



**CONCHO VALLEY**  
COUNCIL OF GOVERNMENTS

**EXECUTIVE COMMITTEE MEETING**

Wednesday, June 14, 2023 at 2:00 p.m.  
Concho Valley Council of Governments  
5430 Link Rd, San Angelo, Texas 76904 and via Teleconference

*The meeting place is accessible to persons with disabilities. If assistance is needed to observe or comment, please call the CVCOG office at 325-944-9666 at least 24 hours prior to the meeting.*

Join By Zoom Teleconference - <https://us06web.zoom.us/j/85474030542>

**\*Meeting ID: 854 7403 0542 \*Passcode: 106378**

833 548 0282 US Toll-free

877 853 5247 US Toll-free

888 788 0099 US Toll-free

833 548 0276 US Toll-free

**Agenda**

**NOTICE:** The Concho Valley Council of Governments may discuss, deliberate and take all appropriate action on any matter listed on this Agenda. Items on this Agenda may be taken out of the order listed. The Executive Committee reserves the right to deliberate in closed session pursuant to 551 of the Texas Government Code. Public comment is limited to five minutes per person on any agenda item.

**BUSINESS**

1. Determination of Quorum and Call to Order
2. Invocation and Pledge of Allegiance
3. Public Comment
4. Consent Agenda
  - a. Consider and take appropriate action concerning the minutes from the May 17, 2023 Meeting.
  - b. Consider and take appropriate action concerning the Staff Travel Report April 2023.

**REGULAR AGENDA**

5. Consider and take appropriate action concerning Checks in excess of \$2,000 for April 2023.
6. Consider and take appropriate action concerning the Executive Director's request to enter into a contract with Western Towers to supply and construct a 305' guyed tower for Kimble County in an amount not to exceed \$250,000.
7. Consider and take appropriate action concerning the Budget Comparison Report for Head Start Nutrition FY 22 - 23 Grant H04, YTD October 1, 2022 through April 30, 2023.
8. Consider and take appropriate action concerning the Budget Comparison Report for Head Start Grant H03 FY 22-23, YTD June 1, 2022 through April 30, 2023.
9. Consider and take appropriate action concerning the Budget Comparison Report for Head Start Funding Grant 829, ARP and CRRSA, YTD June 1, 2021 through April 30, 2023.
10. Consider and take appropriate action concerning the Head Start Credit Card/Open Account Summary for April 2023.

11. Consider and take appropriate action concerning the following Head Start Implementation Plans.

- a. 1301 Program Governance
- b. 1302 Subpart A ERSEA/ Program Operations
- c. 1302 Subpart C Education and Child Development
- d. 1302 Subpart D Health Program Services
- e. 1302 Subpart E Family and Community Engagement
- f. 1302 Subpart H Services to Enrolled Pregnant Women
- g. 1302 Subpart I Human Resources

12. Consider and take appropriate action concerning the Head Start Self-Assessment for 2022-2023.

13. Consider and take appropriate action concerning the Head Start Network Upgrades and Relocation Project not to exceed \$40,000.

14. Consider and take appropriate action concerning the Executive Director's request to enter into a contract with Cobb, Fendley & Associates for regional broadband consultant services in an amount not to exceed \$388,690.

15. Consider and take appropriate action concerning the Executive Director's request to enter into a contract with Snider Technology for Head Start Network upgrades and ongoing IT Managed Service Provider support in an amount not to exceed the following amounts listed.

- a. Monthly Recurring Fee: \$130
- b. Support Labor: \$125/hr.
- c. After hours Labor: \$165/hr.
- d. Travel: \$115/hr.

16. INFORMATION ITEMS AND REPORTS

- a. Review of the CVCOG Monthly Financials for April 2023
- b. CVCOG Head Start Director's Report
- c. Executive Director's Report – John Austin Stokes

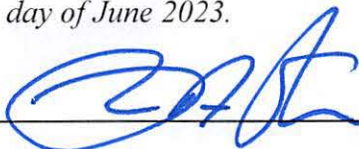
17. Consideration of any other business.

18. ADJOURNMENT

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*The Concho Valley Council of Governments reserves the right to conduct an executive/closed session at any time during the course of this meeting to discuss any matter listed on the agenda posted for this meeting, as needed, pursuant to one or more authorized and applicable exceptions to an open meeting described in Chapter 551 of the Texas Government Code (the Texas Open Meeting Act), including but not limited to the following statutory exceptions: Texas Government Code Sections 551.071 and 551.129 (Consultation with Attorney), 551.072 (Deliberation Regarding Real Property), 551.073 (Deliberation Regarding Prospective Gift or Donation), 551.074 (Personnel Matters), 551.076 and 551.089 (Deliberation Regarding Security Devices or Security Audits), or 551.087 (Deliberation Regarding Economic Development Negotiations).*

*Posted in accordance with the Texas Government Code, Title V, Chapter 551, Section .053 this, 8<sup>th</sup> day of June 2023.*



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**John Austin Stokes, Executive Director**



**CONCHO VALLEY**  
COUNCIL OF GOVERNMENTS

**EXECUTIVE COMMITTEE MEETING MINUTES**  
**Wednesday, May 17, 2023**

The Executive Committee of the Concho Valley Council of Governments met on Wednesday, May 17, 2023 at 5430 Link Rd., San Angelo, Texas 76904 and via Zoom Teleconference.

Members present were:

**Jim O'Bryan, Chairman**, Reagan County Judge  
**Brandon Corbin, Vice-Chairman**, Menard County Judge  
**Molly Criner, Secretary**, Irion County Judge  
**Hal Spain**, Coke County Judge  
**Sheree Hardin**, Mason County Judge (via Zoom)  
**David Dillard**, Concho County Judge  
**Souli Shanklin**, Edwards County Judge  
**Hal Rose**, Kimble County Judge (via Zoom)  
**Frank Trull**, McCulloch County Judge  
**Charlie Bradley**, Schleicher County Judge  
**Frank Tambunga**, Crockett County Judge  
**Lucy Gonzales**, COSA Council Member, District 4

Members absent were:

**Deborah Horwood**, Sterling City Judge  
**Jody Harris**, Sutton County Judge  
**Bill Dendle**, San Angelo ISD Board Member  
**Lane Carter**, Tom Green County Judge

**BUSINESS**

Chairman Judge Jim O'Bryan announced the presence of a quorum and called the meeting to order at 2:01 p.m.

Judge Frank Trull gave the invocation and led the Pledge of Allegiance.

There was no public comment.

**APPROVAL of the Consent Agenda**

- a. Judge David Dillard made a motion to approve the Meeting Minutes from April 12, 2023. Judge Souli Shanklin seconded the motion. No questions or discussion. The motion passed unanimously.
- b. Judge David Dillard made a motion to approve the Staff Travel report from March 2023. Judge Deborah Horwood seconded the motion. No questions or discussion. The motion passed unanimously.

**APPROVAL of Checks**

The checks in excess of \$2,000 written for March 2023 were presented by Director of Finance, Brandon Sanders. Judge Charlie Bradley made a motion to approve the checks as presented. Judge Hal Spain seconded the motion. No questions or discussion. The motion passed unanimously.

**APPROVAL of the revision to the CVCOG Cash Management Policy**

Brandon Sanders, Director of Finance, presented the revision to the CVCOG Cash Management Policy. The revision included adding the terminology concerning ACH transfers. Judge Souli Shanklin made a motion to approve the revision as presented. Judge Brandon Corbin seconded the motion. No questions or discussion. The motion passed unanimously.

**APPROVAL of the revision to the CVCOG Accounts Payable Policy**

Brandon Sanders, Director of Finance, presented the revision to the CVCOG Accounts Payable Policy. The revision included adding the terminology concerning ACH transfers. Judge Hal Spain made a motion to approve the revision as presented. Judge Charlie Bradley seconded the motion. No questions or discussion. The motion passed unanimously.

**APPROVAL of the Budget Comparison for Head Start Nutrition Grant H04**

Carolina Raymond, Director of Head Start, presented the Budget Comparison Report for Head Start Nutrition FY 22-23 Grant H04, YTD October 1, 2022 through March 31, 2023 for approval. Judge Souli Shanklin made a motion to approve Budget Comparison Report as presented. Judge Charlie Bradley seconded the motion. No questions or discussion. The motion passed unanimously.

**APPROVAL of the Budget Comparison for Head Start Nutrition Grant H03**

Carolina Raymond, Director of Head Start, presented the Budget Comparison Report for Head Start Nutrition FY 22-23 Grant H03, YTD June 1, 2022 through March 31, 2023 for approval. Judge David Dillard made a motion to approve Budget Comparison Report as presented. Judge Charlie Bradley seconded the motion. No questions or discussion. The motion passed unanimously.

**APPROVAL of the Budget Comparison for Head Start Funding Grant 829, ARP and CRRSA**

Carolina Raymond, Director of Head Start, presented the Budget Comparison Report for Head Start Funding Grant 829, ARP and CRRSA FY 21-22 YTD June 1, 2021 through March 31, 2023 for approval. Judge Hal Spain made a motion to approve Budget Comparison Report as presented. Judge David Dillard seconded the motion. No questions or discussion. The motion passed unanimously.

**APPROVAL of the Head Start Credit Card/Open Account Summary Transactions**

Carolina Raymond, Director of Head Start, presented the CVCOG Head Start Credit Card/Open Account Summary Transactions for the month of March 2023 for approval. Judge Souli Shanklin made a motion to approve the summary of transactions as presented. Judge Molly Criner seconded the motion. No questions or discussion. The motion passed unanimously.

**APPROVAL of Head Start to apply for one-time supplemental funding through the Office of Head Start to install cameras in all classrooms**

Carolina Raymond, Director of Head Start, requested for Head Start to apply for a one-time supplemental funding through the Office of Head Start to install cameras in all classrooms for approval. Judge Souli Shanklin made a motion to approve the request as presented. Judge Molly Criner seconded the motion. No questions or discussion. The motion passed unanimously.

**APPROVAL of the Head Start incentive bonus for all Head Start Staff**

Carolina Raymond, Director of Head Start, requested for all of the Head Start staff to receive an incentive bonus, up to \$1,000 based on leave balances and hire date for approval. Judge Souli Shanklin made a motion to approve the request as presented. Judge Frank Tambunga seconded the motion. No questions or discussion. The motion passed unanimously.

### **APPROVAL of the Criminal Justice Advisory Committee Bylaws**

Nicole Nixon presented the Criminal Justice Advisory Committee Bylaws for approval. Judge Molly Criner made a motion to approve resolution as presented. Judge Hal Spain seconded the motion. No questions or discussion. The motion passed unanimously.

### **APPROVAL of the Criminal Justice Advisory Committee Regional Strategic Plan**

Nicole Nixon presented the Criminal Justice Advisory Committee Regional Strategic Plan for approval. Judge Souli Shanklin made a motion to approve resolution as presented. Judge David Dillard seconded the motion. No questions or discussion. The motion passed unanimously.

### **APPROVAL of the Criminal Justice Advisory Committee's Prioritization of Funding Year 2024 Justice Assistance Grant**

Nicole Nixon presented the Criminal Justice Advisory Committee's Prioritization of Funding Year 2024 Justice Assistance Grant for approval. Judge Brandon Corbin made a motion to approve resolution as presented. Judge Charlie Bradley seconded the motion. No questions or discussion. The motion passed unanimously.

### **APPROVAL of the Criminal Justice Advisory Committee's Prioritization of Funding Year 2024 Juvenile Justice Truancy Prevention Grant**

Nicole Nixon presented the Criminal Justice Advisory Committee's Prioritization of Funding Year 2024 Juvenile Justice Truancy Prevention Grant for approval. Judge Souli Shanklin made a motion to approve resolution as presented. Judge Molly Criner seconded the motion. No questions or discussion. The motion passed unanimously.

### **APPROVAL of the Criminal Justice Advisory Committee's Prioritization of Funding Year 2024 Violence Against Women Act Grant**

Nicole Nixon presented the Criminal Justice Advisory Committee's Prioritization of Funding Year 2024 Violence Against Women Act Grant for approval. Judge Charlie Bradley made a motion to approve resolution as presented. Judge Brandon Corbin seconded the motion. No questions or discussion. The motion passed unanimously.

### **APPROVAL of the Criminal Justice Advisory Committee's Prioritization of Funding Year 2024 Victim of Crime Act Grant**

Nicole Nixon presented the Criminal Justice Advisory Committee's Prioritization of Funding Year 2024 Victim of Crime Act Grant for approval. Judge Brandon Corbin made a motion to approve resolution as presented. Judge Frank Tambunga seconded the motion. No questions or discussion. The motion passed unanimously.

### **INFORMATION ITEMS & REPORTS**

- a. John Austin Stokes, Executive Director, let the Executive Committee know that May is Older Americans Month.
- b. Brandon Sanders, Director of Finance, gave the report of the CVCOG Monthly Financials for March 2023. He gave an overview of the balance sheet, schedule of revenue and cash flow.
- c. Carolina Raymond, Director of Head Start, gave a report on the operations, enrollment and disability numbers, and state of the Head Start and Early Head Start Centers for the month of March 2023.
- d. Carolina Raymond, Director of Head Start, present the Executive Committee with the Office of Head Start Monitoring Review Report.
- e. Jaylon Seales, Contract & Open Records Manager, provided the following informational items: Current solicitations that are out: IT Managed Service Provider, CVTD Bus Stop Pad Installation, Kimble County Communications Tower Project, and the Broadband Initiative

- Project. Mr. Seales also stated that we should have vendors selected and have a request for approval to contract by the next board meeting.
- f. John Austin Stokes, Executive Director, showed the Executive Committee the COG's outreach video.

**ADJOURNMENT**

There being no further items to discuss, Judge Charlie Bradley made a motion to adjourn the meeting. Judge Brandon Corbin seconded the motion. Chairman Jim O'Bryan adjourned the meeting at 2:57 p.m.

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Duly adopted at a meeting of the Executive Committee of the Concho Valley Council of Governments on this 14<sup>th</sup> day of June, 2023.

