

ACF Administration for Children and Families	U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES	
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	3. Originating Office: Office of Head Start	
	4. Key Words: Consolidated Appropriations Act; Appropriations; Fiscal Year (FY) 2018; Funding Increase; Cost of Living Adjustment (COLA)	

PROGRAM INSTRUCTION

TO: Head Start and Early Head Start Grantees and Delegate Agencies

SUBJECT: FY 2018 Head Start Funding Increase

INSTRUCTION:

President Trump signed Public Law 115-141, the Consolidated Appropriations Act, 2018, on March 23, 2018. Included is \$9,863,095,000 for programs under the Head Start Act, an increase of \$610 million over the fiscal year (FY) 2017 funding level.

Of this increase, \$216 million provides grantees a 2.6 percent cost-of-living adjustment (COLA), \$260 million to support grantees increasing their hours of program operations, and \$115 million for Early Head Start-Child Care Partnerships (EHS-CCP) and Early Head Start (EHS) Expansion, which includes a 2.6 percent COLA for existing EHS-CCP and EHS Expansion grantees. Information will be provided in the coming weeks about how to apply for these funds.

This Program Instruction provides information about the COLA funds that are available to grantees in FY 2018 and describes the requirements for applying for these funds.

All Head Start and Early Head Start grantees, and Early Head Start-Child Care Partnerships/Expansion grantees, and grantees subject to competition for continued funding through the Designation Renewal System are eligible to receive the COLA.

State Collaboration grants are not eligible for the COLA due to the statutory cap on their funding in the Head Start Act.

FY 2018 COLA

Each grantee may apply for a COLA increase of 2.6 percent of the FY 2017 base funding level. Base funding excludes training and technical assistance funds, and any one-time funding grantees may have received in FY 2017. COLA funds are to be used to increase staff salaries and fringe benefits and to pay for higher operating costs.

Programs that use COLA funds to increase staff salaries must increase the hourly rate of pay and

permanently increase the Head Start pay scale rather than only increase the salaries of current employees.

Sections 653 and 640(j) of the Head Start Act provide further guidance on the uses and limitations of the COLA funds. Section 653 of the Act restricts compensation to a Head Start employee that is higher than the average rate of compensation paid for substantially comparable services in the area where the program is operating. Section 653 also prohibits any Head Start employee from being compensated at a rate higher than that of an Executive Schedule Level II position, including employees being paid through indirect costs. Section 640(j) of the Act requires that the compensation of Head Start employees must be improved regardless of whether the agency has the ability to improve the compensation of staff employed by the agency that do not provide Head Start services.

Any grantee proposing differential COLA increases to staff, delegates, or partners must justify its rationale in its budget narrative.

As specified in [Personnel Policies, 45 CFR § 1302.90](#), each grantee is required to establish written personnel policies and procedures that are approved by the governing body and Policy Council or policy committee and that are available to all staff. Review your personnel policies and procedures since they may contain information relevant to this COLA.

Funds may also be used to offset increased operating costs in other areas of the budget. This includes increased costs in rent, utilities, facilities maintenance and insurance, contractual arrangements, vehicle fuel and maintenance, supplies, and equipment.

Application Requirements

Grantees are required to request COLA funds through a grant application. Your Regional Office will provide a Funding Guidance Letter specifying the amount of funds available to your agency. Grantees whose annual applications have been submitted may request their applications be returned to add the COLA.

Grantees must submit their application in the Head Start Enterprise System (HSES).

Grantees encountering program improvement needs should contact their Regional Office and submit supplemental applications throughout the year as needs emerge. Requests are addressed by priority and subject to availability of funds.

Please direct any questions regarding this Program Instruction to your Regional Office. Thank you for your work on behalf of children and families.

Dr. Deborah Bergeron /

Dr. Deborah Bergeron
Director
Office of Head Start

Capital Area Community Action Agency

MEMORANDUM

TO: Tim Center, Chief Executive Officer
FROM: Annie McDuffie, Program Manager, Crisis Program
RE: Board Update for April – *Emergency Services*
DATE: May 8, 2018

National Performance Indicator

Goal 6: Low-Income People, Especially Vulnerable Populations, Achieve Their Potential By Strengthening Family and Other Supportive Environments. This report started October 1st 2017 and will end September 30th 2018.

Low Income Home Energy Assistance Program

Below is the total unduplicated number of households/individuals served for April 2018.

County	Oct 2017	Nov 2017	Dec 2017	Jan 2018	Feb 2018	Mar 2018	Apr 2018	May 2018	June 2018	July 2018	Aug 2018	Sept. 2018	Total
Calhoun	27/59	13/23	24/43	43/94	23/54	25/40	24/49						179/362
Franklin	22/45	13/32	14/32	12/19	16/29	13/21	6/13						96/191
Gadsden	69/166	45/118	34/93	65/154	50/99	49/90	31/73						343/793
Gulf	23/38	11/22	11/26	19/28	14/37	25/35	20/42						133/228
Jefferson	20/47	18/60	30/84	45/113	57/125	52/114	26/65						248/608
Leon	279/802	217/562	228/626	284/791	277/674	292/671	232/579						1,759/4,705
Liberty	11/22	4/9	7/21	16/34	19/45	3/11	4/17						64/159
Wakulla	21/50	11/37	8/25	21/51	27/56	18/27	5/7						111/253
Totals	472/1,229	332/863	356/950	505/1,284	433/1,119	477/1,009	348/845						2,923/7,299

Due to the impact of hurricane Irma, the State of Florida Office Of The Governor has released an approved the release of the FY 2017-2018, Low Income Home Energy Assistance Weather-Related/Supply-Shortage funds to assist low-income households in counties affected by the weather. Total amount \$38,725 to be divided between the 8 counties. Start date September 4th ending December 2nd 2017.

Community Action has submitted a modification to Department of Economic Opportunity to spend the \$38,725 released for Low Income Home Energy Assistance Weather-Related/Supply-Shortage funds, in



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addition to the Weather-Related/Supply Shortage funds, Community Action received an additional adjustment to the original budget in the amount of \$68,824 also to be divided between the 8 counties.

The Low Income Home Energy Assistance contract and modification #3 was also approved in the amount of \$1,694,692.00. This modification started April 1st. and will continue.

Starting April 1st, Community Action will no longer take applications for propane assistance. Clients can receive assistance with electric bills only.

Program Manager attended Talquin Electric's annual meeting held at East Gadsden High School and distributed information regarding Community Action services to well over 900 Talquin members and employees.

Capital Area Community Action Agency, Inc.

Report of Weatherization Assistance Program Subrecipient Risk Assessment

Issued to the Florida Department of Economic Opportunity



 **Thomas Howell
Ferguson P.A.**
Certified Public Accountants

Capital Area Community Action Agency, Inc.

Report of Weatherization Assistance Program Subrecipient Risk Assessment

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Consultant's Report

Department of Economic Opportunity
Bureau of Economic Self-Sufficiency

Subrecipient: Capital Area Community Action Agency, Inc.

Pursuant to the Scope of Work designated under Purchase Order No. B15BB4 originally issued July 12, 2017, with the state of Florida Department of Economic Opportunity ("DEO"), we hereby submit our Report of Weatherization Assistance Program ("WAP") Subrecipient Risk Assessment for Capital Area Community Action Agency, Inc. ("Subrecipient").

The purpose of this report is to assist DEO by performing a risk assessment of the fiscal operations of the Subrecipient that administers the WAP in the Subrecipient's designated service area. Our report objective is to identify potential risks associated with the Subrecipient's fiscal competency and provide an overall indication of the risk for DEO to engage the Subrecipient as a provider for WAP services based on the accumulated results of the risk assessment, and to assist DEO in its planning of future monitoring procedures related to the Subrecipient.

Our report includes an overall risk-based assessment of the Subrecipient's fiscal operations and its internal control and compliance environment. Our risk assessment evaluation was designed based on our understanding of applicable rules and regulations, including the applicable provisions of the Federal WAP regulations and guidance and Title 2 of the U.S. Code of Federal Regulations Part 200 (commonly referred to as the "Uniform Guidance"). We are not responsible for any action DEO may take based on this report.

The Subrecipient is responsible for:

- (1) Establishing and maintaining effective internal control over financial reporting and safeguarding assets;
- (2) Identifying and ensuring that it complies with the requirements of laws and regulations applicable to the WAP as well as their WAP-related contract(s) with DEO and pass-through entities; and
- (3) Making all financial records and related information available to us, including existing internal control documentation and management's evaluation of the design and operating effectiveness of internal control over financial reporting and compliance.

Page Two

Our report is organized in the following sections:

- **Subrecipient Summary:** provides a background and overview of the Subrecipient by us.
- **Risk Assessment Procedures and Results:** identifies procedures performed by us and the resulting risk assessment for all relevant areas identified in our contract with DEO.

Our report is intended solely for the information and use of DEO and management of the Subrecipient and is not intended to be, and should not be, used by anyone other than these specified parties. In addition, the results of our risk assessment procedures and the conclusions communicated in this report are based solely on the information provided to us by the Subrecipient. Had we been engaged to perform a site visit to the Subrecipient and/or had we been otherwise engaged to validate certain responses provided to us by the Subrecipient, it is possible our risk assessments or overall conclusions could change. This report is not intended for persons or entities without adequate knowledge and understanding of this limitation on its use.

