early Head Start children</li> <li>• Other members selected for their expertise in education, business administration, or community affairs</li> </ul> </li> </ul> <p>If individuals do not meet the qualifications of Fiscal Management/Accounting, Early Childhood Education and Development, or being a licensed attorney, the program shall use a consultant or other individual with relevant expertise and qualifications.</p>	<p><b>Compliant</b></p> <p>642(e)(1)(B)(i-iii), 642(e)(1)(B)(iv)(I-II), 642(e)(1)(B)(vi)</p>
GOV 1.2	<p>The program has established a Policy Council elected by parents of currently enrolled children, whose membership is composed of a majority of parents of children currently enrolled in the program as well as members of the community served by the Head Start agency.</p>	<p><b>Compliant</b></p> <p>642(e)(2)(B)(f), 642(e)(2)(B)(g)(i)(I-II)</p>
GOV 2.1	<p>Members of the governing body and the Policy Council receive appropriate training and technical assistance to ensure that they understand the information they receive and can provide effective oversight of, make appropriate decisions for, and participate in programs of the Head Start agency.</p>	<p><b>Compliant</b></p> <p>642(d)(3)</p>
GOV 2.2	<p>The governing body is responsible for required activities and makes decisions pertaining to program administration and operations, including selecting delegates and service areas; establishing procedures and criteria for recruitment, selection, and enrollment; reviewing all applications for funding; and establishing procedures for selecting Policy Council members.</p>	<p><b>Compliant</b></p> <p>642(e)(1)(E)(iv)(I-III, VI)</p>
GOV 2.3	<p>The governing body exercises fiscal and legal responsibility and oversight and reviews and approves all major program policies.</p>	<p><b>Compliant</b></p> <p>642(e)(1)(E)(iv)(IX), 642(e)(1)(E)(iv)(V)(aa-cc), 642(e)(1)(E)(iv)(VII)(aa-dd), 642(e)(1)(E)(iv)(VIII)</p>
GOV 2.4	<p>The Policy Council approves and submits decisions about identified program activities to the governing body.</p>	<p><b>Compliant</b></p> <p>642(e)(2)(A), 642(e)(2)(D)(i-viii)</p>
GOV 3.1	<p>Governing body and Policy Council members regularly receive and use information or reports about program planning, policies, and operations, including:</p> <ul style="list-style-type: none"> <li>• Monthly financial statements (including credit card expenditures), program information summaries, program enrollment reports (including attendance reports for children whose care is partially subsidized by another public agency), and reports of meals and snacks provided through USDA programs</li> <li>• The annual financial audit, Self-Assessment (including findings related to such assessment), and Program Information Report (PIR)</li> <li>• The community-wide strategic planning and needs assessment (the Community Assessment) of the Head Start agency, including applicable updates</li> <li>• Communication and guidance from the Secretary</li> </ul>	<p><b>Compliant</b></p> <p>642(d)(2)(A-1)</p>