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Judge Jim O'Bryan - Chairman

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Judge Brandon Corbin, Vice-Chairman

**Concho Valley Council of Governments**  
**Travel Report**  
**For the month of April 2023**

<b>Employee Name</b>	<b>Program</b>	<b>Nature of Travel</b>	<b>Destination</b>	<b>Dates</b>	<b>Estimated Cost</b>	<b>Travel Advances</b>
Nolen Mears	SVP	Tx Senior Corps Assoc Conf	San Antonio Tx	4/24/23 - 4/27/23	884.78	392.13
Teresa Covey	RSVP	Tx Senior Corps Assoc Conf	San Antonio Tx	4/24/23 - 4/27/23	624.75	132.75
Clementine Urista	SVP	Tx Senior Corps Assoc Conf	San Antonio Tx	4/24/23 - 4/27/23	624.75	132.75
Garcia, Crystal	Procurement	Certified TX Contract Developer Trg	Austin, TX	4/10/23 - 4/13/23	1,348.77	206.50
Flores, John Paul	PUB	South Central Arc User Group Conf (SCAUG)	Frisco, TX	4/17/23 - 4/21/23	1,708.84	
Lopez, Jeffrey	PUB	South Central Arc User Group Conf (SCAUG)	Frisco, TX	4/17/23 - 4/21/23	1,928.62	
Vasquez, John	PUB	2023 TX Public Safety Conference	Galveston, TX	4/2/23 - 4/5/23	1,772.63	
					<b><u>\$8,893.14</u></b>	<b><u>\$864.13</u></b>

**CVCOG**  
 Check/Voucher Register  
 From 4/1/2023 Through 4/30/2023

Docum... Number	Document Date	Name	Transaction Description	Document Amount
193698	4/5/2023	AFLAC	J5711 Employees Premium 03/01/2023 - 03/31/2023	8,448.86
193699	4/5/2023	AMERITAS LIFE INSURANCE CORP	010-028641-00001 Employees Premium 03/01/2023 -03/31/2023	8,689.20
193702	4/5/2023	BLUE CROSS AND BLUE SHIELD OF TEXAS	029143 CVCOG Group Health Ins 04/01/23 - 01/30/23	172,553.85
193704	4/5/2023	CHRISTOVAL ISD	Early Childhood Teacher for Head Start Program April 2023	2,300.00
193706	4/5/2023	CVCOG TRANSIT DISTRICT	Head Start maintenance work for Blackshear, Day, and Rio Vis	2,665.00
193709	4/5/2023	LAKESHORE LEARNING MATERIALS	Class Room supplies for Rio Vista EHS Room 4	2,039.54
193715	4/5/2023	NATIONWIDE RETIREMENT SOLUTIONS	NACO & Roth 457B payroll 3/31/2023	3,835.00
193718	4/5/2023	SCHLEICHER COUNTY ISD	Early Childhood Teacher for Head Start Program March 2023	2,000.00
193719	4/5/2023	Sysco West Texas	Nutritional items for RV HS/EHS	3,011.80
	4/5/2023	Sysco West Texas	Nutritional items for BS HS	2,289.68
	4/5/2023	Sysco West Texas	Nutritional items for RV HS/EHS	3,447.55
193720	4/5/2023	T. F. HARPER AND ASSOCIATES	Installation of artificial turf at Menard playground	7,543.50
193726	4/12/2023	CJ Environmental Consulting LLC	Purchase of lead testing for all Head Start sites.	5,630.00
193745	4/12/2023	Sysco West Texas	Day nutrition for children and kitchen supplies	3,809.31
193748	4/12/2023	VGI TECHNOLOGY, INC	Installation of access control system at Day Head Start site	7,075.13
193753	4/19/2023	AMERICAN UNITED LIFE INSURANCE COMPANY	G 00620509 Employees Life Premium 04/01/2023 - 04/30/2023	8,647.57
193755	4/19/2023	BANK & TRUST	Health Savings Act for payroll 4/15/2023	4,983.98
193759	4/19/2023	CITY OF BRADY	Congregate Meals Brady 03-23	2,634.39
	4/19/2023	CITY OF BRADY	HDM Meals Brady 03-23	9,088.20
193761	4/19/2023	COKE COUNTY	HDM Meals Coke 03-23	3,539.70
193763	4/19/2023	CTWP	HS Copier Lease March 2023 - 02/28/2023 to 03/27/2023	2,147.43
193766	4/19/2023	TEXAS DEPARTMENT OF INFORMATION RESOURCES	911 Cstmr Code PA30000TSD ESINet AVPN Managed Circuits and M	29,211.71
193768	4/19/2023	HELPING HANDS FOR THE ELDERLY, INC.	Congregate Meals HH 03-23	3,482.88
	4/19/2023	HELPING HANDS FOR THE ELDERLY, INC.	HDM Meals HH 03-23	3,265.65
193769	4/19/2023	KIMBLE COUNTY SCBA	Congregate Meals KMOW 02-23	2,114.04
	4/19/2023	KIMBLE COUNTY SCBA	Congregate Meals KMOW 03-23	3,536.04
	4/19/2023	KIMBLE COUNTY SCBA	HDM Meals KMOW 03-23	2,150.55
193770	4/19/2023	LAKESHORE LEARNING MATERIALS	Purchase of classroom supplies and materials for Day HS Room	4,334.01
	4/19/2023	LAKESHORE LEARNING MATERIALS	Purchase of classroom supplies and materials for Day HS Room	4,478.01
	4/19/2023	LAKESHORE LEARNING MATERIALS	Purchase of classroom supplies and materials for Day Head St	2,736.02
	4/19/2023	LAKESHORE LEARNING MATERIALS	Purchase of classroom supplies and materials for Day Early H	2,592.44
	4/19/2023	LAKESHORE LEARNING MATERIALS	Purchase of classroom supplies for Eden Head Start site	2,745.95
	4/19/2023	LAKESHORE LEARNING MATERIALS	Purchase of classroom supplies and materials for Blackshear	5,317.03
	4/19/2023	LAKESHORE LEARNING MATERIALS	Purchase of classroom supplies and materials for Blackshear	2,376.20
	4/19/2023	LAKESHORE LEARNING MATERIALS	Purchase of classroom supplies and materials for Blackshear	2,778.73
	4/19/2023	LAKESHORE LEARNING MATERIALS	Purchase of classroom supplies for Day Head Start site	2,070.69
	4/19/2023	LAKESHORE LEARNING MATERIALS	Purchase of classroom supplies and materials for Day EHS.	2,090.32
	4/19/2023	LAKESHORE LEARNING MATERIALS	Purchase of classroom supplies and materials for Rio Vista E	2,883.06



**CVCOG**  
Check/Voucher Register  
From 4/1/2023 Through 4/30/2023

Docum... Number	Document Date	Name	Transaction Description	Document Amount
	4/19/2023	LAKESHORE LEARNING MATERIALS	Purchase of classroom supplies and materials for Day Head St	3,764.85
	4/19/2023	LAKESHORE LEARNING MATERIALS	Purchase of classroom supplies and materials for Menard Head	3,839.46
	4/19/2023	LAKESHORE LEARNING MATERIALS	Purchase of classroom supplies and materials for Rio Vista H	2,547.35
193779	4/19/2023	NATIONWIDE RETIREMENT SOLUTIONS	NACO & Roth 457B payroll 4/15/2023	3,855.00
193780	4/19/2023	ODP Business Solutions LLC	Magenta ink, yellow ink, & cyan ink	3,616.56
193782	4/19/2023	Plumbing By Rick, LLC	Purchase of 8 tankless water heaters and installation for Ri	4,499.60
193783	4/19/2023	Proforma Promotions Group	911 dispatcher appreciation gifts to telecommunicators	4,712.70
193820	4/25/2023	CHRISTOVAL ISD	Early Childhood Teacher for Christoval Head Start Program Ma	2,300.00
193822	4/25/2023	CITY OF SONORA	HDM SONORA 03-23	13,070.18
193823	4/25/2023	CONDLEY AND COMPANY L.L.P	Admin Audit Services rendered through 03/31/23	38,243.32
193824	4/25/2023	CVCOG TRANSIT DISTRICT	Rural Trips - 266 total trips for 03/01/23 to 03/31/23.	9,842.00
	4/25/2023	CVCOG TRANSIT DISTRICT	Urban Trips - 1577 trips for 03/01/23 to 03/31/23.	44,156.00
	4/25/2023	CVCOG TRANSIT DISTRICT	Urban Trips 03/23	4,882.50
193835	4/25/2023	SCHLEICHER COUNTY ISD	Early Childhood Teacher for Head Start Program April 2023	2,000.00
193837	4/25/2023	Sysco West Texas	Nutritional items for Day HS/EHS	3,426.71
193838	4/25/2023	TEXAS TRUST CREDIT UNION	Purchase 66 gift cards to be awarded to Senior Companion/ Fo	6,600.00
193839	4/25/2023	TML INTERGOVERNMENTAL RISK POOL	April 2023 CVCOG Quarterly Insurance	32,571.75
193840	4/25/2023	TXU ENERGY RETAIL COMPANY LLC	Electric usage for all Headstart programs	2,971.63
654	4/26/2023	CB AT&T	Mobile Services Date Fees 12/17/22 - 01/16/23 CBG	7,077.55
668	4/26/2023	CB Concho Valley Electric Cooperative, Inc.	Electirc Srvc for Link Rd/Chrstvl act # 1012826 12/20/22 - 0	2,865.73
676	4/26/2023	CB Frontier Communications	911 Selective Routing 02/19/23 - 03/18/23~ CBG	6,521.58
686	4/26/2023	CB Insight Public Sector	911 adobe creative cloud license renewal CB JL	2,049.02
713	4/26/2023	CB Walmart	Pull ups/pampers for Girls and boys at Day JL CB	2,327.38
8817	4/28/2023	FF American Airlines	Airfare for HS staff to attend National Head Start Conferenc	4,508.71
Report Total				556,792.60

# Memo

**To:** Executive Committee

**From:** Nicole Nixon – Public Safety Program Manager

**Date:** 6/14/2023

**Re:** CONSIDER AND TAKE APPROPRIATE ACTION – ITEM 6

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## ITEM 6

Nicole Nixon, Public Safety Program Manager, is seeking consideration and approval of the Executive Director’s request to enter into a contract with Western Towers to supply and construct a 305’ guyed tower for Kimble County in an amount not to exceed \$250,000.

*Approved at the Executive Committee Meeting on June 14, 2023.*

**CVCOG**

Summary Budget Comparison - DIR-Grant H04, Head Start Nutrition 22-23  
From 10/1/2022 Through 4/30/2023

Account Code	Account Title	YTD Budget \$ - Original	YTD Actual	YTD Budget \$ Variance - Percent Total Budget	
				Original	Used - Original
H04	Grant H04, CACFP Head Start Nutrition FY 22-23				
004	Revenue				
4203000	CACFP Prior Year CFDA 10.558	18,773.45	18,773.45	0.00	100.00%
4221000	CACFP Nutrition CFDA 10.558	844,459.92	369,870.76	474,589.16	43.79%
Total 004	Revenue	863,233.37	388,644.21	474,589.16	45.02%
407	Head Start Nutrition				
5110000	General Wages	45,177.55	19,763.31	25,414.24	43.74%
5111000	Management Salaries	0.00	1,043.99	(1,043.99)	100.00%
5151000	Medicare Tax	655.08	235.37	419.71	35.92%
5172000	Workers Comp Insurance	986.79	487.36	499.43	49.38%
5173000	SUTA	18.00	16.85	1.15	93.61%
5174000	Health Insurance Benefit	19,163.41	8,579.74	10,583.67	44.77%
5175000	Dental Insurance Benefit	741.12	313.16	427.96	42.25%
5176000	Life Insurance Benefit	357.81	145.60	212.21	40.69%
5177000	HSA Insurance Benefit	1,961.00	423.17	1,537.83	21.57%
5181000	Retirement	5,024.88	2,350.78	2,674.10	46.78%
5199000	Indirect Allocation	4,604.62	2,059.01	2,545.61	44.71%
5291000	Contract Services	20,000.00	6,651.00	13,349.00	33.25%
5295000	HS Nutrition Service	688,138.40	278,775.35	409,363.05	40.51%
5513000	HS Food Serv Sup	76,204.71	69,656.89	6,547.82	91.40%
5753000	Dues and fees	200.00	19.36	180.64	9.68%
Total 407	Head Start Nutrition	863,233.37	390,520.94	472,712.43	45.24%
Report Difference		0.00	(1,876.73)	1,876.73	100.00%

**CVCOG**

Summary Budget Comparison - DIR-Grant H03, Head Start FY 22-23  
From 6/1/2022 Through 4/30/2023