We would like to thank the employees at Capital Area Community Action Agency, Inc. for their cooperation and assistance with this risk assessment engagement.

Thomas Howell Ferguson P.A.

Tallahassee, Florida
November 29, 2017

Capital Area Community Action Agency, Inc.

Report of Weatherization Assistance Program Subrecipient Risk Assessment

Subrecipient Summary

Capital Area Community Action Agency, Inc. ("Subrecipient" or "CACAA") is a private, non-profit organization created in 1965 to serve low-income residents of Leon County with childcare and transportation. Since that time, CACAA has expanded to also serve Gadsden, Jefferson, Calhoun, Liberty, Franklin, Wakulla, and Gulf Counties. CACAA is the grantee agency for a variety of services established to assist low-income families become self-sufficient. CACAA's mission is to provide a comprehensive system of services and resources to reduce the detrimental effects of poverty, empower low-income citizens with skills and motivation to become self-sufficient, gain financial independence, and improve the overall quality of both their lives and the aforementioned communities. CACAA states that approximately 7% of its annual revenue derives from the Weatherization Assistance Program.

CACAA employs more than 120 employees with nine employees involved with weatherization activities. The Chief Executive Officer and the Chief Operating Officer have the responsibility of providing direction for all facets of the Agency's operation throughout the geographical area. The Weatherization Program Manager and Weatherization Coordinator are both responsible for WAP program support. The finance team consisting of the Chief Financial Officer, Finance Director, two Senior Accountants, and one Fiscal Assistant administer the fiscal processes including accounts payable, payroll and cash management.

WAP Metrics	
Contract number	16WX-0G-12-00-04-007
Total contract amount	\$ 674,950
Total expended as of August 14, 2017	\$ 319,045
Percentage spend rate	47%
Units weatherized this contract period as of August 14, 2017	30

Capital Area Community Action Agency, Inc.

Report of Weatherization Assistance Program Subrecipient Risk Assessment

Risk Assessment Procedures and Results

Procedures

1. In cooperation with DEO we designed a customized risk assessment tool for WAP subrecipients (the “Risk Assessment Tool”). This tool was constructed based on 14 functional areas specified by DEO and included questions and requests for documentation to aid in the evaluation of the Subrecipient’s operational, financial, and compliance controls.
2. The approved Risk Assessment Tool was distributed to Florida’s 20 current WAP subrecipients for completion.
3. The Subrecipient’s responses to the Risk Assessment Tool were evaluated and we performed follow-up inquiries with Subrecipient personnel as necessary.
4. Based on information provided by the Subrecipient, we assigned a relative risk factor to each observation identified. The risk factors were based on the following criteria:
 - **High** – Controls and/or processes need to be established or improved to mitigate the likelihood that a probable risk will have a significant impact on the Subrecipient and/or its delivery of WAP services under its contract(s) with DEO. These have the highest level of concern and require prompt Subrecipient attention.
 - **Moderate** – Existing controls and/or processes should be strengthened to minimize the likelihood or impact of risk to the WAP program, albeit at a lesser level of concern than the “High” risk areas. Nevertheless, these have an elevated level of concern that require Subrecipient attention.
 - **Low** – Existing controls and/or processes are either (1) predominantly adequate as described or (2) could be improved to enhance efficiency and/or effectiveness but in their current form do not have a significant adverse impact on the WAP program.
5. Developed an overall risk rating based on the risk factors assigned in procedure step 4. The overall risk rating considers the totality of the risk assessment observation points we developed and weights each according to the overall engagement objectives.

Results

The following is a summary of observations based on the procedures performed and information made available to us. We reserve the right to modify or supplement our findings if additional information comes to light or if the scope of our evaluation is expanded. Such expanded evaluation will occur only at the specific instruction of DEO; we are under no obligation to update this risk assessment report for subsequently discovered facts.

Capital Area Community Action Agency, Inc.

Report of Weatherization Assistance Program Subrecipient Risk Assessment

Observation	YES, NO, N/A	Risk Factor
(1) Organizational Structure		
Subrecipient has sufficient employee positions filled to administer the WAP.	Yes	Low
Turnover of executive management is low.	Yes	Low
Executive management is considered competent and/or has relevant experience to administer the WAP.	Yes	Low
Subrecipient processes applications timely and in accordance with standard criteria and preference metrics.	Yes	Low
Applications are formally approved before acceptance into the WAP.	Yes	Low
(2) Financial Management		
The Subrecipient has a written accounting policies and procedures manual that effectively covers activities associated with the WAP.	Yes	Low
Access to accounting software is limited to proper employees.	Yes	Low
Employees with ability to post journal entries do not have custody of cash and/or check stock or check signing authority.	Yes	Low
Employees are informed of accounting policies and procedures.	Yes	Low
An annual WAP operating budget is prepared and formally approved by the Board and/or Finance/Audit Committee.	Yes	Low
Funds specifically relating to WAP are maintained in a separate bank account.	No	High
Petty cash is not significant and there is little turnover in funds.	Yes	Low
The subrecipient has no excess cash relating to grant receipts in excess of \$250,000.	No	Moderate
Bank reconciliations are performed for all WAP related bank accounts on a timely basis.	Yes	Low
Bank reconciliations are formally approved by an individual independent of preparation.	No (electronic approval)	Moderate
Access to online banking applications, including wire/ACH initiations, is limited to proper employees.	Yes	Low
Authorized signers are limited to upper management and are designated through a formal review process.	Yes	Low
Closing occurs on a monthly basis and includes reconciliations between grant funding requests and the general ledger.	Yes	Low
There have been no findings related to the WAP in the Subrecipient's most recent audit(s).	Yes	Low

Capital Area Community Action Agency, Inc.

Report of Weatherization Assistance Program Subrecipient Risk Assessment

Observation	YES, NO, N/A	Risk Factor
(3) Fund Accounting		
There are written policies and procedures that relate to accounting for and reporting expenditures to DEO.	Yes	Low
WAP expenses and related activity are coded and tracked independently of other programs in the general ledger.	Yes	Low
Reconciliations of actual costs incurred and requests for reimbursement are performed by a qualified individual and are formally approved by an employee independent of reconciliation preparation.	Yes	Low
The subrecipient has processes and procedures in place to ensure WAP funding is not comingled with other programs.	Yes	Low
Cash advances are requested on an as-needed basis and are tracked separately to ensure expending within the applicable time frame or that excess funds and/or earnings are remitted.	Yes	Low
(4) Administrative Costs		
The Subrecipient has processes in place to ensure only valid administrative costs are directly charged to the WAP.	Yes	Low
The Subrecipient has sufficient understanding of which costs should be treated as administrative and has processes in place to ensure these expenses are not duplicated on the monthly invoices to DEO.	Yes	Low
(5) Billable Rate		
The Subrecipient has processes in place to ensure only valid expenditures (direct material, labor, etc.) are directly charged to the WAP.	Yes	Low
To charge direct expenses, the Subrecipient has a real-time posting of labor and materials to unique WAP projects that are integrated in the general ledger.	Yes	Low
(6) Cost Allocation		
The Subrecipient has a written cost allocation plan that includes the use of an agency approved indirect cost rate or cost allocation method.	Yes	Low
Cost allocation methodologies are implemented through a formal, standardized process.	Yes	Low
Costs used in the cost allocation plan are formally approved and determined allowable based on policy.	Yes	Low

Capital Area Community Action Agency, Inc.

Report of Weatherization Assistance Program Subrecipient Risk Assessment

Observation	YES, NO, N/A	Risk Factor
(7) Indirect Cost Rate		
The Subrecipient utilizes an appropriate indirect cost rate method which is supported by internal documentation.	Yes	Low
Costs are evaluated at least annually for inclusion as direct or indirect. Internal procedures (time studies, etc.) are performed to substantiate classification.	Yes	Low
Employees charged to WAP as direct, program support, or administrative are determined based on logical classification criteria.	Yes	Low
(8) Payroll		
Supervisors formally review and approve time charged for hourly employees.	Yes	Low
There is formal documentation of approval of payroll reports prior to initiation of pay runs.	Yes	Low
Employees directly charged to WAP are separately identifiable in the system.	Yes	Low
System has limitations in place to restrict charging of WAP grants to authorized employees only.	Yes	Low
Pay rates, including changes, are determined based on relevant employee criteria and are formally approved.	Yes	Low
(9) Property		
Property and equipment and related information is continuously tracked. Assets are tagged and reconciled to physical property on hand.	Yes	Low
Impairment is evaluated at least annually. The Subrecipient aims to use assets for the entirety of their useful lives and does not hold idle property or equipment.	Yes	Low
Property and equipment is disposed of in a cost efficient manner to most benefit the WAP.	Yes	Low
(10) Procurement		
The Subrecipient has a written policy that addresses procurement.	Yes	Low
Only valid individuals are given the authority to expend grant funds.	Yes	Low
The subrecipient utilizes a competitive bidding process to determine major vendors and/or contractors under the WAP.	Yes	Low
Any inventory on hand (direct material) is secured and tracked until use.	N/A	Low
Changes to the vendor master file must be made by authorized individuals after valid approval.	Yes	Low

Capital Area Community Action Agency, Inc.