**Management Systems**

CM#	Compliance Measure	Compliance Level
SYS 1.1	The program routinely engages in a process of systematic planning to develop goals, objectives, and plans based on an analysis of program data and the results of the program's Community and Self-Assessments, engage stakeholders (governing bodies, policy groups, parents, and staff) in planning and use program data to design and implement changes to improve program services on an ongoing basis.	<b>Compliant</b> 1304.51(a)(1), 1304.51(a)(1)(i-iii)
SYS 1.2	At least annually, the program conducts a Self-Assessment of program effectiveness that assesses progress in meeting local program goals and objectives, evaluates program compliance with Federal requirements and results in improvement plans.	<b>Compliant</b> 641A(g)(1), 641A(g)(2)(B)
SYS 2.1	The program established and implements procedures for the ongoing monitoring of its operations and services. The program uses effective tools and procedures to ensure the program is in compliance and meets its goals and objectives, clearly defines staff roles and responsibilities in program oversight, conducts frequent, ongoing monitoring activities, collects and uses data for planning activities and to ensure future compliance and ensures ongoing monitoring takes place in delegate agencies.	<b>Compliant</b> 641A(g)(3)
SYS 3.1	The program's Human Resources system supports the delivery of services to children and families. The program: <ul style="list-style-type: none"> <li>• Supervises and supports staff and provides adequate mechanisms for staff supervision and support. Major functions and responsibilities assigned to each staff person include, minimally: Program Management, Child Health and Safety, and Family and Community Engagement.</li> <li>• Maintains an organizational structure that supports its goals and objectives</li> <li>• Assigns all major program functions and responsibilities to staff</li> </ul>	<b>Compliant</b> 1304.52(a)(1-2)
SYS 3.2	The program develops and implements written standards of conduct that are available to all staff and contain provisions for appropriate penalties when violations occur.	<b>Compliant</b> 1304.52(i)(1), 1304.52(i)(1)(i-ii, iv), 1304.52(i)(3)
SYS 3.3	The program ensures that each staff member completes a screening for tuberculosis.	<b>Compliant</b> 1304.52(k)(1)
SYS 3.4	Prior to employing an individual, the program obtains a Federal, State, or Tribal criminal record check (CRC): <ul style="list-style-type: none"> <li>• Covering all jurisdictions in which it provides Head Start services to children</li> <li>• As required by the law of the jurisdiction in which the program provides Head Start services</li> <li>• As otherwise required by Federal law</li> </ul>	<b>Compliant</b> 648A(g)(3)(A-C)
SYS 4.1	The program has communication mechanisms in place that provide: <ul style="list-style-type: none"> <li>• Sharing of accurate and timely information with staff to support outcomes for children and families</li> <li>• Sharing of accurate and timely information with parents, policy groups, and the general community</li> </ul>	<b>Compliant</b> 1304.51(b)
SYS 5.1	The program establishes and maintains a record-keeping system that supports the delivery of services to children and families. The program consistently collects and records data in an accurate and timely manner for children, families, and staff, generates reports to inform planning, communication, and ongoing monitoring, makes information accessible to appropriate parties and maintains confidentiality.	<b>Compliant</b> 1304.51(g)

<b>SYS 5.2</b>	The program publishes and makes available to the public an Annual Report that contains an explanation of the budgetary expenditures and proposed budget for the fiscal year and an explanation of the agency's efforts to prepare children for kindergarten.	<b>Compliant</b> 644(a)(2), 644(a)(2)(B, G)
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### *Fiscal Integrity*

CM#	Compliance Measure	Compliance Level
<b>FIS 1.1</b>	The grantee's financial management systems provide for effective control over and accountability for grant and sub-grant funds, property and other assets and ensure they are used solely for authorized purposes.	<b>Compliant</b> 1301.32(a)(1), 74.21(b)(3-4), 92.20(b)(3-4), 92.26(a), 92.26(b)(1-5), A- 133(400)(d)(3, 5)
<b>FIS 1.2</b>	The grantee sought and received prior approval in writing for budget changes where prior approval is required and obtained approval for hiring of designated key personnel.	<b>Compliant</b> 74.25, 92.30
<b>FIS 1.3</b>	The grantee has obtained and maintained required insurance coverage for risks and liabilities.	<b>Compliant</b> 1301.11(a-b), 74.31
<b>FIS 2.1</b>	Financial reports and accounting records are timely, complete, and contain accurate information pertaining to grant or sub-grant awards, authorizations, obligations, unobligated balances, assets, liabilities, outlays (total expenditures), income, and interest. Reports include: <ul style="list-style-type: none"> <li>• SF-425 (paper-based Federal Financial Report filed to with the Regional Office)</li> <li>• SF-425 (web-based Federal Cash Transactions report filed with the Division of Payment Management); and</li> <li>• USDA/Child and Adult Care Food Program (CACFP) reports</li> </ul>	<b>Compliant</b> 1304.23(b)(1)(i), 1304.51(h), 74.21(b)(1-2), 92.20(b)(1-2)
<b>FIS 3.1</b>	The grantee implemented procurement procedures meeting , at a minimum, all requirements specified in applicable Federal, State, and local statutes, regulations, and administrative rules for Federal grants, including a written code or standards of conduct governing performance of employees in awarding and administering contracts. Contracts and delegate-agency agreements are current, available, signed, and dated, with a complete description of the performance and financial expectations of the grantee and the other parties. The grantee can demonstrate that contractual agreements were met.	<b>Compliant</b> 220, App A(A)(2)(e), 225, App A(C)(1)(j), 230, App A(A)(2)(g), 74.42, 74.43, 74.46, 74.47, 92.36(b)(2-3, 9), 92.36(c)(1), 642(c)(1)(B)(iv)(X)(aa)
<b>FIS 4.1</b>	Original time records are prepared and properly signed by the individual employee and approved by a responsible supervisory official, and an appropriate methodology was used to allocate salaries among Head Start and other programs.	<b>Compliant</b> 220, App A(C)(4)(a), 220, App A(J)(10)(a-d), 225, App A(C)(3)(a), 225, App B(8)(b)(1, 3-4), 230, App A(A)(4)(a)(2), 230, App B(8)(m)(1-2)
<b>FIS 4.2</b>	Head Start or Early Head Start grant funds are not used as any part of monetary compensation (e.g., salary, bonuses, severance) of an individual employed by the grantee who is paid an annual rate in excess of Executive Level II (\$179,700 through calendar year 2012).	<b>Compliant</b> 653(b)