Account Code	Account Title	YTD Budget \$ - Original	YTD Actual	YTD Budget \$ Variance - Original	Percent Total Budget Used - Original
H03	HHS-ACF Grant H03, Head Start FY 22-23 06CH010970-04				
004	Revenue				
4173000	HHS-ACF Head Start CFDA 93.600	6,808,571.00	5,895,548.26	913,022.74	86.59%
4411000	IK Contributions	1,676,068.00	1,892,567.61	(216,499.61)	112.91%
Total 004	Revenue	8,484,639.00	7,788,115.87	696,523.13	91.79%
400	Head Start CAN NO 9-G064122				
5110000	General Wages	2,292,927.58	2,028,607.21	264,320.37	88.47%
5118000	General Overtime Hours	100.00	81.25	18.75	81.25%
5119000	Holiday Work Time	250.00	238.62	11.38	95.44%
5150000	Vacation Time Allocation	26,006.69	23,644.68	2,362.01	90.91%
5151000	Medicare Tax	35,423.67	28,275.62	7,148.05	79.82%
5172000	Workers Comp Insurance	14,830.61	13,402.88	1,427.73	90.37%
5173000	SUTA	1,679.38	726.80	952.58	43.27%
5174000	Health Insurance Benefit	552,498.01	520,468.27	32,029.74	94.20%
5175000	Dental Insurance Benefit	23,487.00	21,287.29	2,199.71	90.63%
5176000	Life Insurance Benefit	17,020.77	14,883.68	2,137.09	87.44%
5177000	HSA Insurance Benefit	22,030.80	19,580.29	2,450.51	88.87%
5181000	Retirement	262,431.81	233,484.69	28,947.12	88.96%
5199000	Indirect Allocation	201,614.68	179,691.84	21,922.84	89.12%
5206000	HR Service Center	158,173.00	132,840.93	25,332.07	83.98%
5207000	Procurement Service Center	76,700.00	71,441.20	5,258.80	93.14%
5208000	Information Technology Service Center	60,258.00	52,571.69	7,686.31	87.24%
5291000	Contract Services	56,395.02	54,192.52	2,202.50	96.09%
5293000	HS Health & Disab Svc	322.00	175.89	146.11	54.62%
5294000	HS Policy Council	2,000.00	75.16	1,924.84	3.75%
5296000	HS Parent Service	4,304.00	986.30	3,317.70	22.91%
5309000	Travel-In Region	4,044.00	2,604.17	1,439.83	64.39%
5351000	Fuel	100.00	-	100.00	0.00%
5361000	Vehicle Maintenance	100.00	-	100.00	0.00%
5413000	HS Site Rent	126,233.00	114,832.76	11,400.24	90.96%
5433000	HS Site Center Utilities	99,273.00	83,140.02	16,132.98	83.74%
5451000	Facility Allocation	41,760.00	26,308.16	15,451.84	62.99%
5453000	HS Site Center Bldg Maint	141,622.00	95,836.07	45,785.93	67.67%
5510000	Supplies	93,377.00	50,248.30	43,128.70	53.81%
5512000	HS Class Room Supplies	142,233.98	91,606.98	50,627.00	64.40%
5514000	HS Medical Supplies	2,937.00	2,205.89	731.11	75.10%
5515000	HS Disability Supplies	4,489.00	12.54	4,476.46	0.27%
5518000	HS Diapers and Wipes	13,000.00	5,938.73	7,061.27	45.68%

**CVCOG**

Summary Budget Comparison - DIR-Grant H03, Head Start FY 22-23  
From 6/1/2022 Through 4/30/2023

Account Code	Account Title	YTD Budget \$ - Original	YTD Actual	YTD Budget \$ Variance - Original	Percent Total Budget Used - Original
5622000	Internal Computer/Software	22,386.00	9,012.54	13,373.46	40.25%
5632000	Copier	22,895.00	21,079.42	1,815.58	92.06%
5711000	Insurance	9,268.00	8,108.30	1,159.70	87.48%
5721000	Printing	5,412.00	-	5,412.00	0.00%
5722000	Ads & Promotions	3,483.00	772.50	2,710.50	22.17%
5753000	Dues and fees	4,310.00	3,154.57	1,155.43	73.19%
5760000	HS Site Center Communications	17,519.00	15,868.72	1,650.28	90.58%
5762000	Postage/freight	876.00	808.56	67.44	92.30%
5796000	Safety	1,098.00	929.44	168.56	84.64%
Total 400	Head Start CAN NO 9-G064122	4,564,869.00	3,929,124.48	635,744.52	86.07%
401	Early Head Start CAN NO 9-G064122				
5110000	General Wages	1,244,200.12	1,081,092.98	163,107.14	86.89%
5118000	General Overtime Hours	100.00	44.92	55.08	44.92%
5119000	Holiday Work Time	100.00	41.34	58.66	41.34%
5150000	Vacation Time Allocation	5,749.31	5,125.53	623.78	89.15%
5151000	Medicare Tax	16,884.66	15,065.46	1,819.20	89.22%
5172000	Workers Comp Insurance	7,543.15	6,386.16	1,156.99	84.66%
5173000	SUTA	1,407.30	410.03	997.27	29.13%
5174000	Health Insurance Benefit	314,006.68	296,378.87	17,627.81	94.38%
5175000	Dental Insurance Benefit	13,536.00	12,099.61	1,436.39	89.38%
5176000	Life Insurance Benefit	10,387.57	8,082.43	2,305.14	77.80%
5177000	HSA Insurance Benefit	14,520.50	13,872.93	647.57	95.54%
5181000	Retirement	141,874.44	124,541.44	17,333.00	87.78%
5199000	Indirect Allocation	108,936.27	96,520.92	12,415.35	88.60%
5206000	HR Service Center	48,752.00	36,642.51	12,109.49	75.16%
5207000	Procurement Service Center	21,456.00	18,197.24	3,258.76	84.81%
5208000	Information Technology Service Center	19,068.00	13,972.91	5,095.09	73.27%
5291000	Contract Services	678.00	639.98	38.02	94.39%
5293000	HS Health & Disab Svc	678.00	51.36	626.64	7.57%
5294000	HS Policy Council	274.00	21.95	252.05	8.01%
5296000	HS Parent Service	500.00	363.13	136.87	72.62%
5309000	Travel-In Region	356.00	213.68	142.32	60.02%
5413000	HS Site Rent	36,617.00	36,027.24	589.76	98.38%
5433000	HS Site Center Utilities	28,873.00	25,218.22	3,654.78	87.34%
5451000	Facility Allocation	6,731.00	5,933.53	797.47	88.15%
5453000	HS Site Center Bldg Maint	29,943.89	29,526.93	416.96	98.60%
5510000	Supplies	27,541.71	18,934.05	8,607.66	68.74%
5512000	HS Class Room Supplies	21,426.40	19,190.35	2,236.05	89.56%
5514000	HS Medical Supplies	1,763.00	644.08	1,118.92	36.53%

**CVCOG**

Summary Budget Comparison - DIR-Grant H03, Head Start FY 22-23  
From 6/1/2022 Through 4/30/2023

Account Code	Account Title	YTD Budget \$ - Original	YTD Actual	YTD Budget \$ Variance - Original	Percent Total Budget Used - Original
5515000	HS Disability Supplies	1,311.00	-	1,311.00	0.00%
5518000	HS Diapers and Wipes	10,000.00	5,958.94	4,041.06	59.58%
5622000	Internal Computer/Software	4,926.00	2,631.54	2,294.46	53.42%
5632000	Copier	4,834.00	4,639.01	194.99	95.96%
5711000	Insurance	1,486.00	1,053.51	432.49	70.89%
5721000	Printing	438.00	221.72	216.28	50.62%
5722000	Ads & Promotions	17.00	-	17.00	0.00%
5753000	Dues and fees	1,109.00	597.93	511.07	53.91%
5760000	HS Site Center Communications	4,142.00	3,606.39	535.61	87.06%
5762000	Postage/freight	121.00	-	121.00	0.00%
5796000	Safety	592.00	266.46	325.54	45.01%
Total 401	Early Head Start CAN NO 9-G064122	2,152,880.00	1,884,215.28	268,664.72	87.52%
402	Head Start T&TA CAN NO 9-G064120				
5308000	Head Start T & T A	61,964.00	54,531.81	7,432.19	88.00%
Total 402	Head Start T&TA CAN NO 9-G064120	61,964.00	54,531.81	7,432.19	88.00%
403	Early Head Start T&TA CAN NO 9-G064121				
5308000	Head Start T & T A	28,858.00	27,676.69	1,181.31	95.90%
Total 403	Early Head Start T&TA CAN NO 9-G064121	28,858.00	27,676.69	1,181.31	95.90%
409	Head Start InKind				
6791000	InKind Other	1,676,068.00	1,892,567.61	(216,499.61)	112.91%
Total 409	Head Start InKind	1,676,068.00	1,892,567.61	(216,499.61)	112.92%
	Total Expenditures	8,484,639.00	7,788,115.87	696,523.13	91.79%
	Total Revenue Over Expenditures	-	-	-	0.00%

**CVCOG**

Summary Budget Comparison - DIR-Grant H03, Head Start FY 22-23  
From 6/1/2022 Through 4/30/2023

Account Code	Account Title	YTD Budget \$ - Original	YTD Actual	YTD Budget \$ Variance - Original	Percent Total Budget Used - Original
	Head Start (Project 400, 402)	4,626,833.00	3,983,656.29	643,176.71	86.10%
	Early Head Start (Project 401, 403)	2,181,738.00	1,911,891.97	269,846.03	87.63%
	Total Federal	6,808,571.00	5,895,548.26	913,022.74	86.59%
	Total Non-Federal, includes Local Funds	1,676,068.00	1,892,567.61	(216,499.61)	112.92%
	Grand Total HHS Head Start Expenditures	8,484,639.00	7,788,115.87	696,523.13	91.79%

CVCOG Head Start Admin	453,937.59
CVCOG Administrative Indirect	276,212.76
Plus Health Insurance Adjustment	95,208.46
Total Administrative	825,358.81

Administrative Percentage of Approved Budget  
Non-Federal Percentage of Total Expenditures

9.73% Note: Administrative Maximum Percentage is 15%  
24.30% Note: match should be 20% or more

**CVCOG**

Summary Budget Comparison - DIR-Grant 829, ARP and CRRSA Head Start Funding  
From 6/1/2021 Through 4/30/2023

Account Code	Account Title	YTD Budget \$ - Original	YTD Actual	YTD Budget \$ Variance - Original	Percent Total Budget Used - Original
829	HHS-ACF Grant 829, Head Start FY 21-22 06CH010970				
004	Revenue				
4170000	HHS-ACF Head Start ARP 06HE001000 C6	676,023.00	528,004.80	148,018.20	78.10%
4172000	HHS-ACF Head Start CRRSA 06HE001000 C5	170,048.00	170,048.00	0.00	100.00%
4523000	Local Revenue	8,405.34	7,529.50	875.84	89.57%
4711000	Sale of Equipment	11,949.79	0.00	11,949.79	0.00%
Total 004	Revenue	866,426.13	705,582.30	160,843.83	0.00
404	Head Start CRRSA CAN 9-G064122				
5174000	Health Insurance Benefit	31,556.97	31,556.97	0.00	100.00%
5199000	Indirect Allocation	1,953.36	1,953.36	0.00	100.00%
5512000	HS Class Room Supplies	1,393.44	1,393.44	0.00	100.00%
5622000	Internal Computer/Software	115,276.43	115,276.43	0.00	100.00%
5734000	HS Capital Playground	1,826.87	1,826.87	0.00	100.00%
Total 404	Head Start CRRSA CAN 9-G064122	152,007.07	152,007.07	0.00	100.00%
405	Early Head Start CRRSA CAN 9-G064122				
5174000	Health Insurance Benefit	16,989.30	16,989.30	0.00	100.00%
5199000	Indirect Allocation	1,051.63	1,051.63	0.00	100.00%
Total 405	Early Head Start CRRSA CAN 9-G064122	18,040.93	18,040.93	0.00	100.00%
406	Early Head Start Conversion ARP CAN 9-G064122				
5453000	HS Site Center Bldg Maint	12,317.16	12,317.16	0.00	100.00%
5510000	Supplies	1,758.88	1,758.88	0.00	100.00%
5512000	HS Class Room Supplies	20,919.00	20,919.00	0.00	100.00%
5622000	Internal Computer/Software	2,248.44	2,248.44	0.00	100.00%
5734000	HS Capital Playground	15,672.77	15,672.77	0.00	100.00%
Total 406	Early Head Start Conversion ARP CAN 9-G064122	52,916.25	52,916.25	0.00	100.00%
410	Head Start ARP CAN NO 9-G064122				
5110000	General Wages	34,213.00	34,213.00	0.00	100.00%
5151000	Medicare Tax	496.09	496.09	0.00	100.00%
5172000	Workers Comp Insurance	270.86	270.86	0.00	100.00%
5174000	Health Insurance Benefit	94,551.72	86,983.65	7,568.07	91.99%
5177000	HSA Insurance Benefit	3,561.96	3,275.87	286.09	91.96%
5181000	Retirement	4,095.25	4,095.25	0.00	100.00%
5199000	Indirect Allocation	8,216.80	7,983.36	233.44	97.15%
5200000	Employee Health and Welfare	1,937.78	1,873.41	64.37	96.67%
5207000	Procurement Service Center	472.04	472.04	0.00	100.00%
5308000	Head Start T & T A	186.25	186.25	0.00	100.00%



**CVCOG**

Summary Budget Comparison - DIR-Grant 829, ARP and CRRSA Head Start Funding  
From 6/1/2021 Through 4/30/2023

Account Code	Account Title	YTD Budget \$ - Original	YTD Actual	YTD Budget \$ Variance - Original	Percent Total Budget Used - Original
5451000	Facility Allocation	9,976.99	9,976.99	0.00	100.00%
5453000	HS Site Center Bldg Maint	51,406.07	44,334.33	7,071.74	86.24%
5510000	Supplies	35,826.58	5,618.42	30,208.16	15.68%
5512000	HS Class Room Supplies	56,751.23	45,235.89	11,515.34	79.70%
5514000	HS Medical Supplies	1,665.86	1,665.86	0.00	100.00%
5518000	HS Diapers and Wipes	2,500.00	0.00	2,500.00	0.00%
5622000	Internal Computer/Software	39,201.21	38,681.61	519.60	98.67%
5625000	Capital-Replace Van	49,470.00	0.00	49,470.00	0.00%
5734000	HS Capital Playground	77,575.04	40,026.70	37,548.34	51.59%
5753000	Dues and fees	106.97	106.97	0.00	100.00%
Total 410	Head Start ARP CAN NO 9-G064122	472,481.70	325,496.55	146,985.15	68.89%
411	Early Head Start ARP CAN NO 9-G064122				
5110000	General Wages	18,787.00	18,787.00	0.00	100.00%
5151000	Medicare Tax	272.41	272.41	0.00	100.00%
5172000	Workers Comp Insurance	117.93	117.93	0.00	100.00%
5174000	Health Insurance Benefit	43,460.94	42,867.72	593.22	98.63%
5177000	HSA Insurance Benefit	2,461.51	2,298.60	162.91	93.38%
5181000	Retirement	2,248.85	2,248.85	0.00	100.00%
5199000	Indirect Allocation	4,175.87	4,085.30	90.57	97.83%
5200000	Employee Health and Welfare	329.18	143.55	185.63	43.60%
5207000	Procurement Service Center	140.99	140.99	0.00	100.00%
5308000	Head Start T & T A	69.75	69.75	0.00	100.00%
5451000	Facility Allocation	2,399.04	2,399.04	0.00	100.00%
5453000	HS Site Center Bldg Maint	16,839.58	16,838.86	0.72	99.99%
5510000	Supplies	1,092.84	1,092.84	0.00	100.00%
5512000	HS Class Room Supplies	17,521.21	17,521.21	0.00	100.00%
5514000	HS Medical Supplies	479.14	479.14	0.00	100.00%
5622000	Internal Computer/Software	7,305.92	7,305.92	0.00	100.00%
5734000	HS Capital Playground	32,895.65	32,895.65	0.00	100.00%
5753000	Dues and fees	27.24	27.24	0.00	100.00%
Total 411	Early Head Start ARP CAN NO 9-G064122	150,625.05	149,592.00	1,033.05	99.31%
997	Non Project				
5200000	Employee Health and Welfare	148.16	148.16	0.00	100.00%
5510000	Supplies	300.00	256.00	44.00	85.33%
5512000	HS Class Room Supplies	7,957.18	7,125.34	831.84	89.54%
5625000	Capital-Replace Van	11,949.79	0.00	11,949.79	0.00%
Total 997	Non Project	20,355.13	7,529.50	12,825.63	36.99%
Report Difference		0.00	0.00	0.00	0.00%