Report of Weatherization Assistance Program Subrecipient Risk Assessment

Observation	YES, NO, N/A	Risk Factor
(10) Procurement <i>(continued)</i>		
Invoices are formally reviewed by the authorized check signer prior to payment	Yes	Low
Payments over specified thresholds require additional signatures.	Yes	Low
(11) Governance		
The Subrecipient has an independent Board of Directors that meet at least quarterly and have required term limits for its members.	Yes	Low
The Board of Directors (or equivalent) operates under a written conflict of interest policy, which is signed by each member.	Yes	Low
Formal minutes are taken at each meeting and are approved at the subsequent meeting.	Yes	Low
(12) Systems		
The Subrecipient has systems in place to effectively track new applications, approved applications, projects in progress, and completed projects.	Yes	Low
The Subrecipient has systems in place to ensure weatherization costs fall into WAP guidelines.	Yes	Low
A written quality assurance (QA) policy is in place to ensure effective weatherization. Costs relating to the QA process are properly captured on the invoices to DEO.	Yes	Low
(13) Transparency		
The Subrecipient provides appropriate information concerning the WAP available on their public webpage.	Yes	Low
The Subrecipient is proactive in promoting transparency within the organization.	Yes	Low
(14) Fraud and Abuse		
There are written policies in place relating to self-dealing, nepotism, whistleblowers, and reporting fraud and abuse.	Yes	Low
There have been no instances of fraud or abuse at the Subrecipient agency for the past three years.	Yes	Low
These policies, including fraud hotlines and whistleblower rights, are posted or made readily available to all employees.	Yes	Low
Employees working either directly or indirectly on the WAP sign a conflict of interest statement annually.	No	High
Overall Risk Assessment		Low

Note: The risk ratings shown above, including the overall risk assessment, pertain only to the purpose for which this engagement was performed and its defined scope. See the Consultant's Report.

Capital Area **Community Action** Agency

MEMORANDUM

TO: Tim Center, Chief Executive Officer
FROM: Melissa Watson
RE: Board Update for May – Getting Ahead
DATE: May 11, 2018

County	Starting Enrollments	Current Enrollments	*Group A	*Group B	*Group C
Calhoun/Liberty	10	-	-	-	-
Gadsden	7	-	-	-	-
Jefferson	TBD				
Leon	TBD				
Wakulla	TBD	-			

Getting Ahead in the following counties:

Calhoun/Liberty

- 10 applicants applied for Getting Ahead
- The case manager is currently working with participants to complete the process

Gadsden

- Case Manager Donald Mackey has been hired.
- We currently have 9 applicants ready to start classes
- Mr. Mackey has made contact with applicants to introduce himself and confirm participation
- Orientation 5-23-2018 at the Gadsden County Library
- Case manager will continue to recruit

Jefferson

- 12 participants transitioned out of Getting Ahead
- 11/12 (92%) will transition into Staying Ahead
- Next Getting Ahead class will start in August
- Recruitment is ongoing

Staying Ahead Mentor Program Jefferson

- Mentor orientation will be held the last week of June (projected date)
- Orientation will be held at the Jefferson County Senior Center
- We currently have 19 mentors – target is 24

Leon County

- 12 participants transitioned out of Getting Ahead
- 8/12 (67%) participants will transition into Staying Ahead
- Next class due to start August 2018
- Recruitment is ongoing

Staying Ahead Mentor Program Leon

- We are still recruiting for Leon County
- Currently we have 13 mentors
- Projected date for mentor orientation last week of June

Wakulla

- Case Manager has been hired for Wakulla Stephanie Weems – start date May 21, 2018
- Target areas to recruit Head Start, Early Learning Coalition, Career Source and local churches
- We currently have 2 applicants have completed the process
- 3 new applications have been received, initial contact has been made

Capital Area **Community Action** Agency

MEMORANDUM

TO: Head Start Policy Council and Board of Directors
FROM: Tim Center, CEO and Head Start Director 
RE: Head Start Director's Report
DATE: May 14, 2018

The following memo serves as my update to the Community Action Head Start Policy Council and Board of Directors.

Staffing

Based on the continuing transition toward programmatic accountability, plans are underway to develop a staffing model that covers Head Start exclusively with Extended Day programming staffed by a separate team funded by School Readiness and Voluntary Pre-Kindergarten funding.

Facilities

Environmental Health and Safety Self-Assessment reviews are being conducted. Summer repair schedules will be based on this assessment. Staff were sent to training on facilities and recreational space.

Curriculum

No new reports on curriculum issues. The focus with staff is in documenting in the online portal the individualized educational metrics about the students.

Enrollment

Centers are fully enrolled with waiting lists for all but Franklin County. Registration and recruitment for the coming school year is now open.

Federal and State Regulations

Federal monitoring reports have not yet been delivered. The HHS office has been contacted and is aware of the delay. They have seen a preliminary monitoring report and are working on training and technical assistance to help us address our assessment procedures.

Other programs are also waiting for their results.

Cindy Kaier, HHS Education Specialist, met with our Head Start team including a Policy Council member and concerned parent. The conversation focused on what the CLASS monitoring report reveals. Given the lack of 2018 standards, we will have to wait to understand the full impact.

Self-Assessment is an ongoing tool to foster data collection and improvement of the Head Start program.

Budget

A new Budget is being developed for the coming fiscal year to separate Head Start from the Extended Day program. Cost of Living Adjustment (COLA) supplemental funds will permit a bonus in the summer. The new budget will need to be submitted with the refunding application.

Current budget looks good regarding the program budget at this time. A slight amendment may be necessary to cover some ongoing maintenance matters.



ADMINISTRATION FOR
CHILDREN & FAMILIES

Office of Head Start 4th Floor – Switzer Memorial Building, 330 C Street SW, Washington DC 20024 eclkc.ohs.acf.hhs.gov

Program Performance Summary Report

To: Board Chairperson

Ms. Christy McElroy

Board Chairperson

Capital Area Community Action Agency, Inc.

309 Office Plaza Drive

Tallahassee, FL 32301-2729

From: Responsible HHS Official

Dr. Deborah Bergeron

Director, Office of Head Start

Am Lincoln for Dr. D.B.
Date *5-9-18*

From February 5-9, 2018, the Administration for Children and Families (ACF) conducted a Focus Area Two Monitoring Review of the Capital Area Community Action Agency, Inc., Head Start program. This report contains information about the grantee's performance and compliance with the requirements of the Head Start Program Performance Standards or Public Law 110-134, *Improving Head Start for School Readiness Act of 2007*. We would like to thank your governing body, policy council, parents, and staff for their engagement in the review process.

Based on the information gathered during this review, your Head Start program was found to need improvement in one or more areas. The report provides you with detailed information in each area where program performance did not meet one or more applicable Head Start Program Performance standards, laws, regulations and policy requirements and the required timeframes for corrective action.

Please contact your Regional Office for guidance should you have any questions or concerns. Your Regional Office will follow up on the content of this report and can work with you to identify resources to support your program's continuous improvement.

DISTRIBUTION OF THE REPORT

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

Capt. Robert Bialas, Regional Program Manager

Ms. Shantell Freeman, Policy Council Chairperson

Mr. Tim Center, CEO/Executive Director/Head Start Director

STRUCTURE OF THE REPORT

This report provides grantees with an overview of program performance based on information collected during the Focus Area Two Monitoring Review. The report contains the following three sections: Overall Performance Summary; Program Infrastructure, Oversight, and Improvement; and Service Delivery. The report also contains a Glossary of Terms, which can be found on page 3 of this report.

Section I: Overall Performance Summary provides a consolidated view of the status of your program's performance across the four components of Program Infrastructure, Oversight and Improvement areas and the three Service Delivery areas. This section includes a Summary of Findings table, where applicable, to indicate any areas of concern, areas of noncompliance or deficiencies identified during the review.

Section II: Program Infrastructure, Oversight, and Improvement provides information on the effectiveness of your program's management systems, practices, and infrastructure. This section of the report focuses on four areas of performance, described as follows:

1. **Program Management** includes an assessment of the program's overall management structure, its system of ongoing compliance oversight and continuous improvement, and its system for hiring, supervising, and developing qualified staff.
2. **Program Governance** includes assessment of the governing body and policy council's active involvement in fulfilling their respective roles and responsibilities and effective oversight of the program.
3. **Financial Management** describes outcomes of the assessment of the grantee's internal controls, financial management systems, fiscal capacity, and practices.
4. **Enrollment, Recruitment, Selection, Eligibility, and Attendance (ERSEA)** indicates program performance in tracking and using attendance data to assist families and staff in supporting and managing attendance issues, and in monitoring compliance with eligibility requirements.

Section III: Service Delivery provides information on your program's performance in delivering quality services to children and families within the following three areas:

1. **Early Education and Child Development Childhood Program Services** include outcomes of the assessment of your program's teaching practices and learning environments, services for children with disabilities and their families, and, where applicable, the delivery of home-based services.
2. **Health Program Services** focus on the assessment of health, mental health, oral health, and nutritional services for children and families, services provided to enrolled pregnant women (where applicable), and the health and safety of the grantee's environments.
3. **Family and Community Engagement Program Services** describe the assessment outcomes of your program's family engagement and support strategies, including the integration of family engagement into all services to support family well-being and promote school readiness.

