



SACRAMENTO CITY UNIFIED SCHOOL DISTRICT BOARD OF EDUCATION

Agenda Item 9.1e

Meeting Date: September 17, 2015

Subject: Approve SETA Quality Assurance Monitoring Report - June 2015

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

Division/Department: Academic Office/Child Development

Recommendation: Approve

Background/Rationale: SETA is the granting agency for the District's Head Start and Early Head Start Programs. SETA conducts periodic site monitoring of the District's Head Start and Early Head Start Programs to evaluate its compliance with federal regulations and to insure that licensing requirements are consistently met. In June, 2015, SETA conducted a monitoring visit in ten center-based Head Start classrooms. Monitoring activities included child file reviews, classroom observations, facilities inspection and interviews with staff and parents. The report shows a summary of the findings of the monitoring visit. A corrective action and monitoring plan was developed and submitted to SETA on August 7, 2015. SETA will return to the District within 120 days to review the sites to insure that all corrective actions have taken place.

Financial Considerations: N/A

LCAP Goal(s): College and Career Ready Students; Family and Community Engagement

Documents Attached:

1. SETA Quality Assurance Monitoring Report - June, 2015

Estimated Time of Presentation: N/A

Submitted by: Becky Bryant, Interim Director, Child Development

Approved by: José L. Banda, Superintendent

Sacramento City Unified School District
Child Development Department

SETA Quality Assurance Monitoring Summary Report

July 2015

Agency	Centers Visited	# of Classrooms	# of Files	Monitoring Purpose
Sacramento City Unified School District	Peter Burnett, Bret Harte, Nicholas, Bear Flag, Elder Creek, Woodbine, Camellia, Cabrillo, Lisbon	10	20	<input checked="" type="checkbox"/> Initial <input type="checkbox"/> Follow-up <input type="checkbox"/> Special <input type="checkbox"/> Final

Exemplary Practices (Above Compliance)

- English and Spanish languages were used in classroom instruction. Children were learning songs and words in both languages.
- Strong team work was observed at the centers. Resource Teachers, support staff, teachers and children knew each other's names and interacted with ease and familiarity.

Areas Reviewed	Percentage Of Compliance*	Issues/Concerns
Health <i>(Screenings, Tracking, Follow-up, Procedures, Hygiene)</i>	85%	1- Not all newly-enrolled children received hearing and vision screens within 45-day timeline. Subsequent vision and hearing screens were not documented on all children's files reviewed. 2- Parent authorization for screening procedure was not consistently followed. 3 - No evidence that all parents received results of BMI screening 4 - Immunization cards had missing information or not updated. 5 - Not all children have TB risk assessment completed. 6 - Not all required physical exams were on file. 7 - Not all first year dental exams were completed; subsequent dental exams (within 1 year of previous dental exam) were missing. 8 - Exclusion notices were not sent timely, follow-up documentation for missing physicals were infrequent 9 - Inaccuracies on Child Plus data – file information and entries did not match. 10 - Follow-up on dental exams was