**Head Start Credit Card/Open Account Transactions Summary  
(Detail Attached)**

<b>Head Start Transactions</b>	<b>April, 2023</b>
Citibank P-Card	28,912.38
Dean's Dairy	8,879.20
First Financial Credit Card	131.79
Lowes Pay and Save	743.61
Sysco Food Services	48,678.08
West Texas Fire Extinguisher	3,750.09
	<hr/>
	\$ 91,095.15
	<hr/>

CVCOG  
 Vendor Activity - Head Start Citibank P-Card  
 829 - HHS-ACF Grant 829, Head Start FY 21-22 06CH010970  
 From 4/1/2023 Through 4/30/2023

<u>Line Item Code</u>	<u>Line Item Title</u>	<u>Document Date</u>	<u>Document Number</u>	<u>Document Description</u>	<u>Expenses</u>
5510000	Supplies	3/30/2023	8119	Purchase of custom designed tees for Head Start field day event.	256.00
5622000	Internal Computer/Software	3/7/2023	AL11939248	7 Ipads for all HS/EHS Admin staff members ~ JL CB	6,637.00
					6,893.00
				Total 829 - HHS-ACF Grant 829, Head Start FY 21-22 06CH010970	6,893.00

CVCOG  
Vendor Activity - Head Start Citibank P-Card  
H03 - HHS-ACF Grant H03, Head Start FY 22-23 06CH010970-04  
From 4/1/2023 Through 4/30/2023

<u>Line Item Code</u>	<u>Line Item Title</u>	<u>Document Date</u>	<u>Document Number</u>	<u>Document Description</u>	<u>Expenses</u>
5296000	HS Parent Service	4/19/2022	016394	HS/FAMCO purchase of canopies and ice HS CB	18.80
5296000	HS Parent Service	4/12/2023	011503	Snacks for ERSEA meeting Apr 12, 2023 CB HS	92.23
5296000	HS Parent Service	4/12/2023	014271	Staff food/meals for Head Start ERSEA meeting Apr 12, 2023 CB HS	134.04
5296000	HS Parent Service	4/12/2023	092511	Cutlery and sanitation supplies for ERSEA meeting Apr 12, 2023 CB HS	68.58
5296000	HS Parent Service	4/17/2023	028070	Bottled water for Day,RV,BS HS/EHS CB HS	166.40
5296000	HS Parent Service	4/18/2023	057305	Lunches for staff working ERSEA CB HS	32.37
5296000	HS Parent Service	4/18/2023	217472	Lunches for staff working ERSEA CB HS	97.30
5296000	HS Parent Service	4/19/2023	052821	Family Day supplies BS,Day,RV HS/EHS CB HS	41.56
5296000	HS Parent Service	4/19/2023	065119	Blackshear HS, Day HS/EHS, and Rio Vista HS/EHS purchase of water and ice HS CB	72.40
5296000	HS Parent Service	4/19/2023	069081	Family Day supplies for BS,Day,RV HS/EHS CB HS	37.60
5308000	Head Start T & T A	4/14/2023	131883	Observer Recertification MH All HS Sties CB HS	125.00
5308000	Head Start T & T A	4/14/2023	642407	CDA renewal fee for C.S. Day HS CB HS	125.00
5308000	Head Start T & T A	4/24/2023	1665687	CDA Initial Application Fee J.C. BS HS CB HS	425.00
5309000	Travel-In Region	4/4/2023	833537	Gas for rental vehicle CB HS	15.42
5309000	Travel-In Region	4/4/2023	9BYTFN	Rental vehicle CB HS	37.03
5433000	HS Site Center Utilities	3/13/2023	221727-180104 02-23	Day water usage act# 221727-180104 02/09/23-03/08/23 CBG	205.38
5433000	HS Site Center Utilities	3/13/2023	221727-180106 02-23	Day water usage act# 221727-180106 02/09/23-03/08/23 CBG	156.03
5433000	HS Site Center Utilities	3/16/2023	221727-180084 02-23	Blackshear HS water service 02/13/23-03/13/23 CBG	212.30
5433000	HS Site Center Utilities	3/31/2023	0691-001193945	Blackshear trash services act# 3-0691-2402969 04/01/23-04/30/23 CBG	569.39

CVCOG  
Vendor Activity - Head Start Citibank P-Card  
H03 - HHS-ACF Grant H03, Head Start FY 22-23 06CH010970-04  
From 4/1/2023 Through 4/30/2023

<u>Line Item Code</u>	<u>Line Item Title</u>	<u>Document Date</u>	<u>Document Number</u>	<u>Document Description</u>	<u>Expenses</u>
5433000	HS Site Center Utilities	3/31/2023	0691-001193966	Rio Vista Trash Service act# 3-0691-2402993 04/01/23-04/30/23 CBG	569.39
5433000	HS Site Center Utilities	3/31/2023	0691-001194353	Day Trash Services act#3-0691-2405694 04/01/23-04/30/23 CBG	569.39
5433000	HS Site Center Utilities	4/14/2023	RS041423	Blackshear HS temporary dumpster dump and pickup JL CB	589.73
5433000	HS Site Center Utilities	4/15/2023	05-0560-02 03-23a	Eden Head Start Water Usage Srvc dates 03/15/23-04/15/23 CBG	211.90
5433000	HS Site Center Utilities	4/21/2023	RS042123	Blackshear HS charge for dumping temporary/roll away dumpster JL CB	13.21
5453000	HS Site Center Bldg Maint	3/28/2023	158370 & 158558	Rio Vista & Blackshear filter change on AC units ~ CBG	455.22
5453000	HS Site Center Bldg Maint	3/31/2023	0691-001193243	Payment for Waste Container at Rio Vista Site JL CB	108.41
5453000	HS Site Center Bldg Maint	4/19/2023	8462235-9582648	Purchase of Adjustable heavy duty storage shelves for Eldorado Head Start JL CB	243.84
5453000	HS Site Center Bldg Maint	4/26/2023	4Q1C974QLGAL	Troubleshoot and repair Hayden's office door invoice I104679 Professional Commercial Security Monitoring, Fire Alarm Monitoring and Commercial Security Service Agreement for Rio Vista, Day and Blackshear Head Start CBG Billing period: 04/01/23-04/30/23	235.00
5510000	Supplies	4/19/2022	016394	HS/FAMCO purchase of canopies and ice HS CB	287.00
5510000	Supplies	3/27/2023	0672785-7687457	Purchase of 10 Pocket Magazine Rack for Eden Head Start JL CB	99.77
5510000	Supplies	3/27/2023	1735465-2107430	Purchase of a 10 Pocket Magazine Rack for Day Site JL CB	99.77
5510000	Supplies	3/27/2023	3375447-0258636	Purchase of a 10 Pocket Magazine Rack for Eldorado Head Start JL CB	99.77

CVCOG  
Vendor Activity - Head Start Citibank P-Card  
H03 - HHS-ACF Grant H03, Head Start FY 22-23 06CH010970-04  
From 4/1/2023 Through 4/30/2023

<u>Line Item Code</u>	<u>Line Item Title</u>	<u>Document Date</u>	<u>Document Number</u>	<u>Document Description</u>	<u>Expenses</u>
5510000	Supplies	3/27/2023	3631349-4253066	Purchase of a 10 Pocket Magazine Rack for the Rio Vista Site JL CB	99.77
5510000	Supplies	3/27/2023	6548651-1282665	Purchase of a 10 Pocket Magazine Rack for Ozona Head Start JL CB	99.77
5510000	Supplies	3/27/2023	8730989-2891440	Purchase of a 10 Pocket Magazine Rack for Menard Head Start JL CB	99.77
5510000	Supplies	4/3/2023	4752814-7268252	Hand sanitizer for Head Start Admin staff JL CB	28.00
5510000	Supplies	4/3/2023	5614628-7418651	Clorox wipes for Head Start Admin staff JL CB	49.68
5510000	Supplies	4/4/2023	2000109-95196257	Day HS/EHS, Christoval HS and Ozona HS purchase of calculators, phone, totes, general and classroom supplies JL CB	880.30
5510000	Supplies	4/5/2023	0949889-1992249	Purchase of file cabinet for Menard Head Start site JL CB	280.00
5510000	Supplies	4/5/2023	4009658-6738651	Purchase of general supplies for Day Head Start site JL CB	243.91
5510000	Supplies	4/5/2023	4234805-7935431	Purchase of general supplies for Day Head Start site JL CB	8.99
5510000	Supplies	4/5/2023	6143187-905306...	Day HS/EHS and RV HS/EHS purchase of laptop backpacks, rolling bags and general supplies JL CB	513.55
5510000	Supplies	4/5/2023	7814794-9922654	Menard purchase of HS chair, general, classroom, and HS/EHS kitchen supplies JL CB	237.47
5510000	Supplies	4/11/2023	3742532-7667408	48x48 cork board for Day HS CB JL	743.60
5510000	Supplies	4/12/2023	92316653	Paint, Pro Grade Earmuffs, Concrete anchors, Paint tray liners, Paint pail liners and Paint Rollers for Rio Vista Head Start Site. Facilities CB	110.86
5510000	Supplies	4/17/2023	2000109-31239818	Day HS purchase of trash can JL CB	39.99
5510000	Supplies	4/18/2023	046030	Field Day supplies BS/Day/RV HS/EHS CB HS	35.43

CVCOG  
Vendor Activity - Head Start Citibank P-Card  
H03 - HHS-ACF Grant H03, Head Start FY 22-23 06CH010970-04  
From 4/1/2023 Through 4/30/2023

<u>Line Item Code</u>	<u>Line Item Title</u>	<u>Document Date</u>	<u>Document Number</u>	<u>Document Description</u>	<u>Expenses</u>
5510000	Supplies	4/19/2023	9201615-4065812	Purchase of filing boxes for Eldorado Head Start JL CB	23.98
5510000	Supplies	4/20/2023	2454152	Toner ink for Menard Head Start JL CB	26.95
5510000	Supplies	4/21/2023	050176	HS/FAMCO refund for canopy HS CB	(129.00)
5510000	Supplies	4/21/2023	078538	HS/FAMCO purchase of rolling plastic storage containers HS CB	97.86
5510000	Supplies	4/21/2023	7375103-8816244	Rio Vista HS purchase of laptop backpacks JL CB	501.82
5510000	Supplies	4/22/2023	0961592-3109053	Purchase of microphone for use at Rio Vista Head Start Site CBG	11.49
5510000	Supplies	4/22/2023	2088611-5949050	Purchase of microphone for use at Day Head Start Site CBG	11.49
5510000	Supplies	4/24/2023	10060256836	Rio Vista HS purchase of copy paper JL CB	1,847.98
5510000	Supplies	4/24/2023	10060260917	Day HS purchase of copy paper JL CB	2,095.20
5510000	Supplies	4/26/2023	3469373-7891405	HS purchase of mouse pad and sticky notes for admin use JL CB	129.53
5510000	Supplies	4/26/2023	3469373-789140...	HS purchase of sticky notes for admin use JL CB	47.88
5510000	Supplies	4/26/2023	7382737-1976219	HS Admin (all) purchase of laptop stands, desk calculators, keyboards, gel pens, and pen/pencil cases JL CB	1,139.14
5512000	HS Class Room Supplies	4/4/2023	2000109-95196257	Day HS/EHS, Christoval HS and Ozona HS purchase of calculators, phone, totes, general and classroom supplies JL CB	134.30
5512000	HS Class Room Supplies	4/5/2023	6143187-9053068	Day HS purchase of laptop backpacks JL CB	123.96
5512000	HS Class Room Supplies	4/5/2023	6143187-905306...	Day HS/EHS and RV HS/EHS purchase of laptop backpacks, rolling bags and general supplies JL CB	650.79
5512000	HS Class Room Supplies	4/5/2023	7814794-9922654	Menard purchase of HS chair, general, classroom, and HS/EHS kitchen supplies JL CB	33.77