Glossary of Terms	
Area of Concern	An area for which the agency needs to improve performance. These issues should be discussed with the grantee's Regional Office of Head Start for possible technical assistance.
Area of Noncompliance	An area for which the agency is out of compliance with Federal requirements (including but not limited to the Head Start Act or one or more of the regulations) in one or more area of performance. This status requires a written timeline of correction and possible technical assistance or guidance from the grantee's program specialist. If not corrected within the specified timeline, this status becomes a deficiency.
Deficiency	<p>As defined in the Head Start Act, the term "deficiency" means:</p> <p>(A) a systemic or substantial material failure of an agency in an area of performance that the Secretary determines involves:</p> <ul style="list-style-type: none"> (i) a threat to the health, safety, or civil rights of children or staff; (ii) a denial to parents of the exercise of their full roles and responsibilities related to program operations; (iii) a failure to comply with standards related to early childhood development and health services, family and community partnerships, or program design and management; (iv) the misuse of funds received under this subchapter; (v) loss of legal status (as determined by the Secretary) or financial viability, loss of permits, debarment from receiving Federal grants or contracts, or the improper use of Federal funds; or (vi) failure to meet any other Federal or State requirement that the agency has shown an unwillingness or inability to correct, after notice from the Secretary, within the period specified; <p>(B) systemic or material failure of the governing body of an agency to fully exercise its legal and fiduciary responsibilities; or</p> <p>(C) an unresolved area of noncompliance.</p>

Grantee Information

Head Start Enrollment: 378

Early Head Start Enrollment: Not Applicable

Number of Grants: 1

Head Start Director: Mr. Tim Center

Board Chairperson: Ms. Christy McElroy

Policy Council Chairperson: Ms. Shantell Freeman

Program Specialist: Ms. Ronniece Boston

Fiscal Specialist: Ms. Natasha Jones



Franklin County Head Start

Section I. Overall Performance Summary

The summary table provides an overview of your program's performance in each of the seven core areas of performance subsumed within Program Infrastructure, Oversight, and Improvement and the Service Delivery sections of the report. *Performance Status* is interpreted as follows:

- ✓ Your program has met all requirements assessed within this performance area.
- ✗ Your program has an area of concern or an area of noncompliance in one or more requirements assessed within this performance area; your program has not met all requirements.
- !! Your program has a deficiency in one or more requirements assessed within this area.

Program Performance: Program Infrastructure, Oversight, and Improvement	
Performance Area	Performance Status
Program Management	✓
Program Governance	✓
Financial Management	✓
ERSEA	✓
Program Performance: Service Delivery	
Performance Area	Performance Status
Education and Child Development Program Services	✓
Health Program Services	✗
Family and Community Engagement Program Services	✓

Summary of Findings

Applicable Standards	Grant Number(s)	Timeframe	Compliance Level	Service Area
1302.47(b)(iii)(ix)	04CH10135	120 days	Area of Noncompliance	Health Program Services

Section II: Program Infrastructure, Oversight and Improvement

This section of the report provides information on your program's performance in: (1) Program Management; (2) Program Governance; (3) Financial Management; and (4) ERSEA.

1. Program Management

This section describes your program's performance in providing management, ongoing monitoring and continuous improvement to achieve program goals and ensure child safety and the delivery of high-quality program services. This section indicates your program's performance in each of the following areas: program management structure; ongoing oversight and continuous improvement; and staff hiring, supervision, and development.

Program Management Performance Summary

Performance Area	Performance Status
Program management structure	
Ongoing oversight and continuous program improvement	
Staff hiring, supervision, and development	

Performance Area Summary

Program management structure. The monitoring review found your program maintains a program and human resource management structure that provides effective management of all program areas.

Ongoing oversight and continuous program improvement. The monitoring review found that your program has implemented a system for collecting, using, and sharing data for ongoing monitoring and continuous program improvement.

Staff hiring, supervision, and development. The monitoring review found your program has implemented a systematic approach to staff hiring, supervision, training, support, and professional development that supports high-quality service delivery.

2. Program Governance

This section indicates your program's performance in each of the two *Program Governance* performance areas: governing body and policy council.

Program Governance Performance Summary

Performance Area	Performance Status
Governing body	
Policy council	

Performance Area Summary







Governing body. The monitoring review found your program's governing body uses data (e.g., ongoing monitoring, fiscal, school readiness, and other data such as audits, self-assessment, and monthly reports) and leverages its subject matter expertise to participate fully in the program oversight, planning, and monitoring, including annual approval of the operating budget and the safeguarding of funds.

Policy council. The monitoring review found your program's policy council uses data and leverages its knowledge of the community effectively for ongoing monitoring, continuous improvement, and program oversight, including involvement in budget planning, policies for reimbursement, and participation in policy council activities.

3. Financial Management

This section describes your program's performance in each of the seven performance areas listed under the Financial Management performance area.

Financial Management Performance Summary

Performance Area	Performance Status
Internal controls	
Financial management system	
Identifying and mitigating risk	
Adequacy of budgeted resources	
Budget management	
Automated accounting and record keeping system	
Delegate agency oversight	Not Applicable

Performance Area Summary

Internal controls. The monitoring review found your program has internal controls that provide effective oversight of all fiduciary areas of responsibility to ensure accomplishment of program objectives.

Financial management system. The monitoring review found your program has a financial management system and accounting and reporting practices that support ongoing fiscal operations; provide supporting documentation necessary to facilitate effective audits; enable the grantee to remain in compliance with laws, regulations, grant terms, and conditions; and ensure payment of allowable program expenses promptly and within the appropriate budget period.

Identifying and mitigating risk. The monitoring review found your program has a process to identify risks and obtain cost-effective insurance for those identified risks, including a system for ensuring the protection of Federal interest in real property purchased with Federal funds.

Adequacy of budgeted resources. The monitoring review found that your program has sufficient staffing and resources to promote continuity of care for all children enrolled, allow for sufficient time needed for staff to participate in training and professional development, allow for provision of the full range of services, and ensure that facilities, equipment and materials remain safe.

Budget management. The monitoring review found your program has a management system that effectively monitors its budget for personnel, compensation, benefits, shared cost, non-Federal share, and indirect and administrative costs.



Automated accounting and record keeping system. The monitoring review found your program maintains an automated accounting and record keeping system adequate for effective oversight.

Delegate agency oversight. Not Applicable

4. ERSEA

The final performance area in Section I, ERSEA, focuses on your program's performance in eligibility and attendance.

ERSEA Performance Summary

Performance Area	Performance Status
Eligibility	
Attendance	

Performance Area Summary

Eligibility. The monitoring review found your program enrolls children who are categorically eligible or who fall within defined income-eligibility requirements based on Head Start requirements.

Attendance. The monitoring review found your program monitors and uses attendance data to support families in promoting individual child attendance and to inform program improvements where monthly attendance rates indicate systematic attendance issues.

Section III. Service Delivery

This section of the report provides the results of the assessment of your program's service delivery, including your program's: (1) Education and Child Development Program Services; (2) Health Program Services; and (3) Family and Community Engagement Program Services.

Each summary table includes information from Section II's Program Management and Financial Management assessment to provide a comprehensive summary of the assessment of your program's service delivery. The summary table includes information on how well your program is providing ongoing oversight and continuous improvement; hiring, supervising, and developing staff; and budgeting adequate resources within the respective education, health, and family and community engagement service areas.

1. Education and Child Development Program Services

This section describes your program's performance in delivering the following services: teaching practices and learning environments, services for children with disabilities, and home-based program services (where applicable).

Education and Child Development Services Performance Summary

Performance Area	Performance Status
Education and Child Development Service Delivery	
Teaching practices and learning environments	✓
Services for children with disabilities	✓
Home-based services	Not Applicable
Program Management*	
Program management structure	✓
Ongoing oversight and continuous improvement of education and child development services	✓
Hiring, supervision, and development of education and child development staff	✓
Financial Management*	
Adequacy of resources for education and child development services	✓

* *Program and Financial Management* data is only presented in this summary table; no narrative text is provided in the sections that follow. See Section II for narrative description of grantee *Program Management* and *Financial Management* performance.

Performance Area Summary

Teaching practices and learning environments. The monitoring review found your program uses a developmentally appropriate research-based curriculum that aligns with the Head Start Early Learning Outcomes Framework, and has implemented effective teaching practices and well-organized learning environments that promote progress in children's development and growth.

Services for children with disabilities. The monitoring review assessed whether your program fully engages children with disabilities in all aspects of the program, engages families of children with disabilities in their children's learning and development, and supports families in becoming advocates for services that meet their children's needs.











Mabry Street Head Start

Home-based services. Not Applicable

Health Program Services

This section indicates your program's performance in delivering the following Health Program services: addressing health status and health needs; oral health and nutrition services; mental health services; services for pregnant women; and maintaining healthy and safe environments.

Health Program Services Performance Summary

Performance Area	Performance Status
Health Program Service Delivery	
Addressing health status and health needs	
Oral health and nutrition services	
Mental health services	
Services for pregnant women	Not Applicable
Healthy and safe environments	
Program Management*	
Program management structure	
Ongoing oversight and continuous improvement of health program services	
Hiring, supervising, and developing health program service staff	
Financial Management*	
Adequacy of resources for health program services	

* Program and Financial Management data is only presented in this summary table; no narrative text is provided in the sections that follow. See Section II for narrative description of grantee Program Management and Financial Management performance.

Performance Area Summary

Addressing health status and health needs. The monitoring review found your program effectively collects, tracks, addresses, and shares information regarding each child's health status and health needs, including health, mental health, oral health, and nutritional needs.





