



# SACRAMENTO CITY UNIFIED SCHOOL DISTRICT BOARD OF EDUCATION

Agenda Item 11.2

**Meeting Date:** February 2018

**Subject:** Head Start / Early Head Start / Early Head Start Expansion Reports

- Information Item Only
- Approval on Consent Agenda
- Conference (for discussion only)
- Conference/First Reading (Action Anticipated: \_\_\_\_\_)
- Conference/Action
- Action
- Public Hearing

**Division:** Academic Office / Child Development

**Recommendation:** None

**Background/Rationale:** The Office of Head Start, under the auspices of the U.S. Department of Health and Human Services/Administration for Children and Families, mandates that all Head Start/Early Head Start governing entities receive specified reports related to the operational and fiduciary status of the program. These reports must include information and/or a status update in the followings areas: budget, credit card usage, USDA meals/snacks, enrollment, and program updates or summaries, if applicable. Attached, are essential monthly reports for Board members' review.

**Financial Considerations:** None

**LCAP Goal(s):** College and Career Ready; Family and Community Empowerment

**Documents Attached:**

1. Head Start/Early Head Start Monthly Report Summary
2. Child Development December 2017 Fiscal Report – Head Start Basic
3. Child Development December 2017 Fiscal Report – Head Start T/TA
4. Child Development December 2017 Fiscal Report – Early Head Start Basic
5. Child Development December 2017 Fiscal Report – Early Head Start T/TA
6. Child Development December 2017 Fiscal Report – EHS CCP Basic
7. Child Development December 2017 Fiscal Report – EHS CCP T/TA
8. EHS MCQI report

**Estimated Time of Presentation:** N/A

**Submitted by:** Iris Taylor, Chief Academic Officer  
Jacquie Bonini, Director, Child Development,

**Approved by:** Jorge A. Aguilar, Superintendent

**Attachment 1  
Head Start / Early Head Start  
Monthly Report Summary  
February 2017**

**Budget Reports**

HS, EHS, CCP December 2017

**Credit Card Statements**

None at this time

**Enrollment Report for December 2017**

<b>Head Start Enrollment</b>	
Funded Enrollment	1139
Actual Enrollment	1110
Percentage of Actual Attendance	86%

<b>Early Head Start Enrollment</b>	
Funded Enrollment	152
Actual Enrollment	152
Percentage of Actual Attendance	80%

<b>Early Head Start Expansion Enrollment</b>	
Funded Enrollment	40
Actual Enrollment	40
Percentage of Actual Attendance	70%

**Enrollment Report for January 2018**

<b>Head Start Enrollment</b>	
Funded Enrollment	1139
Actual Enrollment	1118
Percentage of Actual Attendance	83%

<b>Early Head Start Enrollment</b>	
Funded Enrollment	152
Actual Enrollment	149
Percentage of Actual Attendance	75%

<b>Early Head Start Expansion Enrollment</b>	
Funded Enrollment	40
Actual Enrollment	40
Percentage of Actual Attendance	71%

**Disabilities Report for December 2017**

Head Start	90
Early Head Start	19
EHS Expansion	4

**Disabilities Report for January 2018**

Head Start	90
Early Head Start	16
EHS Expansion	4

Attachment 2

**SETA MONTHLY FISCAL REPORT**  
 925 Del Paso Blvd., Suite 100, Sacramento, CA 95815  
**R5210**

Month: December 1 - December 31, 2017

Agreement No.: 18C5551S0

Delegate: SCUSD - Child Development Department

Program:  PA 22 HS BASIC R5210

Remit to address General Accounting Department - 802A

PA 20 BASIC T/TA

5735 47th Avenue

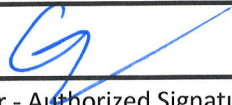
PA 25 EHS

SACRAMENTO, CA 95824

PA 26 EHS T/TA

OTHER

Cost Item	Actual Expenses		* Current Budget	Unexpended Balance
	Current Period & Adjustments	Cumulative To Date		
I. Personnel	24,920.42	127,116.98	348,346.00	221,229.02
Fringe Benefits	3,169.37	16,033.32	225,560.00	209,526.68
Travel	0.00	0.00	0.00	0.00
Equipment	0.00	0.00	0.00	0.00
A Supplies	63.11	185.86	4,687.00	4,501.14
D Contractual	0.00	0.00	0.00	0.00
M Construction	0.00	0.00	0.00	0.00
I Other	65.01	369.66	1,200.00	830.34
N Indirect Costs 4.21%	34,534.17	146,852.05	349,721.00	202,868.95
I. TOTAL ADMINISTRATION	\$62,752.08	\$290,557.87	\$929,514.00	\$638,956.13
Non-Federal Administration				
Total Fed. And Non-Fed. Administration	\$62,752.08	\$290,557.87	\$929,514.00	\$638,956.13
II. Personnel	434,414.05	1,841,578.49	3,941,313.00	2,099,734.51
Fringe Benefits	347,060.26	1,464,169.79	3,337,141.00	1,872,971.21
P Travel	0.00	0.00	0.00	0.00
R Equipment	0.00	0.00	0.00	0.00
O Supplies	1,631.03	7,519.18	261,327.00	253,807.82
G Contractual	0.00	0.00	0.00	0.00
R Construction	0.00	0.00	0.00	0.00
A Other	8,965.74	31,198.81	187,331.00	156,132.19
M				
II. TOTAL PROGRAM	\$792,071.08	\$3,344,466.27	\$7,727,112.00	4,382,645.73
NON-FEDERAL PROGRAM Basic & T/TA				
November	\$383,763.84	\$1,230,588.80	\$2,169,156.00	938,567.20
<b>TOTAL SETA COSTS (I + II)</b>	<b>\$854,823.16</b>	<b>\$3,635,024.14</b>	<b>\$8,656,626.00</b>	<b>5,021,601.86</b>

