Glossary

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

Term	Definition
Compliance Measure (CM)	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.
Strength	A new and/or unique way of reaching the community.
Compliant	No findings. Meets requirements of Compliance Measure.
Concern	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.
Noncompliance	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.
Deficiency	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:
	(A) A threat to the health, safety, or civil rights of children or staff;
	(B) A denial to parents of the exercise of their full roles and responsibilities related to program governance;
	(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
	(D) The misuse of Head Start grant funds.
	(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
	(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.
Immediate Deficiency	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.

Summary of Findings

Finding Type	Applicable Standards	Program Type	Grant	Timeframe	Compliance Level
Record Keeping and Reporting	644(a)(2)	EHS	01CH0004	120 days	Noncompliance
Compensation	230, App B(8)(m)(1-2), 230, App B(8)(m)(2)(b- c)	EHS	01CH0004	120 days	Noncompliance
Screening and Referrals	1304.20(b)(1)	EHS	01CH0004	N/A	Concern

Program Governance

CM#	Compliance Measure	Compliance Level
GOV 1.1	The program has a governing body composed of: • A membership that includes qualifications and expertise in: • Accounting or fiscal management (at least 1 member) • Early Childhood Education and Development (at least 1 member) • Licensed attorney familiar with the issues that come before the governing body (at least 1 member) • Additional members who reflect the community, including parents of formerly or currently enrolled Head Start/Early Head Start children • Other members selected for their expertise in education, business administration, or community affairs	Compliant 642(c)(1)(B)(i-iii), 642(c)(1)(B)(iv)(I-II), 642(c)(1)(B)(vi)
	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.	
GOV 1.2	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.	Compliant 642(c)(2)(B)(i), 642(c)(2)(B)(ii)(I-II)
GOV 2.1	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.	Compliant 642(d)(3)
GOV 2.2	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.	Compliant 642(c)(1)(E)(iv)(I-III, VI)
GOV 2.3	The governing body exercises fiscal and legal responsibility and oversight and reviews and approves all major program policies.	Compliant 642(c)(1)(E)(iv)(IX), 642(c)(1)(E)(iv)(V)(aa-cc), 642(c)(1)(E)(iv)(VII)(aa-dd), 642(c)(1)(E)(iv)(VIII)
GOV 2.4	The Policy Council approves and submits decisions about identified program activities to the governing body.	Compliant 642(c)(2)(A), 642(c)(2)(D)(i- viii)

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GOV 3.1

Governing body and Policy Council members regularly receive and use information or reports about program planning, policies, and operations, including:

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

• The annual financial audit, Self-Assessment (including findings related to such assessment), and Program Information Report (PIR)

• The community-wide strategic planning and needs assessment (the Community Assessment) of the Head Start agency, including applicable updates

· Communication and guidance from the Secretary

Compliant 642(d)(2)(A-I)

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.	Compliant 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.	Compliant 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.	Compliant 641A(g)(3)
SYS 3.1	The program's Human Resources system supports the delivery of services to children and families. The program: • 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. • Maintains an organizational structure that supports its goals and objectives • Assigns all major program functions and responsibilities to staff	Compliant 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.	Compliant 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.	Compliant 1304.52(k)(1)
SYS 3.4	Prior to employing an individual, the program obtains a Federal, State, or Tribal criminal record check (CRC): • Covering all jurisdictions in which it provides Head Start services to children • As required by the law of the jurisdiction in which the program provides Head Start services • As otherwise required by Federal law	Compliant 648A(g)(3)(A-C)

SYS 4.1	The program has communication mechanisms in place that provide: • Sharing of accurate and timely information with staff to support outcomes for children and families • Sharing of accurate and timely information with parents, policy groups, and the general community	Compliant 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.	Compliant 1304.51(g)
SYS 5.2	Head Start Act Sec. 644. [42 U.S.C. 9839] (a) (2) Each Head Start agency shall make available to the public a report published at least once in each fiscal year that discloses the following information from the most recently concluded fiscal year, except that reporting such information shall not reveal personally identifiable information about an individual child or parent:	Noncompliance 644(a)(2)

Triennial (3/23/2014)

The grantee did not make available to the public a report published at least once in each fiscal year. No Annual Report to the Public was published for Fiscal Years 2012 and 2013.

The Health/Nutrition Manager, who was also the Acting Early Head Start (EHS) Director, presented a copy of the most recent Annual Report--the Public Information Report--which was dated September 2010 to September 2011. In an interview, the Acting EHS Director and Education/Disabilities Manager stated no Annual Report to the Public was published for either the 2012 or 2013 program year.

The grantee did not make available to the public a report published at least once in each fiscal year; therefore, it was not in compliance with regulation.