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Vendor Activity - Head Start Citibank P-Card  
H03 - HHS-ACF Grant H03, Head Start FY 22-23 06CH010970-04  
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<u>Line Item Code</u>	<u>Line Item Title</u>	<u>Document Date</u>	<u>Document Number</u>	<u>Document Description</u>	<u>Expenses</u>
5512000	HS Class Room Supplies	4/5/2023	8813431-1472248	Purchase of classroom supplies for Menard Head Start site JL CB	19.96
5512000	HS Class Room Supplies	4/12/2023	2000109-951962...	Christoval HS credit for returned plastic storage totes JL CB	(67.15)
5512000	HS Class Room Supplies	4/12/2023	4608186-5285860	Door locks for door handles at Rio Vista Head Start Site JL CB	56.98
5512000	HS Class Room Supplies	4/19/2023	4060588-3026634	Purchase of patio umbrellas for Eldorado Head Start JL CB	76.74
5512000	HS Class Room Supplies	4/21/2023	2000109-951962...	Christoval HS refund for plastic storage totes JL CB	(67.15)
5512000	HS Class Room Supplies	4/21/2023	7375103-8816244	Rio Vista HS purchase of laptop backpacks JL CB	185.94
5512000	HS Class Room Supplies	4/24/2023	5265265-3305856	Ozona HS purchase of vacuum JL CB	109.99
5512000	HS Class Room Supplies	4/24/2023	7313717-6584263	Christoval HS purchase of hanging cabinets JL CB	639.96
5512000	HS Class Room Supplies	4/26/2023	3595901-6557012	Day HS/EHS purchase of outlet covers for child safety JL CB	7.82
5512000	HS Class Room Supplies	4/27/2023	2000108-94689682	Eldorado HS purchase of smoke detector JL CB	30.46
5514000	HS Medical Supplies	4/4/2023	7694927-0241807	Purchase of Digital Thermometers for HS/EHS JL CB	288.00
5518000	HS Diapers and Wipes	4/13/2023	10057170018	Purchase of diapers and wipes for Day Head Start/Early Head Start site JL CB	707.00
5518000	HS Diapers and Wipes	4/19/2023	0011870-3031447	Purchase of pullups for Eldorado Head Start JL CB	94.40
5760000	HS Site Center Communications	3/8/2023	0708195 03-23	Rural phone service 03/08/23-04/07/23 CBG	597.93
5760000	HS Site Center Communications	4/8/2023	0708195 04-23	HS rural phone service 04/08/23-05/07/23 CBG	592.66
5760000	HS Site Center Communications	4/9/2023	07710150890010 04-23	Internet Service for Day Head Start Site 03/25/23-04/24/23 CBG	224.22
5760000	HS Site Center Communications	4/17/2023	07710-102810-0...	Internet Services 04/01/23-04/30/23 for Blackshear Head Start CBG	194.21



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Vendor Activity - Head Start Citibank P-Card  
H03 - HHS-ACF Grant H03, Head Start FY 22-23 06CH010970-04  
From 4/1/2023 Through 4/30/2023

<u>Line Item Code</u>	<u>Line Item Title</u>	<u>Document Date</u>	<u>Document Number</u>	<u>Document Description</u>	<u>Expenses</u>
5760000	HS Site Center Communications	4/17/2023	07710-150887-0...	Internet services 04/01/23-04/30/23 for Rio Vista Head Start Site CBG	159.09
5760000	HS Site Center Communications	4/25/2023	07710150503019 04-23	Internet Services for Rio Vista Head Start Site billing period: 04/15/23-05/14/23 CBG	207.89
5760000	HS Site Center Communications	4/25/2023	07710150504017 04-23	Internet services for Blackshear Head Start 04/15/23-05/14/23 CBG	191.76
5762000	Postage/freight	4/6/2023	91002438709978	Payment for 12 months for PO Box for Eldorado Head Start CBG	60.00
5796000	Safety	4/11/2023	405SP0000125071	Background check on prospective employee RV,Day,BS CB HR	6.39
5796000	Safety	4/13/2023	405SP0000126765	Background check for prospective new employee CB HR	6.39
5796000	Safety	4/14/2023	UZTX4R77NN	background check for prospective employee JDR -HS/EHS RV,Day,BS CB HR	40.58
5796000	Safety	4/20/2023	UZTX4R4TQZ	Background check M.T. ED HS	40.58
				Total H03 - HHS-ACF Grant H03, Head Start FY 22-23 06CH010970-04	20,837.11

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Vendor Activity - Head Start Citibank P-Card  
H04 - Grant H04, CACFP Head Start Nutrition FY 22-23  
From 4/1/2023 Through 4/30/2023

<u>Line Item Code</u>	<u>Line Item Title</u>	<u>Document Date</u>	<u>Document Number</u>	<u>Document Description</u>	<u>Expenses</u>
5295000	HS Nutrition Service	4/11/2023	092499	Rio Vista Early Head Start and Blackshear Head Start nutritional items for children HS CB	17.46
5295000	HS Nutrition Service	4/11/2023	2000108-57322425	Enfamil gentlease for Day Head Start	79.88
5295000	HS Nutrition Service	4/13/2023	079851	Day Head Start/Early Head Start nutritional items for children HS CB	32.86
5295000	HS Nutrition Service	4/20/2023	028252	Baby formula for Day EHS CB HS	95.52
5295000	HS Nutrition Service	4/24/2023	046852	Nutritional items for CH HS CB HS	254.60
5295000	HS Nutrition Service	4/26/2023	074033	Nutritional items for Day, Ch HS CB HS	15.70
5513000	HS Food Serv Sup	4/5/2023	7814794-9922654	Menard purchase of HS chair, general, classroom, and HS/EHS kitchen supplies JL CB	129.94
5513000	HS Food Serv Sup	4/6/2023	036361	Purchase of 6 Inch plates for Blackshear HS JL CB	106.68
5513000	HS Food Serv Sup	4/18/2023	9524903-3327401	Purchase of Salad Tongs for Rio Vista Site JL CB	75.39
5513000	HS Food Serv Sup	4/26/2023	10060995761	Menard HS/EHS purchase of plates, cups, napkins, foil, forks, and spoons JL CB	374.24
				Total H04 - Grant H04, CACFP Head Start Nutrition FY 22-23	1,182.27
Report Opening/Current Balance					
Report Transaction Totals					28,912.38
Report Current Balances					

CVCOG  
Vendor Activity - Head Start Deans Dairy Corporate  
H04 - Grant H04, CACFP Head Start Nutrition FY 22-23  
From 4/1/2023 Through 4/30/2023

<u>Line Item Code</u>	<u>Line Item Title</u>	<u>Document Date</u>	<u>Document Number</u>	<u>Document Description</u>	<u>Expenses</u>
5295000	HS Nutrition Service	2/27/2023	652245360	Milk for BS HS	262.38
5295000	HS Nutrition Service	2/27/2023	652245361	Milk for Day HS/EHS	549.69
5295000	HS Nutrition Service	2/28/2023	650642269	Milk for ED HS	29.15
5295000	HS Nutrition Service	2/28/2023	652050711	Milk for RV HS/EHS	475.19
5295000	HS Nutrition Service	3/1/2023	650642277	Milk for EL HS	23.85
5295000	HS Nutrition Service	3/1/2023	650642299	Milk for MN HS/EHS	124.55
5295000	HS Nutrition Service	3/1/2023	652245402	Milk for OZ HS	53.40
5295000	HS Nutrition Service	3/6/2023	652245674	Milk for BS HS	190.80
5295000	HS Nutrition Service	3/6/2023	652245675	Milk for Day HS/EHS	382.20
5295000	HS Nutrition Service	3/7/2023	650642661	Milk for ED HS	18.55
5295000	HS Nutrition Service	3/7/2023	652051082	Milk for RV HS/EHS	382.17
5295000	HS Nutrition Service	3/8/2023	650642684	Milk for EL HS	15.90
5295000	HS Nutrition Service	3/8/2023	652245716	Milk for OZ HS	53.40
5295000	HS Nutrition Service	3/20/2023	652246302	Blackshear HS purchase of milk for children	262.38
5295000	HS Nutrition Service	3/20/2023	652246303	Day HS/EHS purchase of milk for children	406.26
5295000	HS Nutrition Service	3/27/2023	652246616	Milk for BS HS	246.46
5295000	HS Nutrition Service	3/27/2023	652246617	Milk for Day HS/EHS	501.93
5295000	HS Nutrition Service	3/28/2023	650643843	Milk for ED HS	26.50
5295000	HS Nutrition Service	3/28/2023	652052150	Milk for RV HS/EHS	501.66
5295000	HS Nutrition Service	3/29/2023	650643850	Milk for EL HS	31.80
5295000	HS Nutrition Service	3/29/2023	652246661	Milk for OZ HS	53.40
5295000	HS Nutrition Service	3/30/2023	650643883	Milk for MN HS/EHS	113.95
5295000	HS Nutrition Service	4/3/2023	652246931	Milk for BS HS	214.68
5295000	HS Nutrition Service	4/3/2023	652246932	Milk for Day HS/EHS	478.14
5295000	HS Nutrition Service	4/4/2023	650644239	Milk for ED HS	26.50
5295000	HS Nutrition Service	4/4/2023	652052444	Milk for RV HS/EHS	477.84
5295000	HS Nutrition Service	4/5/2023	650644246	Milk for EL HS	21.20
5295000	HS Nutrition Service	4/5/2023	652246979	Milk for OZ HS	53.40
5295000	HS Nutrition Service	4/6/2023	650644275	Milk for MN HS/EHS	79.50
5295000	HS Nutrition Service	4/10/2023	652247248	Milk for BS HS	238.50
5295000	HS Nutrition Service	4/10/2023	652247249	Milk for Day HS/EHS	501.93
5295000	HS Nutrition Service	4/11/2023	650644621	Milk for ED HS	26.50
5295000	HS Nutrition Service	4/11/2023	652052743	Milk for RV HS/EHS	589.14

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Vendor Activity - Head Start Deans Dairy Corporate  
H04 - Grant H04, CACFP Head Start Nutrition FY 22-23  
From 4/1/2023 Through 4/30/2023

<u>Line Item Code</u>	<u>Line Item Title</u>	<u>Document Date</u>	<u>Document Number</u>	<u>Document Description</u>	<u>Expenses</u>
5295000	HS Nutrition Service	4/12/2023	650644634	Milk for EL HS	15.90
5295000	HS Nutrition Service	4/12/2023	650644654	Milk for MN HS/EHS	58.30
5295000	HS Nutrition Service	4/12/2023	652247297	Milk for OZ HS	35.60
5295000	HS Nutrition Service	4/17/2023	652247566	Blackshear HS purchase of milk for children	262.38
5295000	HS Nutrition Service	4/17/2023	652247567	Blackshear HS credit for returned 1% milk (2)	(5.30)
5295000	HS Nutrition Service	4/17/2023	652247568	Day HS/EHS purchase of milk for children	514.97
5295000	HS Nutrition Service	4/18/2023	650645020	Eden HS purchase of milk for children	26.50
5295000	HS Nutrition Service	4/18/2023	652053037	Rio Vista HS/EHS purchase of milk for children	381.90
5295000	HS Nutrition Service	4/19/2023	650645028	Eldorado HS purchase of milk for children	26.50
5295000	HS Nutrition Service	4/19/2023	652247610	Ozona HS purchase of milk for children	35.60
5295000	HS Nutrition Service	4/20/2023	650645063	Menard HS/EHS purchase of milk for children	113.95
					8,879.20
				Total H04 - Grant H04, CACFP Head Start Nutrition FY 22-23	8,879.20
	Report Opening/Current Balance				
	Report Transaction Totals				8,879.20
	Report Current Balances				

CVCOG  
 Vendor Activity - Head Start First Financial Credit Card  
 H03 - HHS-ACF Grant H03, Head Start FY 22-23 06CH010970-04  
 From 4/1/2023 Through 4/30/2023

<u>Line Item Code</u>	<u>Line Item Title</u>	<u>Document Date</u>	<u>Document Number</u>	<u>Document Description</u>	<u>Expenses</u>
5309000	Travel-In Region	3/30/2023	192000613985	car rental for travel to MN HS/EHS, ED HS FF MH	74.06
5309000	Travel-In Region	3/30/2023	970370	Fuel for rental car ED, MN HS/EHS FF MH	38.86
5309000	Travel-In Region	4/27/2023	517244	Fuel for rental car- EL, CH HS FF MH	12.11
					125.03
				Total H03 - HHS-ACF Grant H03, Head Start FY 22-23 06CH010970-04	125.03

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 Vendor Activity - Head Start First Financial Credit Card  
 H04 - Grant H04, CACFP Head Start Nutrition FY 22-23  
 From 4/1/2023 Through 4/30/2023

<u>Line Item Code</u>	<u>Line Item Title</u>	<u>Document Date</u>	<u>Document Number</u>	<u>Document Description</u>	<u>Expenses</u>
5295000	HS Nutrition Service	3/30/2023	700345	milk for Day HS/EHS FF MH	6.76
				Total H04 - Grant H04, CACFP Head Start Nutrition FY 22-23	6.76
Report Opening/Current Balance					_____
Report Transaction Totals					_____
Report Current Balances					_____
					=====

CVCOG  
 Vendor Activity - Head Start Lowes Pay and Save  
 H04 - Grant H04, CACFP Head Start Nutrition FY 22-23  
 From 4/1/2023 Through 4/30/2023