		<p>lacking and/or infrequent.</p> <p>11 - Expired medication on-site (child no longer in program). Medication prescribed by physician was not the same medication listed on form (same medication / different brand name).</p>
<p>Nutrition <i>(Nutrition Tracking and Follow-up, Menus, Meal Service, Special Diets)</i></p>	93%	No significant findings.
<p>Safe Environments <i>(Postings, Inspections, Food Prep Area, Restrooms, Classrooms, Playground, Disaster Preparedness)</i></p>	89%	<p>1 - Earthquake Preparedness Checklist was either incomplete or improperly displayed.</p> <p>2 - Emergency evacuation maps were not accurate due to any of the following reasons: did not have clear current location marked, not updated, improperly displayed (not posted by exit door, procedures for multiple classrooms were displayed in one classroom).</p> <p>3 - Inconsistent practice of keeping food warmers and refrigerators clean.</p> <p>4 – Not all children’s restrooms were well-maintained or did not appear to be cleaned regularly: toilet bolts rusty and with grime, had missing caps on bolt, water on floor, cob webs, electrical outlet not covered.</p> <p>5 – Tree branches, overgrown vegetation and other tripping hazards were present on playground.</p> <p>6 – Wooden gate leading to street unlocked.</p> <p>7 – Repairs/maintenance items were noted for some playgrounds.</p>
<p>Family , Parent and Community Engagement <i>(Family Partnership Building and Follow-up, Parent Meetings, Trainings, Information Sharing, Volunteer Activities, Transition))</i></p>	79%	<p>1-Not all files reviewed have evidence of family goal setting within 90 days of entry date.</p> <p>2- Inconsistent documentation of effective goal setting and development of strategies. Few files showed clear goals and strategies with timetable but others had no evidence.</p> <p>3 - Limited documentation to show that all requested information or services were provided to the parents, including subsequent follow-ups on parents who declined help in the beginning of the school year.</p> <p>4 - Limited evidence of referrals to community agencies for requested services.</p> <p>5 - Inconsistent documentation of parent meetings and trainings held</p>

		<p>throughout the year. There were classes that had accessible, organized and complete records for Parent Meetings but in some classes, there were no available records that parent meetings were held.</p> <p>6 - Pedestrian Safety training was not provided at all centers, no evidence for classes that did not have parent meetings.</p> <p>7 – Not all sites had resources on required topics.</p> <p>8 – Inconsistent practice observed by reviewers on how parent/families were being greeted or acknowledged to feel welcome in the classroom at arrival and pick-up time.</p>
<p>Adult Mental Health <i>(Parent/Guardian Mental Health)</i></p>	83%	<p>1- Contact information for School Social Workers was not posted in areas easily accessible to parents (at teacher’s areas).</p> <p>2 – Inconsistent documentation on how parent requests for counseling were followed up on.</p>
<p>Education <i>(Screenings, Referrals, Follow-up, Individual Education Plans, Assessments, Individual Development Plans, Transition)</i></p>	89%	<p>1 - Not all requests for follow-up services were completed or had a timely follow-up.</p> <p>2 - Few or no written observations of children such as anecdotal records to support assessments were completed within time frames. Assessment booklets had not dates. Samples and observations were not linked to measures.</p> <p>3 - IDPs did not include information in all DRDP domains and parent input was lacking.</p> <p>4 - Inconsistent documentation to indicate that all required Parent Conferences/Home Visits were met.</p> <p>5 - In two classrooms, positive guidance was not used to manage child behaviors.</p> <p>6 - Outdoor play was not followed for 2 consecutive days in one class observed due to one child with health concerns.</p> <p>7 – Child-staff interaction during outdoor play was primarily to solve conflicts and give directions. Outdoor play opportunities were not used to extend and enhance learning.</p>
<p>Curriculum/Implementation of Individualization <i>(Ratios, Supervision, Daily Schedule, Lesson Plans, Indoor/Outdoor Environments)</i></p>	92%	No significant findings.

ERSEA <i>(Eligibility, Recruitment, Selection, Enrollment, Attendance)</i>	82%	1 - No signed over-income waiver on file. 2 – Limited recruitment materials (English/other languages) found onsite. 3 – Missing information (staff signatures, school name, dates) on enrollment paperwork needed for verification. 4 – Numerous mistakes that were crossed out without authorized staff signatures. 5 – Information on application was not consistent with source documentation.
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*Scores between 90-99% will be addressed by the program but do not require a formal Monitoring Response Plan. Scores less than 90% require a written Monitoring Response Plan. Thresholds will be adjusted in the future when historical data is available.

Corrective Action Plans:

The program to submitted a written Monitoring Response Plan for areas under 90% on August 7, 2015. Follow-up visits by the SETA Quality Assurance team will be scheduled within 120 days or less.