Oral health and nutrition services. The monitoring review found your program has a system for maintaining and monitoring for effective oral health practices and providing nutrition services that meet the nutritional needs of and accommodate the feeding requirements of each child.

Mental health services. The monitoring review found your program effectively utilizes mental health consultation to support staff, including home visitors, in identifying and meeting children's mental health and social and emotional needs.

Services for pregnant women. Not Applicable

Healthy and safe environments. The monitoring review assessed whether your program has implemented a process for monitoring and maintaining healthy and safe environments.

The review determined the following:

-  Your program does not have a system of management that ensures that your classrooms, centers and facilities provide healthy and safe environments for all children
-  Your program ensures that all staff, consultants, contractors, and volunteers use positive strategies to support children's well-being.
-  Your program has ensured that no child was released to an unauthorized adult at any time.
-  Your program ensures that all individuals employed by the Head Start agency have the required criminal record check prior to becoming employed by the agency.

Area of Noncompliance 1302.47(b)(1)(iii)(ix)

Timeframe for Correction: 120 days

1302.47 Safety practices. (b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with 1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety. The system must ensure: (1) Facilities. All facilities where children are served, including areas for learning, playing, sleeping, toileting, and eating are, at a minimum: (iii) Free from pollutants, hazards and toxins that are accessible to children and could endanger children's safety; (ix) Kept safe through an ongoing system of preventative maintenance.

The grantee did not consistently ensure facilities, including areas for learning, playing, sleeping, and eating were free from hazards accessible to children and did not keep facilities safe through an ongoing system of preventative maintenance. At the time of the review, the grantee's system was not adequate to ensure child safety at the grantee's South City Head Start Center.

During the onsite explorations, a number of obvious safety concerns were overlooked using this system. Within the South City Head Start Center, a water fountain basin used regularly was found to have significant mildew buildup. Additionally, the air conditioning vents inside of classroom two showed signs of rust and flaking. In the same classroom, one counter drawer was observed to have nails protruding from the bottom low enough for children to access in an area where nap mats were placed during rest time. The grantee indicated that daily checklist forms were used at each center to identify and report safety and maintenance issues both within the classroom and on the playground; the system in place required teachers to submit these forms prior to submitting them to their managers. The Early Childhood Education Manager also explained the monitoring of health and safety varied across centers; some of the Center Directors monitored teachers as they completed daily checklists, while others elected to check classrooms themselves prior to signing the checklist forms; however, neither hazard was identified using the grantee's current system, and as a result, endangered the safety of children enrolled in the program.

The grantee did not ensure the playground at the South City Head Start Center was free of all safety hazards. The outdoor climbing structure used during playtime had significant rust damage. Additionally, deterioration of two conjoined plastic tunnels on the outdoor play structure caused them to connect unevenly, creating a hole in the

play equipment large enough for a child to become entangled in the uneven sides. The absence of ongoing preventative maintenance to the program's outdoor equipment created an unsafe playground environment for enrolled children.

2. Family and Community Engagement Program Services

This section indicates your program's performance in the following Family and Community Engagement Services: integrating family engagement into all systems and services; creating responsive program environments; and identifying family needs and making progress toward individual family outcomes.

Family and Community Engagement Services Performance Summary

Performance Area	Performance Status
Family and Community Engagement Service Delivery	
Integrating family engagement into all systems and services	✓
Creating responsive program environments	✓
Identifying family needs and making progress toward individual family outcomes	✓
Program Management*	
Program management structure	✓
Ongoing oversight and continuous improvement of family and community engagement services	✓
Hiring, supervising, and developing family and community engagement staff	✓
Financial Management*	
Adequacy of resources for family and community engagement services	✓

* Program and Financial Management data is only presented in this summary table; no narrative text is provided in the sections that follow. See Section II for narrative description of grantee Program Management and Financial Management performance.

Performance Area Summary

Integrating family engagement into all systems and services. The monitoring review found your program integrates family engagement and support strategies into all systems and demonstrates progress in providing quality program services to support family well-being and promote school readiness.

Creating responsive program environments. The monitoring review found your program creates welcoming, culturally, and linguistically responsive program environments.

Identifying family needs and making progress toward individual family outcomes. The monitoring review found your program collaborates with parents to identify strengths and needs and make progress toward individual family outcomes.

--- End of Report ---

Family and Community Engagement Manager

Monthly Monitoring Report – April 2018

Requirement	Franklin	Jefferson	Mabry	Royal	South City	Total
PROGRAM STATUS (Monthly)						
Number of Students Enrolled for Month	17	34	82	57	187	377
Number of Student Withdrawals for Month	0	0	0	0	1	1
Number of Vacancies	0	0	0	0	1	1
Number of Students on Wait List	1	0	14	22	26	63
Number of VPK Students Enrolled	N/A	12	20	32	85	149
Number of School Readiness Students Enrolled	N/A	2	14	11	36	63
FAMILY STATUS						
Number of Family Needs Assessment	17	34	82	57	187	377
Family Partnership Agreement						
Number of FPA Initiated (45)	17	34	82	57	187	377
Number of FPAs in progress (February)	16	33	81	54	184	368
Number of FPAs completed (May)						

Head Start Enrollment and Attendance		
Center	Funded	Enrollment on 4/30/18
Franklin	17	17
Jefferson	34	34
Mabry	82	82
Royal	57	57
South City	188	188
Total	378	377
		87%

Family and Community Engagement Manager

Monthly Monitoring Report – April 2018

Number of Referrals (Review referrals)	Franklin	Jefferson	Mabry	Royal	South City	Total
Emergency Assistance (Food, shelter, clothing)	4	7	11	9	21	52
Domestic Violence Referrals	0	0	0	0	0	0
Substance Abuse Referrals (prevention or treatment)	0	2	0	0	1	3
Child Abuse or Neglect Referrals	0	0	0	1	2	3
Assistance for incarcerated Family Members	3	1	2	1	2	9
Education Referral	0	1	2	2	3	8
Employment	1	1	1	2	4	9
Parent Meetings/Trainings						
Parent Committee Meetings	0	0	0	0	0	0
Number of Parents at the Parent Committee Meetings	0	0	0	0	0	0
Number of Male Parents at Parent Committee Meetings	0	0	0	0	0	0
Number of parents Committee meetings attended (Family Advocate)	0	0	0	0	0	0
Number of Parents Committee meetings attended (Parent Engagement Coordinator)	0	0	0	0	0	0
Number of Parents in attendance on Policy Council	1	0	1	2	2	6
Number of Coordinated Trainings for Policy Council	0	0	0	0	0	0
Number of Parenting Classes	0	0	0	0	0	4
Number of Family Activities/Events Coordinated	0	0	0	0	0	1
Number of Family Activities Specific to Male Engagement						1
Number of Parent Trainings Conducted						0
Number of Volunteer Orientations						0
Home Visits	Franklin	Jefferson	Mabry	Royal	South City	
Required Home Visit Follow up (February)						
Number of Additional Home Visits/Meetings						
Number of Contacts documented in Case Notes	7	12	17	19	52	107
Number of Contacts documented per absenteeism	4	7	10	6	25	52

Family and Community Engagement Manager

Monthly Monitoring Report – April 2018

Number of Files Reviewed	0
Review of Parent Board	1
Volunteers (PEC)	
Number of Volunteers	38
Total of Program In kind	67 hours
FAMILY AND COMMUNITY	
Family Advocate Workers Meetings	1
Family Advocate Workers Trainings	1
Community Meetings	0

Transportation	
Field Trips	
Maintenance	0
Trainings	0

Family and Community Engagement Manager
Monthly Monitoring Report – April 2018

HEALTH SPECIALIST		Total
PRE-ENROLLMENT REQUIREMENTS		
Up to date immunizations		365
Expired/Missing immunizations		5
Up to date Physicals		360
Expired/Missing Physicals		10
Number of individual Health Care Plan		14
Number of Children with Health Insurance		365
ENROLLMENT		
Number of children with dental home		246
Number of dental home referrals		0
Completed dental exams		246
Incomplete dental exams		126
Needed dental treatment		26
Receiving dental treatment		16
Completed dental treatment		9
Number of medical home		360
Number of medical home referrals to Advocates		0
45 DAYS REQUIREMENT		
Vision screenings		344
Vision referrals		0
Hearing screenings		304
Hearing Referrals		0
Growth Assessment		361
BMI Referrals		0

Family and Community Engagement Manager
Monthly Monitoring Report – April 2018

90 DAYS REQUIREMENT		Total
Number of dental home established		246
Number of dental exams		246
Number of children requiring dental treatment		26
Number of completed dental treatment		9
Number of medical homes established		360
Hematocrit/Hemoglobin		161
Blood lead		182
Blood Pressure		314
NUTRITION		
Number of Breakfast		5,942
Number of Lunch		6,178
Number of PM Snacks		5,599
Number of Children with Special Diets		12
MONITORING ACTIVITIES		
Health Files Review		0
Child Care Food Program Tool		1
Kitchen Inspection Tool		1

Family and Community Engagement Manager

Monthly Monitoring Report – April 2018

Corrective Action and Follow Up	
Funded Enrollment.	<ul style="list-style-type: none"> We are in compliance with our funded enrollment number of 378
Attendance.	<ul style="list-style-type: none"> We met the required Average Daily Attendance of 85% as a program for the month of April. Although as a program we met the required ADA for February, Jefferson County (82%) failed to meet the required ADA again.
Program Information Report	<ul style="list-style-type: none"> Data must be updated in ChildPlus. Information will be updated at each Head Start center by the Family and Community Engagement Team reviewing each file and entering necessary information. A schedule was set for information to be completed by May 31, but more time will be needed to complete this task.
Strengths	
	<ul style="list-style-type: none"> Continuing to develop new Family Outcomes that will be implemented into the Parent, Family and Community Engagement Framework. Piloting live attendance at Louise B. Royal Head Start Center The ability to provide LIHEAP and other emergency services at each Head Start Center with the presence of a Family Advocate One hour calls to parents who have children that are unexpectedly absent are improving attendance at all centers. The ability to fill slots at centers late in the year, since Head Start requires grantees to continue to enroll children through the end of school. More families are enrolling to return to Head Start.