Gerardo Castillo 	1/17/2018	Shelagh Ferguson	916.643.7878
Chief Business Officer - Authorized Signature	Date	Prepared By	Phone

Attachment 3

**SETA MONTHLY FISCAL REPORT**

925 Del Paso Blvd., Suite 100, Sacramento, CA 95815

**R5212**

Month: December 1 - December 31, 2017 Agreement No.: 18C5551S0

Delegate: SCUSD - Child Development Department Program:  PA 22 HS BASIC

Remit to address General Accounting Department - 802A  PA 20 BASIC T/TA R5212

5735 47th Avenue  PA 25 EHS

SACRAMENTO, CA 95824  PA 26 EHS T/TA

OTHER

Cost Item	Actual Expenses		* Current Budget	Unexpended Balance	
	Current Period & Adjustments	Cumulative To Date			
I. A D M I N	Personnel			0.00	
	Fringe Benefits			0.00	
	Travel			0.00	
	Equipment			0.00	
	Supplies			0.00	
	Contractual			0.00	
	Construction			0.00	
	Other			0.00	
	Indirect 4.21%	0.00	156.61	808.00	651.39
	I. TOTAL ADMINISTRATION	\$0.00	\$156.61	\$808.00	\$651.39
Non-Federal Administration					
Total Fed. And Non-Fed. Administration	\$0.00	\$156.61	\$808.00	\$651.39	
II. P R O G R A M	Personnel	0.00	0.00	0.00	
	Fringe Benefits	0.00	0.00	0.00	
	Travel	0.00	0.00	0.00	
	Equipment	0.00	0.00	0.00	
	Supplies	0.00	0.00	0.00	
	Contractual	0.00	0.00	0.00	
	Construction	0.00	0.00	0.00	
	Other	0.00	3,720.00	19,192.00	15,472.00
					0.00
	II. TOTAL PROGRAM	\$0.00	\$3,720.00	\$19,192.00	15,472.00
NON-FEDERAL PROGRAM Reported on Basic	\$0.00	\$0.00	\$0.00	0.00	
<b>TOTAL SETA COSTS ( I + II )</b>	<b>\$0.00</b>	<b>\$3,876.61</b>	<b>\$20,000.00</b>	<b>16,123.39</b>	
Gerardo Castillo	1/17/2018	Shelagh Ferguson	916.643.7878		
Chief Business Officer - Authorized Signature	Date	Prepared By	Phone		



Attachment 4

SETA MONTHLY FISCAL REPORT

925 Del Paso Blvd., Suite 100, Sacramento, CA 95815

R5213

Month: December 1 - December 31, 2017

Agreement No.: 18C5551S0

Delegate: SCUSD - Child Development Department

Program:  PA 22 HS BASIC

Remit to address General Accounting Department - 802A

PA 20 BASIC T/TA

5735 47th Avenue


PA 25 EHS R5213

SACRAMENTO, CA 95824

PA 26 EHS T/TA

OTHER

Cost Item	Actual Expenses		* Current Budget	Unexpended Balance
	Current Period & Adjustments	Cumulative To Date		
I Personnel	1,592.76	7,963.73	31,474.00	23,510.27
Fringe Benefits	1,654.90	7,723.09	39,518.00	31,794.91
Travel	0.00	0.00	0.00	0.00
Equipment	0.00	0.00	0.00	0.00
A Supplies	0.00	0.00	200.00	200.00
D Contractual	0.00	0.00	0.00	0.00
M Construction	0.00	0.00	0.00	0.00
I Other	0.00	0.00	105.00	105.00
N Indirect Costs 4.21%	6,131.07	28,653.86	72,006.00	43,352.14
I. TOTAL ADMINISTRATION	\$9,378.73	\$44,340.68	\$143,303.00	\$98,962.32
Non-Federal Administration				
Total Fed. And Non-Fed. Administration	\$9,378.73	\$44,340.68	\$143,303.00	\$98,962.32
II. Personnel	80,921.36	385,845.66	867,089.00	481,243.34
Fringe Benefits	59,563.72	271,026.24	727,119.00	456,092.76
P Travel	0.00	0.00	0.00	0.00
R Equipment	0.00	0.00	0.00	0.00
O Supplies	22.60	2,059.25	18,932.00	16,872.75
G Contractual	0.00	0.00	0.00	0.00
R Construction	0.00	0.00	0.00	0.00
A Other	1,875.71	5,996.14	25,913.00	19,916.86
M				
II. TOTAL PROGRAM	\$142,383.39	\$664,927.29	\$1,639,053.00	974,125.71
NON-FEDERAL PROGRAM Basic & T/TA				
November	\$43,912.02	\$146,088.05	\$452,480.00	306,391.95
TOTAL SETA COSTS (I + II)	\$151,762.12	\$709,267.97	\$1,782,356.00	1,073,088.03