<u>Line Item Code</u>	<u>Line Item Title</u>	<u>Document Date</u>	<u>Document Number</u>	<u>Document Description</u>	<u>Expenses</u>
5295000	HS Nutrition Service	3/1/2023	230301-179-1-1-28	Nutritional items for EL HS	4.38
5295000	HS Nutrition Service	3/3/2023	230303-179-1-1-4	Nutritional items for EL HS	11.52
5295000	HS Nutrition Service	3/6/2023	230306-21-1-1-22	Nutritional items for EL HS	15.07
5295000	HS Nutrition Service	3/7/2023	230307-179-1-1-84	Nutritional items for EL HS	11.14
5295000	HS Nutrition Service	3/20/2023	230320-21-1-1-9	Nutritional items for EL HS	12.87
5295000	HS Nutrition Service	3/20/2023	230320-346-1-1-39	Nutritional items for MN HS/EHS	37.16
5295000	HS Nutrition Service	3/21/2023	230321-113-1-1-2	Nutritional items for EL HS	30.63
5295000	HS Nutrition Service	3/24/2023	230324-113-1-1-20	Nutritional items for EL HS	11.27
5295000	HS Nutrition Service	3/27/2023	230307-21-1-1-33	Nutritional items for EL HS	28.36
5295000	HS Nutrition Service	3/27/2023	230327-21-1-1-49	Nutritional items for EL HS	11.76
5295000	HS Nutrition Service	3/27/2023	230327-65-3-3-11	Nutritional items for ED HS	87.03
5295000	HS Nutrition Service	3/29/2023	230329-21-1-1-49	Nutritional items for EL HS	7.09
5295000	HS Nutrition Service	3/31/2023	230331-239-2-2-48	Nutritional items for OZ HS	67.89
5295000	HS Nutrition Service	4/3/2023	230403-147-2-2-9	Nutritional items for ED HS	19.82
5295000	HS Nutrition Service	4/5/2023	230405-365-1-1-37	Nutritional items for MN HS/EHS	20.50
5295000	HS Nutrition Service	4/10/2023	230410-147-2-2-17	Nutritional items for ED HS	45.04
5295000	HS Nutrition Service	4/12/2023	230412-365-1-1-43	Nutritional items for MN HS/EHS	28.92
5295000	HS Nutrition Service	4/13/2023	230413-65-3-3-27	Nutritional items for ED HS	2.84
5295000	HS Nutrition Service	4/17/2023	230417-151-2-2-11	Nutritional items for ED HS	60.98
5295000	HS Nutrition Service	4/18/2023	230418-373-3-3-4	Nutritional items for MN HS/EHS	45.83
5295000	HS Nutrition Service	4/20/2023	230420-177-2-2-13	Nutritional items for ED HS	7.91
5295000	HS Nutrition Service	4/24/2023	230424-177-2-2-23	Nutritional items for ED HS	41.38
5295000	HS Nutrition Service	4/24/2023	230424-239-2-2-34	Nutritional items for OZ HS	75.03
5295000	HS Nutrition Service	4/25/2023	230425-365-1-1-39	Nutritional items for MN HS/EHS	59.19
					743.61
Total H04 - Grant H04, CACFP Head Start Nutrition FY 22-23					743.61

Report Opening/Current Balance

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Vendor Activity - Head Start Lowes Pay and Save  
H04 - Grant H04, CACFP Head Start Nutrition FY 22-23  
From 4/1/2023 Through 4/30/2023

<u>Line Item Code</u>	<u>Line Item Title</u>	<u>Document Date</u>	<u>Document Number</u>	<u>Document Description</u>	<u>Expenses</u>
	Report Transaction Totals				743.61
	Report Current Balances				<hr/> <hr/> <hr/>



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Vendor Activity - Head Start Sysco  
H04 - Grant H04, CACFP Head Start Nutrition FY 22-23  
From 4/1/2023 Through 4/30/2023

<u>Line Item Code</u>	<u>Line Item Title</u>	<u>Document Date</u>	<u>Document Number</u>	<u>Document Description</u>	<u>Expenses</u>
5295000	HS Nutrition Service	2/18/2022	278259165	Day HS/EHS credit for food for children (SR#22727320)	(50.60)
5295000	HS Nutrition Service	3/2/2022	278268792	Day HS/EHS credit for food for children (SR#22999879)	(77.95)
5295000	HS Nutrition Service	3/2/2022	278268793	Rio Vista HS/EHS credit for food for children (SR#23002541)	(277.79)
5295000	HS Nutrition Service	3/2/2023	278539923	Nutritional items for Day HS/EHS	3,173.66
5295000	HS Nutrition Service	3/4/2023	278542209	Credit for spoiled lettuce	(42.30)
5295000	HS Nutrition Service	3/25/2023	278556923	Ozona credit for non-delivery of oranges	(89.04)
5295000	HS Nutrition Service	3/28/2023	278558493	Rio Vista HS/EHS nutrition for children and kitchen supplies	3,023.64
5295000	HS Nutrition Service	3/30/2023	278559935	Eldorado nutrition for children	490.92
5295000	HS Nutrition Service	3/30/2023	278559966	Day HS/EHS nutrition for children and kitchen supplies	3,427.19
5295000	HS Nutrition Service	4/4/2023	278565216	Blackshear HS nutritional items for children and kitchen supplies	1,246.13
5295000	HS Nutrition Service	4/4/2023	278565272	Rio Vista HS/EHS nutritional items for children and kitchen supplies	1,784.65
5295000	HS Nutrition Service	4/5/2023	278565968	Eden nutritional items for children	484.19
5295000	HS Nutrition Service	4/6/2023	278566679	Blackshear credit for non-delivery of lettuce	(5.40)
5295000	HS Nutrition Service	4/6/2023	278566849	Day HS/EHS nutritional items for children and kitchen supplies	2,593.27
5295000	HS Nutrition Service	4/8/2023	278568749	Day credit for unacceptable substitute for steak fingers	(110.62)
5295000	HS Nutrition Service	4/11/2023	278570037	Blackshear HS nutritional items for children and kitchen supplies	1,979.23
5295000	HS Nutrition Service	4/11/2023	278570094	Rio Vista HS/EHS nutritional items for children and kitchen supplies	2,790.78
5295000	HS Nutrition Service	4/12/2023	278570822	Menard HS/EHS nutritional items for children and kitchen supplies	776.23
5295000	HS Nutrition Service	4/13/2023	278571287	Blackshear nutritional items for children	77.08
5295000	HS Nutrition Service	4/13/2023	278571647	Day HS/EHS nutritional items for children and kitchen supplies	3,255.84

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Vendor Activity - Head Start Sysco  
H04 - Grant H04, CACFP Head Start Nutrition FY 22-23  
From 4/1/2023 Through 4/30/2023

<u>Line Item Code</u>	<u>Line Item Title</u>	<u>Document Date</u>	<u>Document Number</u>	<u>Document Description</u>	<u>Expenses</u>
5295000	HS Nutrition Service	4/18/2023	278575168	Rio Vista HS/EHS nutritional items for children and kitchen supplies	3,016.73
5295000	HS Nutrition Service	4/18/2023	278575194	Blackshear HS nutritional items for children and kitchen supplies	1,981.79
5295000	HS Nutrition Service	4/20/2023	278576759	Eldorado HS nutrition items for children and kitchen supplies	704.19
5295000	HS Nutrition Service	4/20/2023	278576784	Day HS/EHS nutrition items for children and kitchen supplies	3,538.73
5295000	HS Nutrition Service	4/25/2023	278580362	Blackshear HS nutrition items for children and kitchen supplies	1,886.88
5295000	HS Nutrition Service	4/25/2023	278580396	Rio Vista HS/EHS nutrition items for children and kitchen supplies	3,603.63
5295000	HS Nutrition Service	4/27/2023	278581866	Day HS/EHS nutrition items for children and kitchen supplies	3,017.87
5513000	HS Food Serv Sup	3/2/2023	278539923	Nutritional items for Day HS/EHS	253.05
5513000	HS Food Serv Sup	3/28/2023	278558493	Rio Vista HS/EHS nutrition for children and kitchen supplies	571.45
5513000	HS Food Serv Sup	3/30/2023	278559966	Day HS/EHS nutrition for children and kitchen supplies	264.95
5513000	HS Food Serv Sup	4/4/2023	278565216	Blackshear HS nutritional items for children and kitchen supplies	526.25
5513000	HS Food Serv Sup	4/4/2023	278565272	Rio Vista HS/EHS nutritional items for children and kitchen supplies	489.95
5513000	HS Food Serv Sup	4/6/2023	278566849	Day HS/EHS nutritional items for children and kitchen supplies	59.10
5513000	HS Food Serv Sup	4/11/2023	278570037	Blackshear HS nutritional items for children and kitchen supplies	320.65
5513000	HS Food Serv Sup	4/11/2023	278570094	Rio Vista HS/EHS nutritional items for children and kitchen supplies	374.94
5513000	HS Food Serv Sup	4/12/2023	278570822	Menard HS/EHS nutritional items for children and kitchen supplies	60.85
5513000	HS Food Serv Sup	4/13/2023	278571647	Day HS/EHS nutritional items for children and kitchen supplies	461.38
5513000	HS Food Serv Sup	4/18/2023	278575168	Rio Vista HS/EHS nutritional items for children and kitchen supplies	932.00

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Vendor Activity - Head Start Sysco  
H04 - Grant H04, CACFP Head Start Nutrition FY 22-23  
From 4/1/2023 Through 4/30/2023

<u>Line Item Code</u>	<u>Line Item Title</u>	<u>Document Date</u>	<u>Document Number</u>	<u>Document Description</u>	<u>Expenses</u>
5513000	HS Food Serv Sup	4/18/2023	278575194	Blackshear HS nutritional items for children and kitchen supplies	70.00
5513000	HS Food Serv Sup	4/20/2023	278576759	Eldorado HS nutrition items for children and kitchen supplies	191.20
5513000	HS Food Serv Sup	4/20/2023	278576784	Day HS/EHS nutrition items for children and kitchen supplies	510.15
5513000	HS Food Serv Sup	4/25/2023	278580362	Blackshear HS nutrition items for children and kitchen supplies	387.80
5513000	HS Food Serv Sup	4/25/2023	278580396	Rio Vista HS/EHS nutrition items for children and kitchen supplies	182.85
5513000	HS Food Serv Sup	4/27/2023	278581866	Day HS/EHS nutrition items for children and kitchen supplies	822.58
					48,678.08
				Total H04 - Grant H04, CACFP Head Start Nutrition FY 22-23	48,678.08
Report Opening/Current Balance					
Report Transaction Totals					48,678.08
Report Current Balances					

CVCOG  
Vendor Activity - Head Start West Texas Fire Extinguisher  
H03 - HHS-ACF Grant H03, Head Start FY 22-23 06CH010970-04  
From 4/1/2023 Through 4/30/2023


<u>Line Item Code</u>	<u>Line Item Title</u>	<u>Document Date</u>	<u>Document Number</u>	<u>Document Description</u>	<u>Expenses</u>
5510000	Supplies	2/22/2023	272232A	Blackshear HS purchase of general, classroom, and nutrition supplies	346.93
5510000	Supplies	4/3/2023	274235-02	Day HS purchase of general supplies - hand soap	30.98
5510000	Supplies	4/3/2023	274605	Menard HS/EHS purchase of general, classroom, and kitchen supplies	231.30
5510000	Supplies	4/3/2023	274605-01	Menard HS/EHS purchase of general, classroom, and kitchen supplies	5.55
5510000	Supplies	4/5/2023	274752	Bottle trigger spray head and trash can liners for Rio Vista Head Start site	80.89
5510000	Supplies	4/6/2023	274836	Paper towels and Toilet paper for Rio Vista Head Start Site	319.28
5510000	Supplies	4/11/2023	273904-01	Christoval HS purchase of plastic cups for general and classroom use	20.18
5510000	Supplies	4/11/2023	274605-02	Menard HS/EHS purchase of general, classroom, and kitchen supplies	52.48
5510000	Supplies	4/19/2023	275526	Rio Vista HS/EHS purchase of general, classroom, and kitchen supplies	369.46
5510000	Supplies	4/24/2023	275693	Blackshear HS purchase of general, classroom, and nutrition supplies	147.04
5510000	Supplies	4/25/2023	275526-01	Rio Vista purchase of vinyl gloves	47.08
5510000	Supplies	4/25/2023	275693-01	Blackshear HS purchase of general and classroom supplies - gloves	41.19
5510000	Supplies	4/27/2023	275693-02	Blackshear HS purchase of vinyl gloves for general and classroom use	11.77
5512000	HS Class Room Supplies	2/22/2023	272232A	Blackshear HS purchase of general, classroom, and nutrition supplies	169.49
5512000	HS Class Room Supplies	4/3/2023	274605	Menard HS/EHS purchase of general, classroom, and kitchen supplies	177.40
5512000	HS Class Room Supplies	4/3/2023	274605-01	Menard HS/EHS purchase of general, classroom, and kitchen supplies	5.56
5512000	HS Class Room Supplies	4/5/2023	274752	Bottle trigger spray head and trash can liners for Rio Vista Head Start site	68.39
5512000	HS Class Room Supplies	4/11/2023	273904-01	Christoval HS purchase of plastic cups for general and classroom use	20.17

CVCOG  
Vendor Activity - Head Start West Texas Fire Extinguisher  
H03 - HHS-ACF Grant H03, Head Start FY 22-23 06CH010970-04  
From 4/1/2023 Through 4/30/2023

<u>Line Item Code</u>	<u>Line Item Title</u>	<u>Document Date</u>	<u>Document Number</u>	<u>Document Description</u>	<u>Expenses</u>
5512000	HS Class Room Supplies	4/11/2023	274605-02	Menard HS/EHS purchase of general, classroom, and kitchen supplies	125.58
5512000	HS Class Room Supplies	4/19/2023	275526	Rio Vista HS/EHS purchase of general, classroom, and kitchen supplies	194.21
5512000	HS Class Room Supplies	4/24/2023	275693	Blackshear HS purchase of general, classroom, and nutrition supplies	147.04
5512000	HS Class Room Supplies	4/25/2023	275693-01	Blackshear HS purchase of general and classroom supplies - gloves	41.20
5512000	HS Class Room Supplies	4/27/2023	275693-02	Blackshear HS purchase of vinyl gloves for general and classroom use	11.77
5512000	HS Class Room Supplies	4/27/2023	275825-01	Day HS/EHS purchase of vinyl gloves for classroom use	117.70
5513000	HS Food Serv Sup	4/24/2023	275693	Blackshear HS purchase of general, classroom, and nutrition supplies	50.24
					2,832.88
				Total H03 - HHS-ACF Grant H03, Head Start FY 22-23 06CH010970-04	2,832.88

CVCOG  
Vendor Activity - Head Start West Texas Fire Extinguisher  
H04 - Grant H04, CACFP Head Start Nutrition FY 22-23  
From 4/1/2023 Through 4/30/2023