<b>FIS 4.3</b>	Total compensation for personal services, including employee wages and incentive compensation payments, charged to the grant are allowable and reasonable.  <b>The grantee did not pay incentive compensation.</b>	<b>N/A</b> 220, App A(J)(10)(e), 220, App(C)(2-3), 225, App A(C)(2)(b), 225, App B(8)(a, b), 230, App A(A)(3)(b), 230, App B(8)(b, c, j)
<b>FIS 5.1</b>	The grantee has implemented procedures to determine allowability, allocability, and reasonableness of costs charged against its Head Start and Early Head Start grant awards as required by the applicable cost principles. If the grantee is required to allocate costs between funding sources (including Head Start and Early Head Start awards), the program utilizes a method for allocating costs that reflects the relative degree of benefit for each program receiving the benefit of the allocated cost.	<b>Compliant</b> 220, App A(A)(2)(e), 220, App A(C)(2-4), 225, App A(C)(1, 2, 3), 230, App A(A)(2, 3, 4)
<b>FIS 5.2</b>	Indirect cost charges are supported by a negotiated and approved indirect cost rate.	<b>Compliant</b> 1301.32, 225, App A(C)(3)(a), 230, App A(A)(2)(a), 230, App A(E)(2)(e)
<b>FIS 5.3</b>	The grantee can demonstrate all contributions of non-Federal share (NFS), including cash and third-party in-kind, are necessary and reasonable for accomplishing program objectives, allowable under applicable cost principles, and allocable if also benefiting another award. Financial records are sufficient and support the verification of adherence to applicable cost principles.	<b>Compliant</b> 74.23(a)(1-5), 74.23(d, f), 74.23(b)(1-3), 74.23(i)(1-2), 92.24(a)(1), 92.24(b)(1, 3, 6), 92.24(b)(7)(i, iv), 92.24(e)(1), 92.24(d), 92.24(e)(2)(f), 92.24(g)
<b>FIS 5.4</b>	During each funding period reviewed, the grantee charged to the award only costs resulting from obligations incurred during the funding period.	<b>Compliant</b> 74.28, 92.23(a)
<b>FIS 6.1</b>	The grantee established allowability of costs for owned or leased facilities and adequately protected any Federal Interest in facilities through the filing of Notices of Federal Interest, insurance, and maintenance of property records. Compensation for use of facilities owned by the grantee, a delegate agency, or other related party was through depreciation or use allowance based on facility cost (excluding costs paid by Head Start). The grantee obtained advance Regional Office permission for any mortgage or loan agreements using collateral property acquired or subject to major renovation using Head Start funds and ensured mortgage/loan contracts include required terms.	<b>Compliant</b> 1309.10, 1309.20, 1309.21(b), 1309.21(d)(1-3), 1309.21(d)(4)(i-iii), 1309.22(a-c), 1309.23(a)(1-2), 1309.23(b), 1309.31(b), 1309.40, 220, App A(J)(14), 225, App B(11), 225, App B(37)(e), 230, App B(11)(a-b), 230, App B(43)(e)
<b>FIS 6.2</b>	The grantee safeguarded equipment purchased using Head Start funds by maintaining complete and accurate equipment records, verifying accuracy of records by conducting a physical inventory, and following disposition requirements. The grantee obtained advance Regional Office permission for any mortgage or loan agreements using real property or equipment acquired with Head Start funds.	<b>Compliant</b> 74.34(f)(1, 3), 74.34(g), 74.37, 92.32(d)(1-2), 92.32(e)