Gerardo Castillo		1/17/2018	Shelagh Ferguson	916.643.7878
Chief Business Officer - Authorized Signature		Date	Prepared By	Phone

Attachment 5

**SETA MONTHLY FISCAL REPORT**

925 Del Paso Blvd., Suite 100, Sacramento, CA 95815

**R5216**

Month: December 1 - December 31, 2017

Agreement No.: 18C5551S0

Delegate: SCUSD - Child Development Department

Program:  PA 22 HS BASIC

Remit to address General Accounting Department - 802A

PA 20 BASIC T/TA

5735 47th Avenue


PA 25 EHS

SACRAMENTO, CA 95824

PA 26 EHS T/TA R5216

OTHER

Cost Item	Actual Expenses		* Current Budget	Unexpended Balance	
	Current Period & Adjustments	Cumulative To Date			
I. A D M I N	Personnel			0.00	
	Fringe Benefits			0.00	
	Travel			0.00	
	Equipment			0.00	
	Supplies			0.00	
	Contractual			0.00	
	Construction			0.00	
	Other			0.00	
	Indirect 4.21%	0.00	246.79	1,114.00	867.21
	I. TOTAL ADMINISTRATION	\$0.00	\$246.79	\$1,114.00	\$867.21
Non-Federal Administration					
Total Fed. And Non-Fed. Administration	\$0.00	\$246.79	\$1,114.00	\$867.21	
II. P R O G R A M	Personnel	0.00	0.00	0.00	0.00
	Fringe Benefits	0.00	0.00	0.00	0.00
	Travel	0.00	0.00	0.00	0.00
	Equipment	0.00	0.00	0.00	0.00
	Supplies	0.00	0.00	650.00	650.00
	Contractual	0.00	0.00	0.00	0.00
	Construction	0.00	0.00	0.00	0.00
	Other	0.00	5,861.93	25,800.00	19,938.07
					0.00
	II. TOTAL PROGRAM	\$0.00	\$5,861.93	\$26,450.00	20,588.07
NON-FEDERAL PROGRAM Reported with Basic	\$0.00	\$0.00	\$0.00	0.00	
<b>TOTAL SETA COSTS (I + II)</b>	<b>\$0.00</b>	<b>\$6,108.72</b>	<b>\$27,564.00</b>	<b>21,455.28</b>	

Gerardo Castillo  Chief Business Officer - Authorized Signature	1/17/2018 Date	Shelagh Ferguson Prepared By	916.643.7878 Phone
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**CHILD DEVELOPMENT DEPARTMENT  
SETA MONTHLY FISCAL REPORT**

**R5211**

Month: December 1 - December 31, 2017

Agreement No.: 18C5551S0

Delegate: SACRAMENTO CITY UNIFIED SCHOOL DISTRICT

Program:  PA 3125 EHS-CCP BASIC R5211

Remit to address: GENERAL ACCOUNTING DEPARTMENT - 802A

PA 3120 EHS-CCP T/TA R5221

5735 47TH AVENUE

PA 3128 EHS-CCP START UP R5243

SACRAMENTO, CA 95824

Cost Item	Actual Expenses		* Current Budget	Unexpended Balance
	Current Period & Adjustments	Cumulative To Date		
I Personnel	141.18	698.43	1,726.00	1,027.57
Fringe Benefits	96.18	470.66	1,066.00	595.34
A Occupancy	0.00	0.00	0.00	0.00
D Staff Travel	0.00	0.00	0.00	0.00
M Supplies	0.00	27.56	1,015.00	987.44
J Other	0.00	0.00	105.00	105.00
N Indirect Costs 4.21%	2,551.00	12,760.73	29,076.00	16,315.27
I. TOTAL ADMINISTRATION	\$2,788.36	\$13,957.38	\$32,988.00	\$19,030.62
NON-FEDERAL ADMINISTRATION *				
TOTAL FED & NON-FED ADMIN	\$2,788.36	\$13,957.38	\$32,988.00	\$19,030.62
II a. Personnel**	35,295.58	176,315.64	351,729.00	175,413.36
b. Fringe Benefits**	24,065.89	120,835.52	270,207.00	149,371.48
P c. Travel	0.00	0.00	0.00	0.00
R d. Equipment	0.00	0.00	0.00	0.00
O e. Supplies	0.00	2,631.34	48,557.00	45,925.66
G f. Contractual	0.00	0.00	0.00	0.00
R g. Construction	0.00	0.00	0.00	0.00
A h. Other	994.90	2,126.17	16,245.00	14,118.83
M II. TOTAL PROGRAM	\$60,356.37	\$301,908.67	\$686,738.00	384,829.33
NON-FEDERAL PROGRAM				
Basic 719,726 & T/TA 17,500	\$25,935.52	\$97,002.16	\$184,307.00	87,304.84
November				
TOTAL SETA COSTS (I+II)	\$63,144.73	\$315,866.05	\$719,726.00	403,859.95