Timeframe for correction: 120 days

Fiscal Integrity

CM#	Compliance Measure	Compliance Level
FIS 1.1	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.	Compliant 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)
FIS 1.2	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.	Compliant 74.25, 92.30
FIS 1.3	The grantee has obtained and maintained required insurance coverage for risks and liabilities.	Compliant 1301.11(a-b), 74.31
FIS 2.1	Financial reports and accounting records are timely, complete, and contain accurate	Compliant

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information pertaining to grant or sub-grant awards, authorizations, obligations, unobligated balances, assets, liabilities, outlays (total expenditures), income, and interest. Reports include:

1304.23(b)(1)(i), 1304.51(h), 74.21(b)(1-2), 92.20(b)(1-2)

- SF-425 (paper-based Federal Financial Report filed to with the Regional Office)
- SF-425 (web-based Federal Cash Transactions report filed with the Division of Payment Management); and
- USDA/Child and Adult Care Food Program (CACFP) reports

FIS 3.1 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.

Compliant

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)(E)(iv)(X)(aa)

FIS 4.1 PART 230 - Cost Principles For Non-Profit Organizations (OMB Circular A-122) 2 CFR Part 230, Appendix B - Selected Items of Cost

- (8) Compensation for personal services
- (m) Support of salaries and wages
- (1) Charges to awards for salaries and wages, whether treated as direct costs or indirect costs, will be based on documented payrolls approved by a responsible official(s) of the organization. The distribution of salaries and wages to awards must be supported by personnel activity reports, as prescribed in subparagraph 8.m(2) of this appendix, except when a substitute system has been approved in writing by the cognizant agency. (See subparagraph E.2 of Appendix A to this part.)
- (2) Reports reflecting the distribution of activity of each employee must be maintained for all staff members (professionals and nonprofessionals) whose compensation is charged, in whole or in part, directly to awards. In addition, in order to support the allocation of indirect costs, such reports must also be maintained for other employees whose work involves two or more functions or activities if a distribution of their compensation between such functions or activities is needed in the determination of the organization's indirect cost rate(s) (e.g., an employee engaged part-time in indirect cost activities and part-time in a direct function). Reports maintained by non-profit organizations to satisfy these requirements must meet the following standards:
- (b) Each report must account for the total activity for which employees are compensated and which is required in fulfillment of their obligations to the organization.
- (c) The reports must be signed by the individual employee, or by a responsible supervisory official having first hand knowledge of the activities performed by the employee, that the distribution of activity represents a reasonable estimate of the actual work performed by the employee during the periods covered by the reports.

Triennial (3/23/2014)

The grantee did not ensure salaries and wages charged to the grant award were based on documented payrolls approved by a responsible official of the organization and included reports reflecting the distribution of activity of each employee. Payroll activity reports for employees charging time to the grant award and other activities did not account for the total activity for which the employees were compensated and were not signed by the employee and supervisor to certify the distribution of actual work activity as reasonable.

A review of six employee payroll transactions found four did not include documentation to support time and attendance signed by the employee or a supervisor. A review of the Staff Activity reports for the Nurse and the Family Assessment Worker, who each charged a portion of their time to the Early Head Start (EHS)

Noncompliance

230, App B(8)(m)(1-2), 230, App B(8)(m)(2)(b-c)

program, found they did not account for the total activity for which each employee was compensated. A review of the Earnings Statements for the pay periods ending October 18 and November 1, 2013 found the Education and Disabilities Coordinator, Early Childhood Educators, and Nurse were each paid for 80 hours per pay period, and the Family Assessment Worker was paid for 70 hours. In an interview, the Finance Manager stated the grantee did not require timesheets or attendance records for all staff and said some staff were required to provide attendance data only if there was an exception to their normal work schedules related to sick or annual leave. She confirmed staff activity reports included only time charged to the EHS grant and not total compensated hours.

The grantee did not ensure salaries and wages charged to the grant award were based on documented payrolls approved by a responsible official of the organization and included reports reflecting the distribution of activity of each employee; therefore, it was not in compliance with the regulation.

Timeframe for correction: 120 days

FIS 4.2 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).

Compliant 653(b)

FIS 4.3 Total compensation for personal services, including employee wages and incentive compensation payments, charged to the grant are allowable and reasonable.

Compliant 220, App A(J)(10)(

220, App A(J)(10)(a), 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)

FIS 5.1 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.

Compliant

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)

FIS 5.2 Indirect cost charges are supported by a negotiated and approved indirect cost rate.

Compliant

1301.32, 225, App A(C)(3)(a), 230, App A(A)(2)(a), 230, App A(E)(2)(c)

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.