Family and Community Engagement Manager Monthly Monitoring Report – April 2018

Areas of Concerns and Barriers	
Building and obtaining wait lists in Franklin and Jefferson counties.	
Filling funded enrollment slots in all Head Start Centers at the end of the school year.	
Obtaining lead, hemoglobin, hematocrit and dental exams from families.	
Entering data into ChildPlus to update PIR information	
Filing documents at centers, maintaining files at the centers	
Providing School Readiness and VPK at one location is a concern to families	
Professional Development	
Bi-weekly management and team meetings	
Management Team Meetings	

Family and Community Engagement Manager Monthly Monitoring Report – April 2018

Manager Monitoring Activities
Verifying Head Start eligibility for all families enrolling in the program for the 2017-18 and 2018-19 school years.
Ensuring documentation in ChildPlus is current to ensure PIR information is correct.
Reviewing Child Care Food Program monthly reports.
Entering attendance in ChildPlus

Submitted by: Darrel James

Date:

Quality Counts

May 2018



Vital Statistics

(Pulled May 15, 2018 beginning @ 1219 hours for April 1-30, 2018)

Enrollment

Compliance

YES

Current Enrollment

378

Cumulative Enrollment

432

Disability Services

(Reports 2001 & 2005)

Compliance

YES

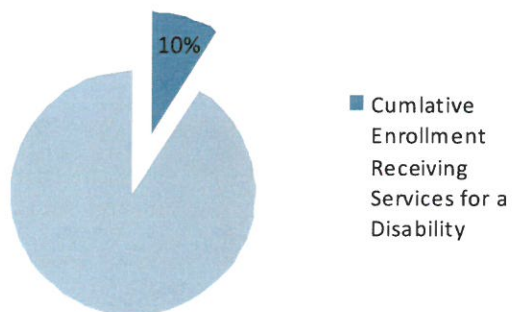
Students with Disabilities

38

Students with Concerns

29

Disability Services



NOTES:

Per the Head Start ERSEA review protocol, programs are expected to reach the 10 percent requirement at any point during the program year. For reviews occurring between October and December, the program must have reached 10 percent at some time during the previous program year. For reviews occurring between January and September, the program must have reached 10 percent at some time during the current program year.

May 2018

Attendance

Compliance

YES

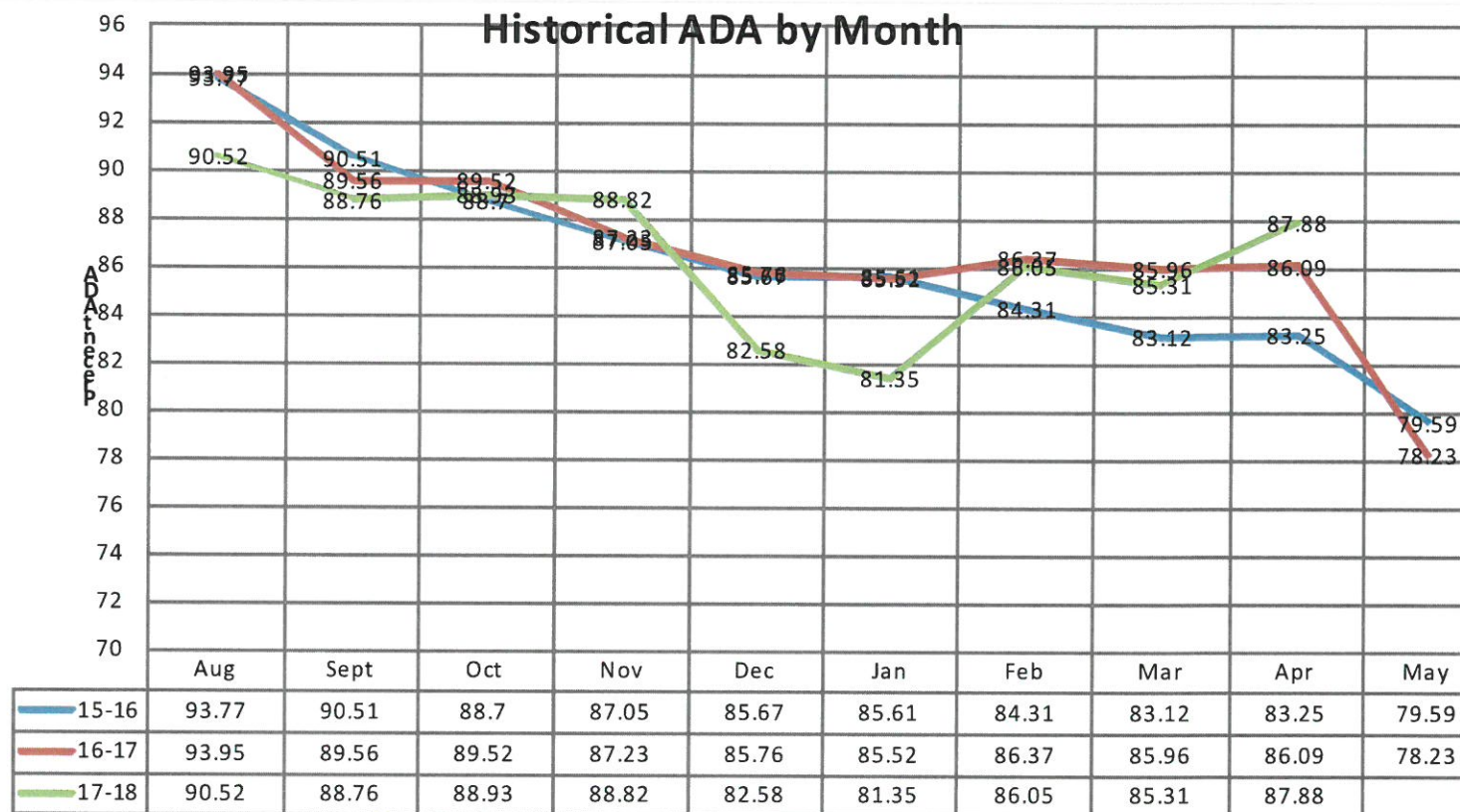
Funded Attendance

85.75

Actual Attendance

87.88

Historical ADA by Month



NOTES:

- 2017-2018 April attendance is higher than the historical average for this 5 year grant cycle.
- At this point in the school year 130 students have been absent for between 10% and 20% of the days offered to them and are at risk of missing 10% of the program.
- At this point in the school year 79 students have been absent for more than 20% of the days offered to them and are at risk of missing 20% of the program. (Report 2336 or 2306).

(Pulled May 15, 2018 beginning @ 1219 hours for April 1-30, 2018)



Program Health Indicators

Health Requirements

Regulation	Requirement	PIR Report #	PIR Data	+/- Last Month	CP Report #	CP Data	+/- Last Month
1302.42(a)	Health Insurance	9706	380 (88%)	N/A			
1302.42(a)	Medical Home	9707	305 (71%)	N/A	3021	295 (68%)	N/A
1302.42(b)(1)(i)	Immunizations (at end)	9708 & 9760	375 (87%)	N/A	3330	375 (87%)	N/A
DCF 65C-22	Physicals (Enrollment Status: Enrolled, Dropped, Drop/Wait, Drop/Accept, Completed Event Types: (selected); Statuses: (selected); Show Events: non-expired)				3035	395 (91%)	N/A
1302.33(a)(1) 1302.42(b)(2)	Developmental, sensory, behavioral Screenings (cumulative new enrollment)	9700	269/ 301 (89%)	N/A			
1302.42(b)(1)(i)	Early and Periodic Screening, Diagnostic and Treatment (EPSDT) (Non-Expired/Missing at Enrollment)	9711	143 (33%)	N/A			
1302.42(b)(1)(i)	Dental Exam	9708	77 (18%)	N/A	3035	168 (39%)	N/A
1302.42(b)(1)(i)	Dental Home	9708	321 (74%)	N/A	3021	209 (48%)	N/A
1302.42(b)(1)(i)	Height/Weight (BMI)-EPSDT	9760	415 (96%)	N/A	3035	404 (93%)	N/A

Key

- N/A= Not Applicable / Data not captured in that format/No recorded previous Month
- NC=No Change
- EPSDT: Physical, Immunization, Hemoglobin/Hematocrit, Immunizations, and Lead

(Pulled May 15, 2018 beginning @ 1219 hours for April 1-30, 2018)