**ERSEA**

<b>CM#</b>	<b>Compliance Measure</b>	<b>Compliance Level</b>
<b>ERSEA 1.1</b>	The program develops and implements a process that is designed to actively recruit families with Head Start and/or Early Head Start-eligible children, including children with disabilities and pregnant women (if applicable), informing them of available services and encouraging them to apply for admission.	<b>Compliant</b> 1305.5(a), 1308.5(f), 645A(c)(1)
<b>ERSEA 1.2</b>	Prior to the agency selecting and enrolling children from families whose income falls	<b>Compliant</b>

	above 100 percent of the poverty line, the program has established and implemented outreach and enrollment policies and procedures to ensure that it meets the needs of the following children: <ul style="list-style-type: none"> <li>• Children from families with an income below the poverty line</li> <li>• Children from families receiving public assistance</li> <li>• Children who are homeless</li> <li>• Children in foster care</li> </ul>	645(a)(1)(B)(ii)(II)(aa-bb)
<b>ERSEA 2.1</b>	Program staff verified each child's eligibility and included in each file a statement signed by a program employee identifying the child's eligibility category and the documents examined to determine eligibility.	<b>Compliant</b> 1305.4(c-e)
<b>ERSEA 2.2</b>	The program enrolls children who are categorically eligible (who fall within defined income-eligibility requirements). Defined Eligibility Requirements include: <ul style="list-style-type: none"> <li>• Family income is below the poverty line</li> <li>• Family or child receives public assistance (SSI and TANF)</li> <li>• Family is homeless</li> <li>• Child is a foster child</li> </ul> Additional income-eligibility requirements: <ul style="list-style-type: none"> <li>• Ten percent of children enrolled in the program may be over the income threshold</li> <li>• An additional 35 percent of children who are not categorically eligible may be from families whose income is between 100 and 130 percent of poverty</li> </ul>	<b>Compliant</b> 645(a)(1)(B)(ii)(I-II)
<b>ERSEA 3.1</b>	Actual program enrollment is composed at least 10 percent of children with disabilities.	<b>Compliant</b> 1308.5(c)(1-4), 640(d)(1)
<b>ERSEA 3.2</b>	The program enrolled 100% of its funded enrollment and maintained an active and ranked waiting list at all times, with ongoing activities and community outreach to identify underserved populations and ensure that eligible children enter the program as vacancies occur.	<b>Compliant</b> 1305.6(d), 642(g)
<b>ERSEA 3.3</b>	The program has documentation to support monthly enrollment data submitted to the Office of Head Start.	<b>Compliant</b> 641A(0)(2)(A-B)
<b>ERSEA 4.1</b>	When monthly average daily attendance in center-based programs falls below 85 percent (except in the case of illness or well-documented absences), the causes of absenteeism are analyzed, and the program initiates appropriate family support as needed.	<b>Compliant</b> 1305.8(a-b)
<b>ERSEA 4.2</b>	The program ensures that no child's enrollment or participation in the Head Start program is contingent on payment of a fee.	<b>Compliant</b> 1305.9

**Child Health & Safety**

CM#	Compliance Measure	Compliance Level
<b>CHS 1.1</b>	The program obtains a determination from a health care professional as to whether each child is up to date on a schedule of primary and preventive health care (EPSDT), including dental, and assists parents in bringing their children up to date as needed.	<b>Compliant</b> 1304.20(a)(1)(ii), 1304.20(a)(1)(ii)(A-B), 1304.20(a)(2)
<b>CHS 1.2</b>	The program takes steps to ensure that each child with a known, observable, or	<b>Compliant</b>