Gerardo Castillo

1/12/2018

Shelagh Ferguson

916.643.7878

Chief Business Officer - Authorized Signature

Date

Prepared By

Phone

R5211. August16-17

**SUBSIDIZED SLOTS**

How many subsidized slots are you contractually obligated to retain? 8

How many subsidized slots do you currently have? 8  
100%

If the number of current subsidized slots is less than the contractual obligation, then you must submit the "Subsidy Loss Reimbursement Claim Form" to receive a reimbursement for the lost subsidy.

**CHILD DEVELOPMENT DEPARTMENT  
SETA MONTHLY FISCAL REPORT**

**R5221**

Month: December 1 - December 31, 2017

Agreement No.: 18C5551S0

Delegate: SACRAMENTO CITY UNIFIED SCHOOL DISTRICT

Program:  PA 3125 EHS-CCP BASIC R5211

Remit to address: GENERAL ACCOUNTING DEPARTMENT - 802A

PA 3120 EHS-CCP T/TA R5221

5735 47TH AVENUE

PA 3128 EHS-CCP START UP R5243

SACRAMENTO, CA 95824

Cost Item	Actual Expenses		* Current Budget	Unexpended Balance
	Current Period & Adjustments	Cumulative To Date		
I Personnel	0.00	0.00	0.00	0.00
Fringe Benefits	0.00	0.00	0.00	0.00
A Occupancy	0.00	0.00	0.00	0.00
D Staff Travel	0.00	0.00	0.00	0.00
M Supplies	0.00	0.00	0.00	0.00
I Other	0.00	0.00	0.00	0.00
N Indirect Costs 4.21%	0.00	163.14	707.00	543.86
I. TOTAL ADMINISTRATION	\$0.00	\$163.14	\$707.00	\$543.86
NON-FEDERAL ADMINISTRATION *				
TOTAL FED & NON-FED ADMIN	\$0.00	\$163.14	\$707.00	\$543.86
II a. Personnel**	0.00	0.00	0.00	0.00
b. Fringe Benefits**	0.00	0.00	0.00	0.00
P c. Travel	0.00	0.00	0.00	0.00
R d. Equipment	0.00	0.00	0.00	0.00
O e. Supplies	0.00	0.00	0.00	0.00
G f. Contractual	0.00	0.00	0.00	0.00
R g. Construction	0.00	0.00	0.00	0.00
A h. Other	0.00	3,875.00	16,793.00	12,918.00
M				
II. TOTAL PROGRAM	\$0.00	\$3,875.00	\$16,793.00	12,918.00
NON-FEDERAL PROGRAM				
	\$0.00	\$0.00	\$0.00	0.00
<b>TOTAL SETA COSTS (I+II)</b>	<b>\$0.00</b>	<b>\$4,038.14</b>	<b>\$17,500.00</b>	<b>13,461.86</b>

Gerardo Castillo	1/12/2018	Shelagh Ferguson	916.643.7878
Chief Business Officer - Authorized Signature	Date	Prepared By	Phone

R.5221.16-17

**SUBSIDIZED SLOTS**

How many subsidized slots are you contractually obligated to retain? 8

How many subsidized slots do you currently have? 8

If the number of current subsidized slots is less than the contractual obligation, then you must submit the "Subsidy Loss Reimbursement Claim Form" to receive a reimbursement for the lost subsidy.





## SCUSD EHS Center-based and Home-based MCQI Review

### Monitoring Report Executive Summary

Report Date: November 22, 2017

<b>Program Option:</b> EHS Center-based EHS Home-based	<b>Monitoring Type:</b> Comprehensive Review	<b>Review Period:</b> <b>October 20-November 9, 2017</b>
<b>Program Year:</b> 2017-2018	<b>Number of Files:</b> 8 <b>Number of Centers:</b> 2 <b>Number of Classrooms:</b> 2 <b>Number of Home Visits:</b> 2 <b>Number of Socializations:</b> 1	<b>Monitors:</b> Lorena Correa Cami Saling Linda Letourneaux Melanie Nicolas Staff –in-Training: Sherri Arsften, Linda Thao

#### Strengths:

- Educational (developmental) screenings were completed on time.
- DRDP Assessments and IDP Plans were completed on schedule.
- Home visits exhibited elements of Early Head Start model: parent-child focused; comprehensive, and it was conducted in a manner that is warm, supportive and culturally-sensitive.
- All enrollment applications were accurately verified as income-eligible.
- Evidence of community collaboration
- Overall, classrooms provided safe environment for children’s development and learning.

**Overall Compliance:** Percentage reflects number of indicators marked Compliant over total number of indicators in a program service area.