Compliant

74.23(a)(1-5), 74.23(d, f), 74.23(h)(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(c)(1), 92.24(d), 92.24(e)(2)(i), 92.24(g)

FIS 5.4 During each funding period reviewed, the grantee charged to the award only costs resulting from obligations incurred during the funding period.

Compliant 74.28. 92.23(a)

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

Compliant

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),

FIS 5.3

FIS 6.1

renovation using Head Start funds and ensured mortgage/loan contracts include 225, App B(11), 225, App required terms. B(37)(c), 230, App B(11)(ab), 230, App B(43)(c) FIS 6.2 The grantee safeguarded equipment purchased using Head Start funds by maintaining N/A complete and accurate equipment records, verifying accuracy of records by 74.34(f)(1, 3), 74.34(g), 74.37, conducting a physical inventory, and following disposition requirements. The grantee 92.32(d)(1-2), 92.32(e) obtained advance Regional Office permission for any encumbrance of equipment acquired using Head Start funds. Testing not performed because (a) the total cost of equipment purchased from any Head Start award did not exceed \$50,000 or (b) in the last three years, the grantee did not purchase any piece of equipment with a unit cost of \$25,000 or more.

ERSEA

CM#	Compliance Measure	Compliance Level
ERSEA 1.1	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.	Compliant 1305.5(a), 1308.5(f), 645A(c)(1)
ERSEA 1.2	Prior to the agency selecting and enrolling children from families whose income falls 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: • Children from families with an income below the poverty line • Children from families receiving public assistance • Children who are homeless • Children in foster care	Compliant 645(a)(1)(B)(iii)(II)(aa-bb)
ERSEA 2.1	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.	Compliant 1305.4(c-e)
ERSEA 2.2	The program enrolls children who are categorically eligible (who fall within defined income-eligibility requirements). Defined Eligibility Requirements include: • Family income is below the poverty line • Family or child receives public assistance (SSI and TANF) • Family is homeless • Child is a foster child Additional income-eligibility requirements: • Ten percent of children enrolled in the program may be over the income threshold • 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	Compliant 645(a)(1)(B)(iii)(I-II)
ERSEA 3.1	Actual program enrollment is composed at least 10 percent of children with disabilities.	Compliant 1308.5(c)(1-4), 640(d)(1)
ERSEA 3.2	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	Compliant 1305.6(d), 642(g)

	vacancies occur.	
ERSEA 3.3	The program has documentation to support monthly enrollment data submitted to the Office of Head Start.	Compliant 641A(h)(2)(A-B)
ERSEA 4.2	The program ensures that no child's enrollment or participation in the Head Start program is contingent on payment of a fee.	Compliant

Child Health & Safety

CM#	Compliance Measure	Compliance Level
CHS 1.1	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.	Compliant 1304.20(a)(1)(ii), 1304.20(a)(1)(ii)(A-B), 1304.20(a)(2)
CHS 1.2	The program takes steps to ensure that each child with a known, observable, or suspected health, dental, or developmental problem receives: • Further diagnostic testing • Examination • Treatment from a licensed or certified health care professional • A follow-up plan to ensure required treatment has begun	Compliant 1304.20(a)(1)(iii-iv), 1304.20(c)(3)(ii)
CHS 1.3	The program involves parents, consulting with them immediately when child health or developmental problems are suspected or identified.	Compliant 1304.20(e)(1)
CHS 1.4	The program: • Informs parents of health and developmental procedures • Obtains their authorization prior to performing these procedures • Explains results	Compliant 1304.20(e)(2)
CHS 1.5	The program has established procedures for tracking the provision of health services.	Compliant 1304.20(a)(1)(ii)(C)
CHS 2.1	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.	Compliant 1304.20(b)(2-3) Concern 1304.20(b)(1)
	1–24% of the files reviewed indicate that the program has not performed or obtained all required developmental, sensory, behavioral, motor, language, cognitive, perceptual, social, and emotional screenings within the 45-day requirement (30 days for programs operating shorter durations).	
CHS 2.2	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.	Compliant 1304.20(f)(2)(ii), 1308.6(a)(1- 3), 1308.6(e)(1)
CHS 2.3	The program, in partnership with the LEA or Part C agency: • Works to inform and engage parents in all plans for screenings and referrals for evaluation	Compliant 1304.20(e)(4), 1308.19(j), 1308.6(c)

The program provides reasonable assistance to families to arrange transportation to and from its activities. The specific types of transportation assistance offered are made

clear to all prospective families in the program's recruitment announcements.