	<p>suspected health, dental, or developmental problem receives:</p> <ul style="list-style-type: none"> <li>• Further diagnostic testing</li> <li>• Examination</li> <li>• Treatment from a licensed or certified health care professional</li> <li>• A follow-up plan to ensure required treatment has begun</li> </ul>	<p>1304.20(a)(1)(iii-iv), 1304.20(c)(3)(ii)</p>
<b>CHS 1.3</b>	The program involves parents, consulting with them immediately when child health or developmental problems are suspected or identified.	<b>Compliant</b> 1304.20(e)(1)
<b>CHS 1.4</b>	<p>The program:</p> <ul style="list-style-type: none"> <li>• Informs parents of health and developmental procedures</li> <li>• Obtains their authorization prior to performing these procedures</li> <li>• Explains results</li> </ul>	<b>Compliant</b> 1304.20(e)(2)
<b>CHS 1.5</b>	The program has established procedures for tracking the provision of health services.	<b>Compliant</b> 1304.20(a)(1)(ii)(C)
<b>CHS 2.1</b>	<p>The program, in collaboration with each child's parent, performs or obtains the required linguistically and age-appropriate screenings to identify concerns regarding children within 45 calendar days (30 days for programs operating shorter durations) of their entry into the program.</p> <p>The program, in collaboration with each child's parent, performs or obtains the required linguistically and age-appropriate screenings to identify concerns regarding children within 45 calendar days (30 days for programs operating shorter durations) of their entry into the program.</p>	<p><b>Compliant</b> 1304.20(b)(2-3)</p> <p><b>Compliant</b> 1304.20(a)(2), 1304.20(b)(1)</p>
<b>CHS 2.2</b>	Children suspected of having a disability are promptly referred for further evaluation through a coordinated screening, assessment, and referral process in partnership with the LEA and/or Part C agency.	<b>Compliant</b> 1304.20(f)(2)(ii), 1308.6(a)(1-3), 1308.6(e)(1)
<b>CHS 2.3</b>	<p>The program, in partnership with the LEA or Part C agency:</p> <ul style="list-style-type: none"> <li>• Works to inform and engage parents in all plans for screenings and referrals for evaluation</li> <li>• Ensures confidentiality of information</li> <li>• Encourages parent involvement in the IEP and IFSP process</li> </ul>	<b>Compliant</b> 1304.20(e)(4), 1308.19(j), 1308.6(c)
<b>CHS 3.1</b>	<p>Facilities used for center-based program options, home-based group socialization activities, or Family Child Care comply with State and local licensing requirements.</p> <p><b>Licensing requirements do not apply to any of the facilities that are used for center-based, combination program option classroom activities, home-based group socialization activities, and Family Child Care.</b></p>	<b>N/A</b> 1306.30(c), 1306.35(d)
<b>CHS 3.2</b>	The program ensures that sufficient equipment, toys, materials, furniture, and facilities are provided and are age-appropriate, safe, and supportive of the abilities and developmental level of each child.	<b>Compliant</b> 1304.53(a)(10)(xvii), 1304.53(b)(1)(iii)
<b>CHS 3.3</b>	The program has adequate usable indoor and outdoor space.	<b>Compliant</b> 1304.53(a)(5), 1306.35(a)(3)
<b>CHS 3.4</b>	The program ensures the safety and security of children by keeping facilities, materials, and equipment well maintained, clean, and in good repair.	<b>Compliant</b> 1304.53(a)(10), 1304.53(a)(10)(i, iv-viii, x-xii,

<b>FCE 3.2</b>	The program increases families' access to materials, services, and activities critical to family literacy development, including: <ul style="list-style-type: none"> <li>• Interactive literacy activities for parents and their children</li> <li>• Training for parents on how to be their children's primary teachers</li> <li>• Education and resources that lead to economic self-sufficiency and financial literacy</li> </ul>	<b>Compliant</b> 1304.40(e)(4)(f)
<b>FCE 3.3</b>	The program builds parents' understanding of their rights under IDEA and builds their confidence in identifying, accessing, and advocating for resources needed to address their children's special needs.	<b>Compliant</b> 1308.21(a)(6, 10)
<b>FCE 4.1</b>	The program supports successful transitions for enrolled children and families, both into and out of Early Head Start and Head Start programs, by: <ul style="list-style-type: none"> <li>• Ensuring each child's relevant records are transferred to the child's next school or placement</li> <li>• Building relationships with principals, teachers, social workers, and health staff to facilitate continuity of programming</li> <li>• Discussing the developmental progress of individual students with parents and future teachers</li> <li>• Initiating joint transition-related training for staff</li> </ul>	<b>Compliant</b> 1304.40(b)(1, 3), 1304.41(e)(1)
<b>FCE 5.1</b>	The program has established and maintains a Health Services Advisory Committee (HSAC).	<b>Compliant</b> 1304.41(b)
<b>FCE 5.2</b>	The program has taken steps to establish ongoing collaborative relationships with community organizations that are responsive to community needs to promote the access of children and families to community services.	<b>Compliant</b> 1304.41(a)(2)
<b>FCE 5.3</b>	The program coordinates with and has current Interagency Agreements in place with Local Education Agencies (LEAs) and other agencies (Part C) within the service area.	<b>Compliant</b> 1304.41(a)(4), 1308.4(l)(3-5, 7)