<b>ERSEA</b>	<b>73%</b>
ERSEA Interview	100%
ERSEA File Review	46%
ERSEA Services	74%
<b>Disabilities</b>	<b>100%</b>
Disability File Review	100%
<b>Education</b>	<b>87%</b>
Education File Review	98%
Classroom Observation	76%
<b>Family Community Engagement (FCE)</b>	<b>72%</b>
FPA Building and Follow Up	76%
Family Community Engagement Facilities	68%
<b>Home-Based Services</b>	<b>74%</b>
Home-Based Program	88%
Socialization	77%
Services for Pregnant Women	58%
<b>Mental Health</b>	<b>86%</b>
Mental Health File Review	86%
<b>Nutrition</b>	<b>59%</b>
Nutrition File Review	45%
Special Diets	50%
Meal Service	82%
<b>Program Design &amp; Management- Human Resources</b>	<b>77%</b>
Staff Licensing Records	62%
Program Training Requirements	75%
Required Safety Training	70%
Staff Qualifications and Competencies	100%
<b>Health</b>	<b>84%</b>
Medications	100%
Health Services File Review	67%
<b>Safe Environments</b>	<b>69%</b>
Required Postings	52%



Safe Environments	72%
Safe Environments- Outside	84%
<b>EHS Safe Environments</b>	<b>70%</b>

### **Areas of Non-Compliance:**

The following indicators within a program service area received compliance rates below threshold. Delegate agency is required to analyze and address systemic causes of non-compliance.

- **ERSEA File Review (Checklist #002)**

*Indicator 4: 25% Compliance*

- Missing information on ERSEA application such as enrollment dates and family information

*Indicator 6: 50% Compliance*

- Parents' Rights, Personal Rights and Child Abuse forms were not signed by parent and/or did not reflect correct facility and address.

*Indicator 10: 12% Compliance*

- Information on Child Plus and application not consistent

- **ERSEA Services (Checklist #011)**

*Indicator 6: 0% Compliance*

- All funded slots were not filled at time of enrollment and at time of review.

- **Health Services File Review (Checklist #003)**

*Indicator 4: 14% Compliance*

- No evidence on how program informs parents on agency policy regarding health emergencies that require rapid response of immediate medical attention. Current policy only addresses children with health care plans.

*Indicator 23: 29% Compliance*

- Incomplete, missing or no up-to-date immunization records in child's file

- Indicator 24: 29% Compliance*
  - Dental health determination dates not entered in Child Plus and/or not in child's file
  - Indicator 29: 14% Compliance*
  - Tracking system for health (child files and Child Plus) is inconsistent and/or has missing information.
- **Nutrition Services File Review (Checklist #004)**
  - Indicator 3: 29% Compliance*
  - Lead risk assessment not completed at time of enrollment
  - Indicator 12: 29% Compliance*
  - No documented follow up on nutrition concerns identified on any health documents
  - Indicator 13: 14% Compliance*
  - Tracking system for nutrition (child files and Child Plus) is inconsistent and/or has missing information.
- **FPA Building and Follow-Up (Checklist #008)**
  - Indicator 7: 29% Compliance*
  - No consistent follow-up documentation on requested services and progress on parent's goal
- **Required Postings (Checklist #012)**
  - Indicator B (3): 0% Compliance*
  - New CACFP Meal pattern was not posted.
  - Indicator A (4): 0% Compliance*
  - New Booster Seat Law was not posted.
  - Indicator A (5): 0% Compliance*
  - CCL Forms LIC 610 and LIC 9148 postings need updated staff information
  - Indicator C (4): 0% Compliance*
  - Onsite evacuation maps not clear for the reader (not marked) or not reflective of correct route.
- **Safe Environments (Checklist #014)**
  - Indicator K (2): 0% Compliance*
  - Bloodborne Pathogen Spill Kits not available and/or expired
  - Indicator L (2): 0% Compliance*
  - Fire extinguishers missing evidence of monthly inspections
  - Indicator M (2): 0% Compliance*



- 3-day supply of emergency food inadequate and/or inaccessible
- **Outside Safe Environments (Checklist #017)**
  - Indicator A (1): 0% Compliance*
    - Regular maintenance (debris, spider webs, etc.) not evident
- **Home Based Program (Checklist #019)**
  - Indicator A (3): 0% Compliance*
    - Majority of missed home visits were not re-scheduled therefore, at risk of not meeting minimum required number home visits for the year.
  - Indicator B (17): 0% Compliance*
    - Tracking system/recordkeeping in child's file not consistent, lacking ongoing follow-up documentation
- **PDM Required Safety Training (Checklist #024)**
  - Indicator 1: 0% Compliance*
    - No policy available to comply with annual Integrated Pest Management (IPM) Training
  - Indicator 2: 0% Compliance*
    - No evidence of ongoing staff training on SIDS and use of safe sleeping practices

### **Follow Up and Corrective Action Plan**

A program-level Corrective Action Plan (CAP) to address above areas of non-compliance is due to SETA within 30 days of receipt of this report. Governing Board/School Board notification of monitoring results is within 60 days.