<u>Line Item Code</u>	<u>Line Item Title</u>	<u>Document Date</u>	<u>Document Number</u>	<u>Document Description</u>	<u>Expenses</u>
5513000	HS Food Serv Sup	2/22/2023	272232A	Blackshear HS purchase of general, classroom, and nutrition supplies	68.79
5513000	HS Food Serv Sup	4/3/2023	274605	Menard HS/EHS purchase of general, classroom, and kitchen supplies	134.13
5513000	HS Food Serv Sup	4/3/2023	274605-01	Menard HS/EHS purchase of general, classroom, and kitchen supplies	5.56
5513000	HS Food Serv Sup	4/11/2023	274605-02	Menard HS/EHS purchase of general, classroom, and kitchen supplies	52.49
5513000	HS Food Serv Sup	4/11/2023	275037	Mop Heads, Disinfecting wipes, towels and gloves for Day Head Start Site	138.64
5513000	HS Food Serv Sup	4/18/2023	275425	Vent & Hood Semi-annual Inspection & 4 fusible links MN HS/EHS	164.00
5513000	HS Food Serv Sup	4/19/2023	275526	Rio Vista HS/EHS purchase of general, classroom, and kitchen supplies	134.95
5513000	HS Food Serv Sup	4/19/2023	275527	Disinfecting wipes and foodservice towels for Day HS Site	186.82
5513000	HS Food Serv Sup	4/27/2023	275920	Day HS/EHS disinfectant cleaner for mopping	31.83
				Total H04 - Grant H04, CACFP Head Start Nutrition FY 22-23	917.21
Report Opening/Current Balance					
Report Transaction Totals					3,750.09
Report Current Balances					



## 1301 Program Governance

### **Part 1301 – Program Governance**

1301.10 Purpose

1301.20 Governing Body

1301.30 Policy Council and Policy Committee

1301.40 Parent Committees Family partnership services.

1301.50 Training

1031.60 Impasse Procedures

<b>Standard</b>	<b>Performance Standard</b>	<b>Plan of Action</b>
1301.1	<p><b>Governing Body Purpose</b></p> <p>An agency, as defined in part 1305 of this chapter, must establish and maintain a formal structure for program governance that includes a governing body, a policy council at the agency level and policy committee at the delegate level, and a parent committee. Governing bodies have a legal and fiscal responsibility to administer and oversee the agency’s Head Start and Early Head Start programs. Policy councils are responsible for the direction of the agency’s Head Start and Early Head Start.</p>	
1301.2 (a)	<p><b>Governing Body Composition.</b></p> <p>The composition of a governing body must be in accordance with the requirements specified at section 642(c)(1)(B) of the Act, except where specific exceptions are authorized in the case of public entities at section 642(c)(1)(D) of the Act. Agencies must ensure members of the governing body do not have a conflict of interest, pursuant to section 642(c)(1)(C) of the Act.</p>	<p><b>Section 642(c)(1)(B)</b></p> <p>(B) COMPOSITION- The governing body shall be composed as follows:</p> <ul style="list-style-type: none"> <li>(i) Not less than 1 member shall have a background and expertise in fiscal management or accounting.</li> <li>(ii) Not less than 1 member shall have a background and expertise in early childhood education and development.</li> <li>(iii) Not less than 1 member shall be a licensed attorney familiar with issues that come before the governing body.</li> <li>(iv) Additional members shall: <ul style="list-style-type: none"> <li>(I) Reflect the community to be served and include parts of children who are currently or were formerly enrolled in Head Start programs; and</li> <li>(II) are selected for their expertise in education business administration or community affairs.</li> </ul> </li> </ul> <p><b>Section 642(c)(1)(D) of the Act:</b></p> <p>(D) EXCEPTION- If an individual holds a position as a result of public election or political appointment, and such position carries with it a concurrent appointment to serve as a member of a Head Start agency governing body, and such individual has any conflict of interest described in clause (ii) or (iii) of subparagraph (C)</p> <ul style="list-style-type: none"> <li>(i) such individual shall not be prohibited from serving on such body and the Head Start agency shall report such conflict to the Secretary; and</li> </ul>



<p>1301.2 (b) (1)</p>	<p><b>Governing Body</b> <b><u>Duties and Responsibilities</u></b> The Governing body is responsible for activities specified at section 642(c)(1)(E)</p>	<p>(ii) If the position held as a result of public election or political appointment provides compensation, such individual shall not be prohibited from receiving such compensation.</p> <p><b>Section 642(c)(1)(C) of the Act:</b> (C) CONFLICT OF INTEREST- Members of the governing body shall</p> <ul style="list-style-type: none"> <li>(i) not have a financial conflict of interest with the Head Start agency;</li> <li>(ii) Not receive compensation for serving on the governing body or for providing services to the Head Start agency;</li> <li>(iii) not be employed, nor shall members of their immediate family be employed, by the Head Start agency; and</li> </ul> <p>Operate as an entity independent of staff employed by the Head Start agency.</p> <p><b>Section 642(c)(1)(E) of the Act:</b> (E) RESPONSIBILITIES – The governing body shall-</p> <ul style="list-style-type: none"> <li>(i) have legal and fiscal responsibilities for administering and overseeing programs including the safeguarding of Federal funds;</li> <li>(ii) adopt practices that assure active, independent, and informed governance of the Head Start agency, including practices consistent with subsection (d)(1), and fully participate in the development, planning and evaluation of the Head Start/Early Head Start programs involved;</li> <li>(iii) be responsible for ensuring compliance with Federal laws (including regulations) and applicable, State tribal, and local laws (including regulations); and</li> <li>(iv) be responsible for other activities, including- <ul style="list-style-type: none"> <li>(I) selecting the service areas;</li> <li>(II) establish procedures and criteria for recruitment selection and enrollment of children; <b>(see 1302.14)</b></li> <li>(III) reviewing all applications for funding and amendments to applications for funding for programs under this subchapter;</li> <li>(IV) establishing procedures and guidelines for accessing and collecting information described in subsection (d)(2);</li> <li>(V) reviewing and approving all major policies of the agency, including:</li> </ul> </li> </ul>
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		<ul style="list-style-type: none"><li>(aa) the annual self-assessment and financial audit</li><li>(bb) such agency’s progress in carrying out the programmatic and fiscal provisions in such agency’s grant application, including implementation of corrective actions; and</li><li>(cc) personnel policies of such agencies regarding the hiring, evaluation, termination, and compensation of agency employees;</li></ul> <p>(VI) developing procedures for how members of the policy council are selected, consistent with paragraph (2)(B) See 1301.3B</p> <p>(VII) approving financial management, accounting, and reporting policies, and compliance with laws and</p> <ul style="list-style-type: none"><li>(aa) approval of all major financial expenditures of the agency;</li><li>(bb) annual approval of the operating budget of the agency;</li><li>(cc) selection (except when a financial auditor is assigned by the State under State law or is assigned under local law) of independent financial auditors who shall report all critical accounting policies and practices to the governing body; and</li><li>(dd) monitoring of the agency’s actions to correct any audit findings and of other action necessary to comply with applicable laws (including regulations) governing financial statement and accounting practices;</li></ul> <p>(VIII) reviewing results from monitoring conducted under section 641A©, including appropriate follow up activities,</p> <p>(IX) approving personnel policies and procedures, including policies and procedures regarding the hiring, evaluation, compensation, and termination of the Executive Director, Head Start Director, Director of Human Resources, Chief Fiscal Officer, and any-other person in an equivalent position with the agency;</p> <p>(X) establishing, adopting, and periodically updating written standards of conduct that establish standards and formal procedures for disclosing, addressing, and resolving</p>
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<p>(2)</p>	<p>The governing body must use ongoing monitoring results, data on <u>school readiness goals</u>, other information described in <u>§1302.102</u>, and information described at section <u>642(d)(2)</u> of the Act to conduct its responsibilities.</p>	<p>The program establishes community assessment grant and self-assessment goals which include areas from all content area and school readiness.</p> <p><b>Section 642(d)(2) of the Act:</b>  (d) PROGRAM GOVERNANCE ADMINISTRATION-  (2) CONDUCT OF RESPONSIBILITIES – Each Head Start agency shall ensure them having accurate and regular information for use by the governing body and the policy council, about program planning, policies, and Head Start agency operations, including -</p> <ul style="list-style-type: none"> <li>(A) monthly financial statements, including credit card expenditures;</li> <li>(B) monthly program information summaries;</li> <li>(C) program enrollment reports, including attendance reports for children whose care is partially subsidized by another public agency;</li> <li>(D) monthly reports of meals and snacks provided through programs of the Department of Agriculture;</li> <li>(E) the financial audit;</li> <li>(F) the annual self-assessment, including any findings related to such assessment;</li> <li>(G) the communitywide strategic planning and needs assessment of the Head Start agency, including any applicable updates;</li> <li>(H) Communication and guidance from the Secretary; and the program information reports.</li> </ul>
<p>1301.2 (c) (1)</p>	<p><b>Governing Body Advisory Committees</b>  A governing body may establish advisory committees as it deems necessary for effective governance and improvement of the program.</p>	<p>Follow Standard</p>
<p>(2)</p>	<p>If a governing body establishes an advisory committee to oversee key responsibilities related to program governance, it must:</p>	<p>Follow Standard</p>
<p>(i)</p>	<ul style="list-style-type: none"> <li>Establish the structure, communication, and oversight in such a way that the governing body continues to maintain its legal and fiscal responsibility for the Head Start Agency; and,</li> </ul>	

(ii)	Notify the responsible HHS official of its intent to establish such an advisory committee.	
1301.3 (a)	<p><b>Policy Council and Policy Committees</b>  <u>Establishing policy councils and policy committees.</u>  Each agency must establish and maintain a policy council responsible for the direction of the Head Start program at the agency level, and a policy committee at the delegate level. If an agency delegate’s operational responsibility for the entire Head Start or Early Head Start program to one delegate agency, the policy council and policy committee may be the same body.</p>	<p>Policy Council members are chosen, recruited, and or voted upon to represent their center during Parent Meetings in August/September. Policy Council members stay on board one calendar year until voted into the position again or a new policy council member takes over. Policy Committee is not applicable because we do not house a delegate agency.</p>
(b) (1)	<p><b>Composition</b>  A program must establish a policy council in accordance with section 642(c)(2)(B) of the Act, or a policy committee at the delegate level in accordance with section 642(c)(3) of the Act, as early in the program year as possible. Parents of children currently enrolled in each program option must be proportionately represented on the policy council and on the policy committee at the delegate level.</p>	<p><b>Section 642(c)(2)(B) of the Act:</b>  (2) POLICY COUNCIL -  (B) COMPOSITION AND SELECTION-  (i) The policy council shall be elected by the parents of children who are currently enrolled in the Head Start program of the Head Start agency.  (ii) The policy council shall be composed of--  (I) parents of children who are currently enrolled in the Head Start program of the Head Start agency (including any delegate agency), who shall constitute a majority of the members of the policy council; and  (II) members at large of the community served by the Head Start agency (including any delegate agency), who may include parents of children who were formerly enrolled in the Head Start program of the agency.</p>
(2)	<p>The program must ensure members of the policy council, and of the policy committee at the delegate level, do not have a conflict of interest pursuant to sections 642(c)(2)(C) and 642(c)(3)(B) of the Act. Staff may not serve on the policy council or policy committee at the delegate level except parents who occasionally substitute as staff. In the case of tribal grantees, this exclusion applies only to tribal staff who work in areas directly related to or which directly impact administrative, fiscal, or programmatic issues.</p>	<p><b>Section 642(c)(3) of the Act:</b>  (3) POLICY COMMITTEES- Not Applicable</p> <p><b>Section 642(c)(2)(C) of the Act:</b>  (2) POLICY COUNCIL –  (C) CONFLICT OF INTEREST- Members of the policy council shall-  (i) not have a conflict of interest with the Head Start agency; and  (ii) not receive compensation for serving on the policy council or for providing services to the Head Start agency. (See Mileage section)</p>

<p>1301.3 (c) (1)</p>	<p><b>Policy Council and Policy Committees</b> <b><u>Duties and Responsibilities</u></b> A policy council is responsible for activities specified at section 642(c)(2)(D) of the Act. A policy committee must approve and submit to the delegate agency its decisions in each of the following areas referenced at section 642(c)(2)(D)(i) through (vii) of the Act.</p>	<p><b>Section 642(c)(3)(B) of the Act: N/A</b> (3) POLICY COMMITTEES- Not Applicable</p> <p><b>Section 642(c)(2)(D) of the Act:</b> (2) POLICY COUNCIL- (D) RESPONSIBILITIES- The policy council shall approve and submit to the governing body decisions about each of the following activities:</p> <ul style="list-style-type: none"> <li>(i) Activities to support the active involvement of parents in supporting program operations, including policies to ensure that the Head Start agency is responsive to community and parent needs.</li> <li>(ii) Program, recruitment, selection, and enrollment priorities.</li> <li>(iii) Applications for funding and amendments to applications for funding for programs under this subchapter, prior to submission to applications described in this clause.</li> <li>(iv) Budget planning for program expenditures, including policies for reimbursement and participation in policy council activities.</li> <li>(v) Bylaws for the operation of the policy council.</li> <li>(vi) Program personnel policies and decisions regarding the employment of program staff, consistent with paragraph (1)(E)(iv)(IX), including standards of conduct for program staff, contractors, and volunteers and criteria for the employment and dismissal of program staff.</li> <li>(vii) Developing procedures for how members of the policy council of the Head Start agency will be elected</li> <li>(viii) Recommendations on the selection of delegate agency and the service areas for such agencies.</li> </ul> <p><b>Section 642(c)(2)(D)(i) of the Act: N/A</b> (3) POLICY COMMITTEES- Not Applicable</p> <p><b>Section 642(d)(2) of the Act:</b> (d) PROGRAM GOVERNANCE ADMINISTRATION- (2) CONDUCT OF RESPONSIBILITIES – Each Head Start agency shall ensure them having accurate and regular information for use by the governing body and the policy council, about program planning, policies, and Head Start agency operations, including -</p>
<p>(2)</p>	<p>A policy council, and a policy committee at the delegate level, must use ongoing monitoring results, data on school readiness goals, other information described in §1302.102, and information described in section 642(d)(2) of the Act to conduct its responsibilities.</p>	