Incident Accident Reports

Incidents Added This Month

38

Students Involved This Month

36

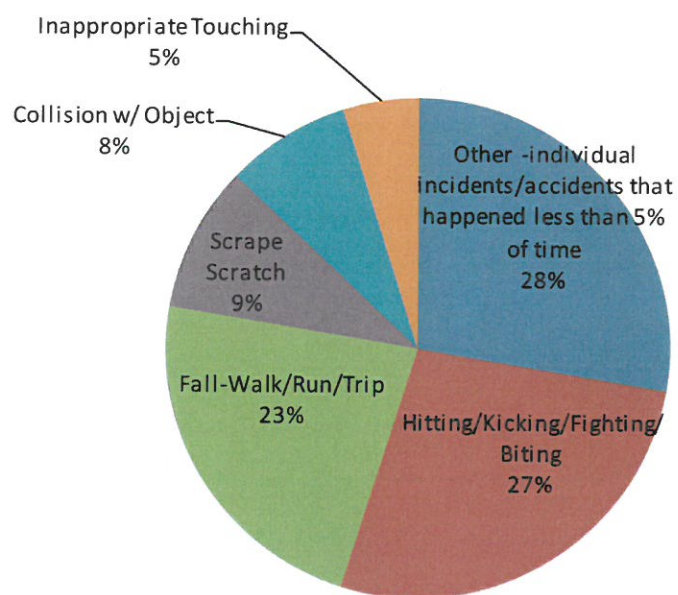
Incidents after 2:00pm

12

Cumulative 17-18 Incidents

320

Cumulative Incident /Accidents by Percent



This graphic only represents 70% (224/320) of the incidents/accidents that happened this year. Incidents entered for a previous month after the QAM monthly report is generated are not included in the graphic.

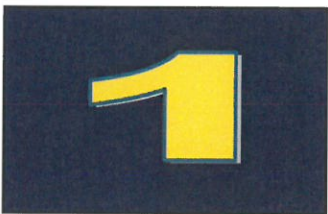
(Report 2132)

Depart of Children & Families Violations

Inspections This Month



Violations This Month



Cumulative 17-18 Violations



(DCF Inspection Reports)

Quality Counts May 2018 Narrative

Vital Statistics

Enrollment

Community Action's deliverable enrollment is 378. The current actual enrollment for April 2018 was 378. We meet this deliverable for April 1-30, 2018 according to data recorded on Child Plus Report 2001.

Community Action's cumulative enrollment is 432. Our cumulative enrollment was 435 for the 2016-2017 school years. Office of Head Start does not have a maximum cumulative enrollment. However in the event that our cumulative enrollment exceeds 435 causes of turn over should be examined in more detail as the amount of turnover would exceed our three year historical average.

Disability

Ten percent of the funded enrollment for Community Action is 37.8 or 38 students. Per the Head Start ERSEA review protocol, at this point in the program year, the program must have reached ten percent at some time during the current program year. The current number of students with diagnosed disability that attended at least one day August 2017 through April 2018 was thirty-eight as of April 30, 2018.

The Community Action teaching staff has currently identified 29 additional students with disability concerns. The Special Service Coordinator has added the students identified by the teaching staff to the list of students with disability concerns; however, the local education authority has to diagnose the students for the students to count towards Community Action's ten percent disability requirement. Students with identified concerns, but not diagnosed disabilities receive individualization and/ or special services while awaiting screening by the local education authority. Based on the current numbers at the time of this report we are meeting the deliverable for this requirement.

Attendance

The average actual attendance percentage for Community Action students is 87.88%. The April 2018 actual attendance is above the three year historical average for April. The threshold for compliance is 85%. We meet this deliverable for April 1-30, 2018 according to data recorded on Child Plus Report 2301.

Child Plus Report 2335, Attendance Works Chronic Absence Charts, indicates three year old students were absent more than four year old students. The report also shows that fifty-two percent of the three year old enrollment was absent for more than 10% of the days offered. Due to the impacts that attendance can have on child outcomes and CLASS scores, the program may wish to re-emphasize the importance of attendance with returning families before next school year.

Program Health Indicators

Health Requirements

The Health Services Coordinator, the Quality Assurance Manager, and the PFCE Manager worked together to update the health requirement reporting. The goal of this new format is to make sure the regulations and the corresponding requirements remain clear, but allow the data to be distinguished by intended use. Thus the PIR (Program Information Report) numbers which are required as a part of our annual report to HHS are distinguished for comparison from the data used for internal monthly reports.

During the 2016-2017 Self-Assessment process the program identified ensuring up-to-date child health status as an area of concern. As a result of the 2016-2017 Self-Assessment findings the program set a goal to, "Increase the number of children meeting 90 day health screening requirements (dental exam, hematocrit/ hemoglobin and blood lead screenings) by 20% (245 from to 294). Hence the Family and Community Engagement Manager, the Health Services Coordinator, and the Quality Assurance Manager have placed additional emphasis on health program requirement monitoring during the 2017-2018 school year to monitor progress towards meeting our goal. As of April 30, 2018, the program is on track to have 285 children meeting the 90 day health screening requirements on May 31, 2018. We are currently 9 students away from meeting our goal. As of April 31, 2018 we have already realized a 16.5% increase in students meeting 90 day health screening requirements when compared to the May 2017 numbers.

Incident Accident Reports

During April 2018, 38 new incident/accident reports involving 36 children were added into Child Plus. We have had 320 cumulative incident/ accidents during the 2017-2018 school year. The majority of incident/ accidents happened before 2:00pm and/ or while the children were outside. The majority were incidents were trip/falls or biting/hitting/kicking/ fighting. Based on the types and location of the incidents/ accidents it is recommended that playgrounds be examined for trip hazards and we consider training teachers to better implement Conscious Discipline structures on the playground (<https://consciousdiscipline.com/free-resources/shubert/playground/>).

Department of Children and Family Violations

During March 2018 we had one DCF inspection. There was one violation found at South City. The area of non-compliance has been corrected.

Targeted Monitoring

Targeted monitoring was not conducted in April 2018. Instead focus was placed on the self-assessment and analyzing historical CLASS data.

Key

Green= Compliance

Orange=Area of concern/ Potential for Concern

Red= Non-Compliance

Capital Area **Community Action** Agency

CHIEF EXECUTIVE OFFICER REPORT MAY 2018

Administrative

- Developing budgets to accommodate performance-based increases.

Impact: Better benefits for staff. Better fiscal accountability.

Programmatic

- *Getting Ahead in a Just-Gettin'-By World/Staying Ahead*
 - Transition Ceremonies – raised more than \$1,500 – client moving to Staying Ahead
 - New Classes being recruited
- Case Management – Two new hires for Gadsden and Wakulla Counties.
- Head Start – Danya has requested next school year calendar for Focus Area 1 monitoring.

Impact: Redesigning entitlement programs to toward more independency services.

Communications and Outreach

- Maintain regular meeting schedule with Jim McShane, CareerSource Capital Region.
- Working with Representative Loranne Ausley, ELC, LCSD, City and County on Community School for Southside of Tallahassee
- Working with Whole Child Leon for development of high quality early child care framework for Leon County

Impact: Developing the infrastructure necessary to support the Agency mission

Resource Development

- Reaching out to funders for the Golden Apple Gala to honor Head Start employees.
- Need serious focus on Board member recruitment.

Impact: Broaden the community network supporting the Agency efforts and services.

Florida Association for Community Action Board

- FACA Annual Conference – May 14-18 - Tampa

Out of Office

- June 27-28 – Vacation – Orlando
- July 18-19 – Vacation – Orlando



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Upcoming Events

- Florida Head Start Association Leadership Florida Annual Meeting – June 14-17 – Sarasota
- CAPLAW Annual Conference – June 20-22 – Albuquerque
- Tallahassee Chamber of Commerce Annual Community Conference – August 10-12, 2018 – Amelia Island
- Annual Community Action Partnership Conference – August 27-31 - Denver

Capital Area Community Action Agency committed to reducing poverty



Amber Tynan
Guest Columnist

Having worked in the nonprofit sector the last 13 years, I have been privy to the incredible work of our local agencies serving our neighbors and community across all areas of need on a daily basis.

And while I may not know the mission of all 2,000+ nonprofit organizations in Leon County, I have great faith that the needs of our community are well represented and/or supported by the programs and services available in providing a safety net for our community. Even still, the needs far outweigh the resources we have available which makes programs like the one in this article even more special.

Because of my experience within the sector, it's always telling when I learn something new about what resources exist to enhance the quality of life for those who live here and how the breadth of the work nonprofits do collectively as a sector is not widely known or celebrated. Just last week, I had the opportunity to attend the Getting Ahead in a Just-Gettin'-By World Transition Ceremony as a guest of Tim Center, CEO of the Capital Area Community Action Agency that sponsors the initiative.

While I am familiar with this agency, I was not aware of the comprehensive system they have created to reduce poverty with programs like Getting Ahead. Coming into the evening, I was curious how the program was structured and designed to assist in reducing poverty especially when we live in a world where systematic barriers will always exist. Two of the most prevalent of these systemic barriers are isolation and lack of social mobility; both of which are evidenced in our local communities. Inadequate transportation prevents people from accessing jobs, education, and housing that can provide upward mobility.