Please use the provided form to complete the CAP which serves as written response by the agency to resolve systems-level areas of non-compliance identified during the MCQI review. *NOTE: This CAP does not supersede the individual CAP for non-compliant indicators using the Child Plus Internal Monitoring Module.*

# Monitoring for Compliance and Quality Improvement (MCQI)PROGRAM LEVEL CORRECTIVE ACTION PLAN (CAP)



**AGENCY:** SCUSD Early Head Start **Program Level CAP Date:** \_\_\_\_\_  
**Submitted By:** Noel Estacio **Governing Board Notification Date:** 2/15/18

**PURPOSE:** This Program-level Corrective Action Plan is intended to serve as written response by the agency to resolve systems-level areas of non-compliance that were identified during the MCQI review. *This CAP does not supersede the individual CAP for non-compliant indicators using the Child Plus Internal Monitoring Module.* For each Area of Non-Compliance on the summary report, please state what action was taken to correct it including: 1) strategies, 2) internal monitoring procedures to prevent recurrence, 3) the person responsible for the corrective action implementation, 4) the person responsible for internal ongoing monitoring and the 5) projected completion date.

**NOTE:** Program-level CAP is due to SETA within 30 days of receipt of MCQI Program Summary Report (**insert date**). Governing Board notification is within 60 days. Please indicate on CAP the scheduled date when the Governing Board will be notified of monitoring results.

## Area of Non-Compliance: Family Community Engagement

Program Service Area and Indicator Number	Corrective Action Strategies & Internal Ongoing Monitoring Procedures	Responsible Person(s) for Implementation of Corrective Action and Internal Ongoing Monitoring	Status <sup>1</sup>	Projected Date of Completion
Indicator 7 - FPA Building & Follow-Up	Retrain all home visitors and teachers on the FPA process and follow up procedures. Every team member will be provided copies of the existing procedure and follow up timelines. Staff will be reminded to turn in their worksheets, goal sheets and all required follow up service documentation at each designated goal setting period to the Social Worker. Once the social worker has reviewed the worksheets and goal sheets, a follow up reminder will be sent to staff to complete the process. The Social Worker will follow up directly with families	Teachers, Home Visitors and Social Worker	IP and ongoing	Follow up Training to occur in January

<sup>1</sup> Status: NS = Not Started; IP = In Progress; C = Completed



# Monitoring for Compliance and Quality Improvement (MCQI) PROGRAM LEVEL CORRECTIVE ACTION PLAN (CAP)



	who indicate high/emergency needs on the worksheets and goal sheets.		
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## Area of Non-Compliance: Required Postings

Program Service Area and Indicator Number	Corrective Action Strategies & Internal Ongoing Monitoring Procedures	Responsible Person(s) for Implementation of Corrective Action and Internal Ongoing Monitoring	Status <sup>2</sup>	Projected Date of Completion
Indicator B(3), A (4) and A(5) - required postings	Required postings are in a designated community area in a large center for all classrooms. Individual classrooms have their own postings. Postings have been emailed to teachers. The quarterly checklist will be updated with new required postings. Resource teacher and Itinerant Teacher will follow up and monitor using "required postings checklist". Checklist will be used quarterly.	Teachers, Resource Teacher, Licensing Specialist	Form to be updated by January 30th	2/1/2018

<sup>2</sup> Status: NS = Not Started; IP = In Progress; C = Completed

# Monitoring for Compliance and Quality Improvement (MCQI) PROGRAM LEVEL CORRECTIVE ACTION PLAN (CAP)



## Area of Non-Compliance: Health

Program Service Area and Indicator Number	Corrective Action Strategies & Internal Ongoing Monitoring Procedures	Responsible Person(s) for Implementation of Corrective Action and Internal Ongoing Monitoring	Status <sup>3</sup>	Projected Date of Completion
<p><b>Indicator 4:</b> No evidence on how program informs parents on agency policy re health emergencies that require rapid response of stat medical attention.</p>	<ul style="list-style-type: none"> <li>Parent Handbook recently updated and dispersed to families. Going forward all new families will receive updated parent handbook, upon enrollment.</li> </ul>	CDS EHS RN	IP	2/1/2018
<p><b>Indicator 23:</b> Missing or no up-to-date IZ records in child's file.</p>	<ul style="list-style-type: none"> <li>New "Blue Card" and copies will be printed and placed in child's files upon receipt of all immunization updates.</li> <li>California Immunization Registry (CAIR) will be accessed and "Blue Card" will be printed as needed (when IZ's are updated) and placed in child's file</li> <li>If IZ not in CAIR, child's HCP will be contacted via Fax for complete immunization records.</li> <li>Monthly CP reports to be generated.</li> </ul>	CDS EHS RN	C	12/22/2017
<p><b>Indicator 24:</b> Dental Health determination</p>	<ul style="list-style-type: none"> <li>Staff will be retrained to review "Hi Doctor"   Well Baby/Child Check forms for HCP</li> </ul>	CDS EHS RN	C	12/22/2017