	• Ensures confidentiality of information • Encourages parent involvement in the IEP and IFSP process	45
	The program: Obtains information from parents about their children's health and safety needs Identifies and plans for accommodations Ensures that appropriate staff are informed and trained in accordance with the program's confidentiality policy	Compliant 1304.22(b)(3)
8	The program's Nutrition program is designed and implemented to meet the individual nutritional needs and feeding requirements of each child (including children with special dietary, medical, or disability needs).	Compliant 1304.23(b)(1), 1304.23(b)(1)(vii)

Family & Community Engagement

CHS 4.4

CHS 4.5

CHS 6.5

CM#	Compliance Measure	Compliance Level
FCE 1.1	Program staff engage in a process of collaborative partnership-building with all parents to: Demonstrate respect for each family's cultural, ethnic, and linguistic diversity Establish mutual trust Identify family goals Identify strengths Identify necessary services and other supports The process begins as early after enrollment as possible and must take into consideration each family's readiness and willingness to participate.	Compliant 1304.40(a)(1, 5)
FCE 1.2	The program works with families to provide referrals, resources, and services that are responsive to families' needs and conducts follow-ups to determine the effectiveness of services received.	Compliant 1304.40(b)(1, 2)
FCE 2.1	The program provides educational opportunities for parents to enhance their parenting skills that include: • Understanding the educational and developmental needs of their children • Sharing concerns and observations about their children with program staff	Compliant 1304.40(e)(2-3)
FCE 2.2	Program staff: • Educate parents about how to strengthen and nurture supportive environments and relationships in the home and at the program • Identify appropriate responses to children's behaviors • Encourage parents to share concerns and observations about their children's mental health • Share observations with parents regarding their children's behavior and development	Compliant 1304.24(a)(1)(i-iv)
FCE 2.3	The program makes provisions for mental health program services for parents and staff that include: • Staff and parent education on mental health issues • On-site mental health consultation with mental health professionals • Activities promoting children's mental wellness	Compliant 1304.24(a)(3)(ii)

Compliant

1310.10(b)

FCE 3.2	The program increases families' access to materials, services, and activities critical to family literacy development, including: Interactive literacy activities for parents and their children Training for parents on how to be their children's primary teachers Education and resources that lead to economic self-sufficiency and financial literacy	Compliant 1304.40(e)(4)(i)
FCE 4.1	The program supports successful transitions for enrolled children and families, both into and out of Early Head Start and Head Start programs, by: • Ensuring each child's relevant records are transferred to the child's next school or placement • Building relationships with principals, teachers, social workers, and health staff to facilitate continuity of programming • Discussing the developmental progress of individual students with parents and future teachers • Initiating joint transition-related training for staff	Compliant 1304.40(h)(1, 3), 1304.41(e)(1)
FCE 4.2	The program initiates transition planning for each Early Head Start-enrolled child at least 6 months prior to the child's third birthday to ensure the most appropriate placement.	Compliant 1304.41(e)(2)
FCE 5.1	The program has established and maintains a Health Services Advisory Committee (HSAC).	Compliant 1304.41(b)
FCE 5.2	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.	Compliant 1304.41(a)(2)
FCE 5.3	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.	Compliant 1304.41(a)(4), 1308.4(1)(3-5, 7)

Child Development and Education

CM#	Compliance Measure	Compliance Level
CDE 1.1	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.	Compliant 1307.3(b)(1)(i-iii)
CDE 1.2	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:	Compliant 1307.3(b)(2)(i-ii)
	Aggregate and Analyze the following: Individual, ongoing child-level assessment data for all children birth to age 5 Child-level data at least three times a year using data from one or more valid and reliable assessment tools For programs serving dual-language learners (DLLs): 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	

In order to use school readiness data:

- 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

CDE 2.1	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.	Compliant 642(f)(3)(C)
CDE 2.2	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.	Compliant 642(f)(3)(E)
CDE 3.1	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.	Compliant 1304.20(f)(1)
CDE 3.2	Services provided to children with identified disabilities are designed to support the outcomes contained in their IEPs or IFSPs.	Compliant 1304.20(f)(2)(i), 1304.21(a)(1)(ii), 1308.19(k)
CDE 3.4	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.	Compliant 1304.24(a)(2), 1304.24(a)(3)(i)
CDE 3.5	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.	Compliant 1304.21(a)(1)(i)
CDE 4.3	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.	Compliant 648A(f)
CDE 4.4	The program ensures that home visitors have the required qualifications, training, and experience.	Compliant 1304.52(e)
CDE 4.5	When the majority of children speak the same language, at least one classroom staff member or home visitor interacting regularly with the children speaks their language.	Compliant 1304.52(g)(2)

— END OF REPORT —