Food deserts prevent people from getting adequate nutrition which is a factor in work performance, illness, and school attendance. And so, the cycle of poverty is reinforced, and opportunities to break generational poverty are harder to address. The poverty line is defined for a family of three as an annual income of just under \$21,000. More than 28 percent of our neighbors in the City of Tallahassee live at or below the poverty



Left: Melissa Watson, Getting Ahead Program Coordinator. Right: Tim Center, CEO of the Capital Area Community Action Agency that sponsors the Getting Ahead in a Just-Gettin'-By World Transition initiative.

PHOTOS SPECIAL TO THE DEMOCRAT



line. The figure is 22% for Leon County. Both are higher than the national rate of 14%.

What's more is we are experiencing an increased population of citizens who work hard and are above the poverty line, however due to high costs and factors often beyond their control, struggle to live paycheck to paycheck. For many, a small emergency can quickly become a major financial crisis. Car repairs and health care emergencies, to name just a few, can plunge these working families over the edge into poverty and financial chaos. When this happens, families, employers, and our economy suffer. According to the 2017 ALICE Report, 41% of all households in Leon County are below the ALICE threshold (including those living in poverty).

ALICE is an acronym for Asset Limited, Income Constrained, Employed — households that earn more than the Federal Poverty Level, but less than the basic cost of living for the county. This means, 41% of our total population struggles to afford basic needs.

In Jefferson County, where the participants of the Getting Ahead transition ceremony live, 49% of all households are below the ALICE threshold. Community conversations that help create long-term solutions in assisting to break the cycle of poverty, alongside access to programs like Getting Ahead, are paramount to ultimately addressing the barriers so many of our neighbors face in their quest for financial stability.

Getting Ahead, a research-based anti-poverty workshop developed by Dr. Ruby Payne and Phil DeVol based on the Bridges Out of Poverty concept that dis-

sects the overarching idea that people in poverty are experts in their own situation. Too often people living in poverty are caught in the tyranny of life without the resources to get ahead.

The defining factor though is that through this 15-week course, productive dialogue takes place outlining and addressing the realities of the conditions in our community and how they specifically impact us no matter our economic class. During the ceremony, we were introduced to Melissa Watson, the Getting Ahead Program Coordinator who is an absolute dynamo.

Her passion and commitment was evident as she dedicates countless hours with each class of the participants across multiple counties; working with them to discover why poverty exists and discussing what resources each would need to move out of poverty and successfully transition to self-sufficiency independent of public assistance. While the program does not provide answers or arguments for change, it instead fosters innate characteristics for motivation, insight and planning from those who participate as they assess the potential consequences of their previous decisions and how they may have adversely affect their lives.

People in poverty are not problems but problem solvers.

Of the twelve participants being celebrated that evening, five were called to share the growth they experienced personally as a direct result of what they learned in the program; there was not a dry eye in the fellowship hall. Each story we heard was truly moving because everyone present could relate to the strug-

gles, obstacles and setbacks they've witnessed in their lives — sometimes feeling like a direct narrative or excerpt from our own similar experiences (myself included).

Each participant I had the chance to meet correlated their current and future successes to gaining access to resources and bridging their social connections to attain the life they always dreamed of. Each testimony had its own version of struggles and adversity, yet every single participant was leaving with hope for their future while actively pursuing incredible things to see success on their terms. I was honored to have had the chance to sit next to Ola Sheffield, a participant who couldn't wait for the road ahead.

She literally beamed with her warm and bright smile, yet she had this fragility about her that spoke to the hard road she endured in her past. It was kismet we sat together because she turned to me and said, "with anything we go through in life, we are always better together," a philosophy and credo I adopted years ago.

Sheffield is already making plans to participate in the Staying Ahead program designed to help support the individual's education, job training, and job placement needs based on the goals and visioning they prepared for in their Getting Ahead sessions. She shared that she wants to complete the next phase of the program so that she, too, can pay it forward for other future participants because we are always better when we work together.

My sincere gratitude to Tim, Melissa and the entire Capital Area Community Action Agency team for the work you do and the role you play in providing hope for so many in our community. This program gives me great hope for the good work happening in our community, specifically focused on helping those living in poverty reach their fullest potential.

If you're interested in learning more, becoming involved or supporting programs like Getting Ahead, visit <http://capitalareacommunityactionagency.com/>. Together, we can engage in equipping low-income families with the tools and resources they need to think about and develop their future story.

Amber Tynan is the Executive Director for United Partners for Human Services. If you would like to feature the good works of your human services agency in action, please email Amber R. Tynan at amber@uphsfl.org.

Jefferson County residents are “Getting Ahead” in life

Ashley Hunter, ECB Publishing, Inc.

On Friday, April 27, 11 women were recognized and honored at the Getting Ahead Transition Ceremony. Getting Ahead, a program created and operated by the Capital Area Community Action Agency (CACAA) and coordinated by Melissa Watson, is the stepping stool many men and women need in order to achieve a higher education, a career path goal or provide a better way of life for their families.

At the ceremony banquet, CACAA CEO Tim Center opened up the program with an introduction and welcome to those who had gathered to celebrate the program and its 11 graduates, before Center handed the floor to Program Coordinator Melissa Watson.

The Getting Ahead Program lasts 15 weeks and requires participants to meet once a week for two and half hours in a meeting where they expanded their minds, grew outside of the social box, and aspired for greatness.

But before that could happen, before they could get to where they want to go, the participants need to understand where they are coming from.

The program starts out by having the participants identify what poverty looks like in the community and for individuals.

"Poverty is a lack of resources, of not having enough and not just financially," said Watson, explaining that poverty manifests itself in the emotional, physical and spiritual aspects of people's lives. "For people who have



The graduates of the Getting Ahead program were the focus of the night as they shared their journey with the program, the steps they have made in bettering themselves and their families as well as their future goals for a lifetime of success. In the front, pictured from left to right, are: Melissa Watson (Getting Ahead Program Coordinator), Devonna Arnold, Kimberly Morris, Ashley Gilley, Lariesha Wilson, Nina Miller, Lachandra Crumity, Krystal Farmer, Ola Sheffield, Faydra Bradley, and Jennie Simmons. In the back, is Tim Center (CEO of Capital Area Community Action Agency) and Derrick Jennings. Not pictured is graduate Nathresa Scott.

a lack of resources, it is very hard to come out from behind the daily struggle of what they are dealing with."

Through identifying the real face of poverty, Getting Ahead participants are also expected to identify the daily struggles that poverty creates within a person's life; it is those things that prevent a person from thinking ahead, laying down achievable goals and furthering their education and lifestyle. "Poverty is not about race, it is about humans who are struggling to get by each and every day," said Watson.

After recognizing what poverty is, the participants learn the theory of change, which aims to transform their current mindset into one that thinks beyond immediate needs and inspires them to think outside of the box.

"[Getting Ahead] is about changing a mindset," said Watson. "This is not a miracle. It is about igniting a switch that was already there."

Despite Watson's denying the miraculous nature of the program, to some of the participants, Getting Ahead has been a guardian angel to them.

During a testimonial session of the evening, with the 11 graduates coming up to the podium to share the life changing aspects of the program, all speakers were emotional and intense in their praise of the program.

Getting Ahead has helped the women return to college, enter the professional field of their dreams, taught them how to manage their personal lives, given them a focus, strengthened their walk as a parent and shown them how to turn "I wish" into "I will".

The program also brought a group of women, formerly strangers, together into a tightly knit support group where they rally around one another and



ECB Publishing, Inc. Photo By Ashley Hunter, April 27, 2018

Tim Center, the CEO of the Tallahassee-based Capital Area Community Action Agency, of which Getting Ahead is a program of, opened up the evening with the introduction and welcome to all who had gathered to help the graduates celebrate the completion of their program.



ECB Publishing, Inc. Photo By Ashley Hunter, April 27, 2018

Lariesha Wilson was one of the honored graduates on the Friday, April 27 transition ceremony for the Getting Ahead participants. Wilson provided her testimony, sharing that the program helped give her structure in her life, and helped her return to college. Wilson plans on joining the second step program, Staying Ahead through the next stage of her life.



ECB Publishing, Inc. Photo By Ashley Hunter, April 27, 2018

Melissa Watson, the Getting Ahead Program Coordinator provided an overview of the class and shared the basics of the Getting Ahead program and what it aspires to accomplish in the lives of the participants who engage in the program with the hopes of furthering their advancement.

ECB Publishing, Inc. Photo By Ashley Hunter, April 27, 2018

Extra Facts

- 95 people from Jefferson County have participated in the Getting Ahead Program.
- Of those 95, 40 have not returned to the program following their graduation. Of those 40, 13 have not returned due to being above the income bracket and are now achieving self sufficiency.
- 3 of the 40 have completed their BA Degree following the Getting Ahead Program.
- 1 of the 40 has achieved their Masters Degree following the Getting Ahead Program.

encourage each other to continue doing their best.

Returning to the podium, Tim Center issued the closing remarks, and stressed his pride in all of the women who had graduated that evening from the 15-week Getting Ahead program. "It is about staying ahead in life," said Center.

In this land of opportunity, Getting

Ahead has offered people a way to advance and better the lives they live and the lives of their children.

Congratulations to Getting Ahead graduates, Devonna Arnold, Kimberly Morris, Ashley Gilley, Lariesha Wilson, Nina Miller, Lachandra Crumity, Krystal Farmer, Ola Sheffield, Faydra Bradley, and Jennie Simmons and Nathresa Scott!

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