<sup>3</sup> Status: NS = Not Started; IP = In Progress; C = Completed



# Monitoring for Compliance and Quality Improvement (MCQI) PROGRAM LEVEL CORRECTIVE ACTION PLAN (CAP)



<p>dates not entered into <i>ChildPlus</i> and/or not in child's file.</p>	<p>dental referrals and to acquire documentation needed to enter into <i>ChildPlus</i> and/or child's file.</p> <ul style="list-style-type: none"> <li>• All parents/guardians will receive AAP <i>Child Dental Care</i> pamphlets (Eng/Span) and supplemental information at enrollment and throughout enrollment in EHS.</li> <li>• -See SETA HS/EHS P&amp;P:             <ul style="list-style-type: none"> <li>○ <i>Dental Health Procedure</i></li> </ul> </li> <li>• Staff will develop a system( flow Chart) for tracking required health documents and placement in child's files and <i>ChildPlus</i>. Staff will be trained on the new system. -See checklist</li> </ul>			
<p><b>Indicator 29:</b> Tracking system for health (child files/<i>ChildPlus</i>) is inconsistent and/or has missing information</p>		<p>CDS EHS RN</p>	<p>IP</p>	<p>2/1/18</p>

## Area of Non-Compliance: Home-based Program Checklist 19

Program Service Area and Indicator Number	Corrective Action Strategies & Internal Ongoing Monitoring Procedures	Responsible Person(s) for Implementation of Corrective Action and Internal Ongoing Monitoring	Status <sup>4</sup>	Projected Date of Completion
<p>Indicator A (3) Home-Based Program</p>	<ul style="list-style-type: none"> <li>• Home visitors were notified of attendance policy, which includes flexibility in scheduling to accommodate families scheduling needs, and requirement for missed home visits. They are required to attempt to make up any missed home visits whether they are excused or unexcused.</li> </ul>	<p>Home Visitors Coordinator Data Technician Child Development Specialist, Serna</p>	<p>Policy sent  Ongoing</p>	<p>Revisit policy at January 12, 2017 staff meeting  Start in January with</p>

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# Monitoring for Compliance and Quality Improvement (MCQI) PROGRAM LEVEL CORRECTIVE ACTION PLAN (CAP)



Indicator B (17) Home-Based Program	<ul style="list-style-type: none"> <li>Ongoing monitoring will be implemented through child plus reports pulled monthly and reviewed by the coordinator.</li> <li>Train home visitors on completing detailed contact logs that tell the story of the work that has been completed with the family.</li> <li>The monitoring will be completed by the resource teacher when she does file reviews. The resource teacher reports findings to the coordinator.</li> <li>All resource staff will check family contact logs as they are working in the files and follow up as needed.</li> <li>Staff will receive a training on how to chart/documents notes on family contact log.</li> </ul>	Home Visitors Resource Staff Coordinator	IP	December attendance report.  Training at January 12, 2017 staff meeting  Monitoring completed in fall and spring by resource teacher.  2/1/18
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## Area of Non-Compliance: Outside Safe Environments

Program Service Area and Indicator Number	Corrective Action Strategies & Internal Ongoing Monitoring Procedures	Responsible Person(s) for Implementation of Corrective Action and Internal Ongoing Monitoring	Status <sup>5</sup>	Projected Date of Completion
Indicator A (1) Outside Safe Environments	<ul style="list-style-type: none"> <li>Teaching staff were sent an email reminder to complete the daily maintenance procedures on the Safe Environments Checklist. For additional maintenance needs the staff have been instructed to contact the School Plant Operations</li> </ul>	Teaching Staff Coordinator School Plant Operations Manager Resource Team	C and ongoing	December 18 2017  Fall & on-going

<sup>5</sup> Status: NS = Not Started; IP = In Progress; C = Completed

# Monitoring for Compliance and Quality Improvement (MCQI) PROGRAM LEVEL CORRECTIVE ACTION PLAN (CAP)



	<p>Manager on the same day that the needs were found.</p> <ul style="list-style-type: none"> <li>Annually in October the resource teacher monitors the use of the Safe Environments Checklist.</li> <li>The resource team have been notified to check the outside areas when they are visiting sites. Any needs noted will be directly addressed to the teaching staff and reported to the Coordinator.</li> </ul>		
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## Area of Non-Compliance: Safe Environments

Program Service Area and Indicator Number	Corrective Action Strategies & Internal Ongoing Monitoring Procedures	Responsible Person(s) for Implementation of Corrective Action and Internal Ongoing Monitoring	Status <sup>6</sup>	Projected Date of Completion
Indicator K (2) Safe Environments				