**Child Development and Education**

CM#	Compliance Measure	Compliance Level
<b>CDE 1.1</b>	The program has engaged in a process to align its school readiness goals with the Head Start Child Development and Early Learning Framework, State Early Learning guidelines, and the requirements and expectations of the schools the children will attend to the extent that they apply to children participating in the Early Head Start or Head Start program and has consulted with the parents of children participating in the program.	<b>Compliant</b> 1307.3(b)(1)(i-iii)
<b>CDE 1.2</b>	The program has a system and processes in place to do the following in order to track, use, and report progress on school readiness goals: <p>Aggregate and Analyze the following:</p> <ul style="list-style-type: none"> <li>• Individual, ongoing child-level assessment data for all children birth to age 5</li> <li>• Child-level data at least three times a year using data from one or more valid and reliable assessment tools</li> <li>• For programs serving dual-language learners (DLLs):                 <ul style="list-style-type: none"> <li>o Status and progress in acquiring the knowledge and skills described in the Head Start Child Development and Early Learning Framework (demonstrated in any language, including the child's home language) and toward learning English</li> </ul> </li> </ul> <p>In order to use school readiness data:</p>	<b>Compliant</b> 1307.3(b)(2)(i-ii)

- Combine input from parents and families with assessment data to determine each child's status and progress in the five essential domains
- Individualize experiences, instructional strategies, and services to best support each child
- In combination with other program data, determine progress towards meeting program goals
- Assess the fidelity of implementation of the curriculum
- Direct continuous improvement related to the effectiveness of curriculum, instruction, professional development, and program design or other program decisions based on the analysis of school readiness outcomes data

**Report Results**

- To inform parents and the community of the program's progress in achieving school readiness goals

<b>CDE 2.1</b>	The program selects and implements a curriculum that is evidence-based and is linked to ongoing assessment, with developmental and learning goals and measurable objectives.	<b>Compliant</b> 642(f)(3)(C)
<b>CDE 2.2</b>	The program implements a curriculum that promotes young children's school readiness in the developmental areas presented in the Head Start Child Outcomes Frameworks and, as appropriate, is aligned with State Early Learning standards.	<b>Compliant</b> 642(f)(3)(E)
<b>CDE 3.1</b>	The program uses information from ongoing observations, and evaluations, as well as insight from parents to determine how best to respond to each child's individual characteristics, strengths, and needs.	<b>Compliant</b> 1304.20(f)(1)
<b>CDE 3.2</b>	Services provided to children with identified disabilities are designed to support the outcomes contained in their IEPs or IFSPs.	<b>Compliant</b> 1304.20(f)(2)(i), 1304.21(a)(1)(ii), 1308.19(k)
<b>CDE 3.3</b>	The program designates a staff member or consultant to coordinate services for children with disabilities, including collaborating with other program coordinators (i.e., Education, Mental Health, and Nutrition) and staff.	<b>Compliant</b> 1308.18(a-b), 1308.20(a), 1308.6(d)
<b>CDE 3.4</b>	The program has secured the services of a mental health professional including on-site consultation for program staff and families that provides for timely identification and interventions to address children's mental health concerns.	<b>Compliant</b> 1304.24(a)(2), 1304.24(a)(3)(i)
<b>CDE 3.5</b>	The program's approach to Child Development and Education (CDE) is developmentally and linguistically appropriate and demonstrates an understanding that children have individual rates of development, interests, temperaments, languages, cultural backgrounds, and learning styles.	<b>Compliant</b> 1304.21(a)(1)(i)
<b>CDE 4.1</b>	The program hires teachers with the required qualifications, training, and experience.  <b>The program has a current waiver regarding preschool teacher qualifications pursuant to ACF-IM-HS-11-04.</b>	<b>N/A</b> 645A(h)(1-2), 648A(a)(3)(B)(i-iii)
<b>CDE 4.3</b>	The program ensures that all full-time Head Start employees who provide direct Education services to children have professional development plans that are evaluated regularly to assess their impact on teacher and staff effectiveness.	<b>Compliant</b> 648A(f)
<b>CDE 4.5</b>	When the majority of children speak the same language, at least one classroom staff	<b>N/A</b>

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member or home visitor interacting regularly with the children speaks their language. 1304.52(g)(2)

**The program is not currently serving children and families who speak a language other than English.**

— END OF REPORT —