<sup>6</sup> Status: NS = Not Started; IP = In Progress; C = Completed

# Monitoring for Compliance and Quality Improvement (MCQI) PROGRAM LEVEL CORRECTIVE ACTION PLAN (CAP)



## Area of Non-Compliance: Nutrition

Program Service Area and Indicator Number	Corrective Action Strategies & Internal Ongoing Monitoring Procedures	Responsible Person(s) for Implementation of Corrective Action and Internal Ongoing Monitoring	Status <sup>7</sup>	Projected Date of Completion
<b>Indicator 3:</b> Lead assessment not completed at time of enrollment.	<ul style="list-style-type: none"> <li>• Staff will be retrained to perform and document <b>lead assessment</b> upon:                             <ul style="list-style-type: none"> <li>○ Enrollment in EHS program:                                     <ul style="list-style-type: none"> <li>▪ 12-month Well Child/Baby</li> <li>▪ 24-month Well Child/Baby</li> </ul> </li> <li>○ CDS will use enrollment checklist to ensure assessment is completed at time of enrollment</li> </ul> </li> </ul>	CDS EHS RN	IP and ongoing	Training by 2/4/18  1/8/18
<b>Indicator 12:</b> No documented follow up on nutrition concerns identified on any health document.	<ul style="list-style-type: none"> <li>• Staff will develop a tracking system as a follow up on identified nutrition concerns as indicated on any health document.</li> </ul>	CDS EHS RN	IP	2/1/18
<b>Indicator 13:</b> Tracking system for nutrition (child files and ChildPlus) is inconsistent and/or has missing information.	<ul style="list-style-type: none"> <li>• Staff will develop a tracking system for nutrition to be included in all child files and <i>ChildPlus</i>.</li> <li>• <i>Nurse is now reviewing all new files and transfers prior to start date</i></li> </ul>	CDS EHS RN Teachers	IP	2/1/18  12/1/18

<sup>7</sup> Status: NS = Not Started; IP = In Progress; C = Completed



# Monitoring for Compliance and Quality Improvement (MCQI)PROGRAM LEVEL CORRECTIVE ACTION PLAN (CAP)



## Area of Non-Compliance: PDM

Program Service Area and Indicator Number	Corrective Action Strategies & Internal Ongoing Monitoring Procedures	Responsible Person(s) for Implementation of Corrective Action and Internal Ongoing Monitoring	Status <sup>8</sup>	Projected Date of Completion
<p>Indicator 1: No policy available to comply with(IPM) training</p>	<ul style="list-style-type: none"> <li>• All EHS staff have been trained on the new IPM policy and use of disinfectant spray.</li> <li>• Disinfectants have been delivered to classrooms to use</li> <li>• IPM certificates for staff were dispersed and now posted in the classrooms</li> <li>• All new staff will receive IPM at new employee orientation.</li> </ul>	<p>Coordinator SCUSD HR department</p>	<p>On going</p>	<p>12/1/17</p>
<p>Indicator 2: No evidence of ongoing staff training on SIDS and use of safe sleeping practices</p>	<p>Nurse provided training, a video, and handout on SIDS and safe sleep. This will now be part of our annual staff orientation. All new staff will also receive the information at staff orientation.</p>	<p>Nurse Coordinator Resource Teacher</p>	<p>On going</p>	<p>12/1/18</p>

<sup>8</sup> Status: NS = Not Started; IP = In Progress; C = Completed

# Monitoring for Compliance and Quality Improvement (MCQI)PROGRAM LEVEL CORRECTIVE ACTION PLAN (CAP)



## Area of Non-Compliance: ERSEA

Program Service Area and Indicator Number	Corrective Action Strategies & Internal Ongoing Monitoring Procedures	Responsible Person(s) for Implementation of Corrective Action and Internal Ongoing Monitoring	Status <sup>9</sup>	Projected Date of Completion
Indicator 4: Missing info on ERSEA application	<ul style="list-style-type: none"> <li>Home Visitors will be retrained on the intake process and completing application</li> <li>CDS will review application prior to enrollment and entering into CP, using enrollment checklist for completion</li> <li>Resource teacher will review files prior to start date</li> </ul>	Home Visitors CDS Resource teacher	IP	2/1/18
Indicator 6: All funded slots were not filled at time of enrollment	<p>EHS opened a new classroom on October 1, 2017. All slots have been filled</p> <p>To monitor:</p> <ul style="list-style-type: none"> <li>A weekly enrollment report(ETS) is sent out to all enrollment staff and coordinator</li> <li>Coordinator will review report and connect with staff who are under enrolled to check on status of enrollment</li> <li>Waitlist is now being entered in CP so that all staff can access</li> </ul>	CDS Data Technician Coordinator	On going	12/22/17
Indicator 6: Parents rights, Personal rights and Child abuse forms were not signed by parent and or did not	<ul style="list-style-type: none"> <li>All new files and transfer are now being reviewed for completeness by CDS and resource teacher.</li> <li>New enrollment checklist is being used to ensure all forms are completed at enrollment and parents are signing forms</li> </ul>	CDS Home visitor Resource teacher	On going	1/8/18

<sup>9</sup> Status: NS = Not Started; IP = In Progress; C = Completed

**Monitoring for Compliance and Quality Improvement (MCQI)PROGRAM LEVEL CORRECTIVE  
ACTION PLAN (CAP)**



reflect facility	<ul style="list-style-type: none"> <li>When a child transfers from home base to center base CDS is updating the file for completeness</li> </ul>			
Indicator 10: Info. in CP and application not consistent	A new CDS( enrollment staff) was recently hired. New systems have been put in place to ensure accuracy of data entry.	CDS Data Technician	On going	9/1/17