<p>1301.3 (d) (1)</p>	<p><b>Policy Council and Policy Committees</b> <b>Term</b> A member will serve for one year.</p>	<p>(A) monthly financial statements, including credit card expenditures; (B) monthly program information summaries;</p> <p>(C) program enrollment reports, including attendance reports for children whose care is partially subsidized by another public agency; (D) monthly reports of meals and snacks provided through programs of the Department of Agriculture; (E) the financial audit; (F) the annual self-assessment, including any findings related to such assessment; (G) the communitywide strategic planning and needs assessment of the Head Start agency, including any applicable updates; (H) Communication and guidance from the Secretary; and the program information reports.</p> <p>A member will serve a one-year term for their Head Start Center. Elections will be held as soon as possible but with-in two months of the Head Start Center start date. Site supervisors and Family Service Workers may recruit parent volunteers when volunteers do not step forward.</p>
<p>(2)</p>	<p>If the member intends to serve for another year, s/he must stand for re-election.</p>	<p>The member must be re-elected every year by the peers of their Head Start Center and may serve up to 5 term years. The term of office for a member of the Policy Council will extend from his/her time of election until the day on which the new Policy Council Member is elected and seated the following year.</p>
<p>(3)</p>	<p>The policy council, and policy committee at the delegate level, must include in its bylaws how many one-year terms, not to exceed five terms, a person may serve.</p>	<p><b>The Concho Valley Council of Governments Head Start/Early Head Start Policy Council By-Laws</b> states the length of membership for any voting representative will not exceed a lifetime total of 5 years.</p>
<p>(4)</p>	<p>A program must seat a successor policy council, or policy committee at the delegate level, before an existing policy council, or policy committee at the delegate level, may be dissolved.</p>	<p>Anytime during a term, a parent vacates his/her position, the center alternate will fill the vacancy. If the alternate declines to advance to the vacant position, elections will be held at the Head Start Center as soon as possible. Site supervisors and Family Service Workers may recruit parent volunteers when volunteers do not step forward.</p>

<p>1301.3 (e)</p>	<p><b>Policy Council and Policy Committees</b> <b><u>Reimbursement</u></b> A program must enable low-income members to participate fully in their policy council or policy committee responsibilities by providing, if necessary, reimbursements for reasonable expenses incurred by the low-income members.</p>	<p><b>The Concho Valley Council of Governments Head Start/Early Head Start Policy Council By-Laws</b> states that those members whose total annual income is equal to or below the poverty guideline will be eligible for mileage reimbursement if they are traveling outside of their hometown. Mileage reimbursement may include: roundtrip mileage to meetings and all required training. An alternate is subject to the reimbursement if they qualify in the absence of their voting member.</p>
<p><b>§1301.4</b> (a)</p> <p>(b)</p> <p>(1)</p> <p>(2)</p>	<p><b>Parent Committees</b> <b><u>Establishing Parent Committees</u></b> A program must establish a parent committee comprised exclusively of parents of currently enrolled children as early in the program year as possible. This committee must be established at the center level for center-based programs and at the local program level for other program options. When a program operates more than one option, parents may choose to have a separate committee for each option or combine membership. A program must ensure that parents of currently enrolled children understand the process for elections to the policy council or policy committee and other leadership opportunities.</p> <p><b>Parent Committees</b> <b><u>Requirements of Parent Committees</u></b> Within the parent committee structure, a program may determine the best methods to engage families using strategies that are most effective in their community, as long as the program ensures the parent committee carries out the following minimum responsibilities:</p> <p>Advise staff in developing and implementing local program policies, activities, and services to ensure they meet the needs of children and families;</p> <p>Have a process for communication with the policy council and policy committee; and</p>	<ol style="list-style-type: none"> <li>1. Parent committees will be established in the first two months of the school start date and be composed exclusively of Head Start/Early Head Start Parents.</li> <li>2. Every Parent will have the opportunity to participate on the parent committee.</li> <li>3. Where centers have Head Start and Early Head Start the parent committee may be combined but if not will work together for the betterment of the school.</li> <li>4. The election process of Policy Council Representatives/Alternates and policy committee members will take place as soon as possible but with-in 2 months of the Head Start Center start date.</li> <li>5. Policy Council or Parent Committee members will communicate Policy Council meeting notes at parent meetings.</li> </ol> <p>All parents have the opportunity to participate and are encouraged to join the parent committee and policy council. Information on the function and importance of these entities are posted, distributed by <b>Welcome Packet</b>, media, flyers, and discussed in the parent meeting prior to elections and throughout the year.</p> <p>Parent committees are encouraged to participate in the following: school readiness goals, center/classroom engagements for learning and socialization, and involvement of planning for parent training topics in the <b>Parent Education Training Survey</b>.</p> <p>Policy council minutes and information will be presented and discussed at policy committee meetings when requested and applicable.</p>

(3)	Within the guidelines established by the governing body, policy council or policy committee, participate in the recruitment and screening of Early Head Start and Head Start employees.	The screening committee is established by volunteers of elected Policy Council Members. They can volunteer on the <b>Policy Council/Committee Information Sheet</b> . Human Resources will contact screening committee members prior to a screening for participation.
<b>§1301.5</b>	<p><b>Training</b></p> <p>An agency must provide appropriate training and technical assistance or orientation to the governing body, any advisory committee members, and the policy council, including training on program performance standards and training indicated in §1302.12(m) to ensure the members understand the information they receive and can effectively oversee and participate in the programs in the Head Start agency.</p>	The governing body and policy council representatives will be trained every two years on the following: roles and responsibilities, performance standards, code of conduct, confidentiality, rules of order, screening committee, nepotism, Policy Council by-laws, budgeting, conflict of interest, policies and procedures, methods on how to collect and complete accurate eligibility information from families and third party sources, strategies for treating families with dignity and respect and for dealing with possible issues of domestic violence, stigma, privacy, actions taken against staff, families, or participants who attempt to provide or intentionally provide false information. This training will take place within 180 days of the beginning of a new term for the governing body and or policy council.
<b>§1301.6</b> (a)           (1)  (2)  (3)	<p><b>Impasse Procedures</b></p> <p>To facilitate meaningful consultation and collaboration about decisions of the governing body and the policy council, each agency's governing body and policy council jointly must establish written procedures for resolving internal disputes between the governing board and policy council in a timely manner that include impasse procedures. These procedures must:</p> <p>Demonstrate that the governing body considers proposed decisions from the policy council and that the policy council considers proposed decisions from the governing body;</p> <p>If there is a disagreement, require the governing body and the policy council to notify the other in writing why it does not accept a decision; and,</p>	<p><b><u>Procedure:</u></b></p> <p>It is the intent of the Governing Board and the Policy Council to establish the internal dispute resolution procedure, to achieve resolution of disputes and/or impasses that may occur when concurrence and approval is required by both the Governing Board and the Policy Council, pursuant to the Agency's personnel policies and procedures and the Program Governance. Whenever a dispute arises relating to governance and management responsibilities of the Governing Board and the Policy Council, either party may initiate this dispute resolution procedure. It is the intent of the Policy Council and the Governing Board to equitably and fairly resolve any and all disputes utilizing the earliest level possible through this procedure.</p> <p><b><u>Internal Dispute Resolution:</u></b></p> <p><b>Step 1:</b> The Governing Board and Policy Council, with the assistance of the Executive Director and Head Start Director shall first attempt to informally resolve the dispute. The Executive Director shall facilitate communications between the two parties in an effort to ensure that both parties have sufficient background information to understand each respective position. If the matter is resolved in this process, the Executive Director shall confirm the resolution in writing to both the</p>



	<p>Describe a decision-making process and a timeline to resolve disputes and reach decisions that are not arbitrary, capricious, or illegal.</p>	<p>Governing Board and the Policy Council and the resolution shall be affirmed by both parties.</p> <p><b>Step 2:</b> If Step 1 fails to resolve the dispute informally, the Executive Committee Chairperson of the Governing Board and the Chairperson of the Policy Council shall conduct a formal joint meeting in an effort to resolve the dispute. This joint meeting shall be held not less than (2) and not more than (10) days after a written request by either party has been made. Both parties may agree to utilize outside persons, and a mediator may be selected by mutual agreement of the Governing Board and Policy Council.</p> <p><b>Impasse Procedure:</b></p> <p><b>Step 3:</b> If Step 2 fails, and a resolution cannot be reached, the Impasse procedures will be initiated. The Governing Board and the Policy Council shall submit the impasse to a local Dispute Resolution Center/Organization, and shall utilize their professional services. Procedures for conducting the mediation process shall be binding upon the Policy Council and the Governing Board. Written reports regarding the issues/concerns to be resolved shall be submitted to the mediation center not less than (10) days after completion of Step 2.</p>
(b)	<p>If the agency's decision-making process does not result in a resolution and an impasse continues, the governing body and policy council must select a mutually agreeable third-party mediator and participate in a formal process of mediation that leads to a resolution of the dispute.</p>	<p>The Mediation center's decision shall be rendered within (30) days after completion of the hearing, and shall be final and binding upon all parties.</p>
(c)	<p>For all programs except American Indian and Alaska Native programs, if no resolution is reached with a mediator, the governing body and policy council must select a mutually agreeable arbitrator whose decision is final.</p>	



# Part 1302 Program Operations

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## **Section**

1302.1 Overview

## **Subpart A – Eligibility, Recruitment, Selection, Enrollment, and Attendance**

1302.10 Purpose

1302.11 Determining community strengths, needs, and resources.

1302.12 Determining, verifying, and documenting eligibility

1302.13 Recruitment of children.

1302.14 Selection process.

1302.15 Enrollment.

1302.16 Attendance.

1302.17 Suspension and expulsion.

1302.18 Fees.

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<b>Standard</b>	<b>Performance Standard</b>	<b>Plan of Action</b>
<b>§1302.1</b>	<p><b>Overview.</b>  This part implements these statutory requirements in Sections 641A, 645, 645A, and 648A of the Act by describing all of the program performance standards that are required to operate Head Start, Early Head Start, American Indian and Alaska Native and Migrant or Seasonal Head Start programs. These part covers the full range of operation from enrolling eligible children and providing program services to those children and their families, to managing programs to ensure staff are qualified and supported to effectively provide services. This part also focuses on using data through ongoing program improvement to ensure high-quality service. As required in the Act, these provisions do not narrow the scope or quality of services covered in previous regulations. Instead, these regulations raise the quality standard to reflect science and best practices, and streamline and simplify requirements so programs can better understand what is required for quality services.</p>	
<b>Subpart A</b>	<b>Eligibility, Recruitment, Selection Enrollment and Attendance</b>	
<b>§1302.10</b>	<p><b>Purpose.</b> This subpart describes requirements of grantees for determining community strengths, needs and resources as well as recruitment areas. It contains requirements and procedures for the eligibility determination, recruitment, selection, enrollment and attendance of children and explains the policy concerning the charging of fees.</p>	
<b>§1302.11</b>	<b>Determining community strengths, needs, and resources.</b>	
(a)	<b><u>Service area.</u></b>	

Standard	Performance Standard	Plan of Action
(1)	A program must propose a service area in the grant application and define the area by county or sub-county area, such as a municipality, town or census tract or jurisdiction of a federally recognized Indian reservation.	Service Area established and approved.
(i)	A tribal program may propose a service area that includes areas where members of Indian tribes or those eligible for such membership reside, including but not limited to Indian reservation land, areas designated as near-reservation by the Bureau of Indian Affairs (BIA) provided that the service area is approved by the tribe's governing council, Alaska Native Villages, Alaska Native Regional Corporations with land-based authorities, Oklahoma Tribal Statistical Areas, and Tribal Designated Statistical Areas where federally recognized Indian tribes do not have a federally established reservation.	Not applicable
(ii)	If the tribe's service area includes any area specified in paragraph (a)(1)(i) of this section, and that area is also served by another program, the tribe may serve children from families who are members of a eligible to be members of such tribe and who reside in such areas as well as children from families who are not members of the tribe, but who reside within the tribe's established service area.	Not applicable
(2)	If a program decides to change the service area after ACF has approved its grant application, the program must submit to ACF a new service area proposal for approval.	If the program decides to change the service area, the programs will do the following: <ol style="list-style-type: none"> <li>1. Distribute surveys within the community</li> <li>2. Assess the community assessment</li> <li>3. Analyze data</li> </ol>

Standard	Performance Standard	Plan of Action
<p>(b)</p> <p>(1)</p> <p>(i)</p> <p>(A)</p> <p>(B)</p> <p>(C)</p>	<p><b><u>Community wide strategic and needs assessment (community assessment).</u></b></p> <p>To design a program that meets community needs, and builds on strengths and resources, a program must conduct a community assessment at least once over the five-year grant period. This community assessment use data that describes community strengths, needs, and resources and include, at a minimum;</p> <p>The number of eligible infants, toddlers, preschool age children, and expectant mothers, including their geographic location, race, ethnicity, and languages they speak, including:</p> <p>Children experiencing homelessness in collaboration with, to the extent possible, McKinney-Vento Local Education Agency Liaisons (42 U.S.C. 11432(6)(A);</p> <p>Children in foster care; and</p> <p>Children with disabilities, including types of disabilities and relevant services and resources provided to these children by community agencies;</p>	<p>4. Hold meeting with staff, governing body and policy groups if results show a need the program would request approval from the Governing Board and Policy groups. Proposal would be submitted to ACF office for approval.</p> <p>A community assessment will be conducted once over a five-year grant period.</p> <p>We will use data that describes community strengths, needs and resources and include:</p> <ol style="list-style-type: none"> <li>1. The number of eligible infants, toddlers, preschool age children, and expectant mothers, including their geographic locations, race ethnicity, and languages they speak.</li> <li>2. Children experiencing homelessness in collaboration with McKinney-Vento Local Education Agency Liaisons</li> <li>3. Children in foster care</li> <li>4. Children with disabilities, including types of disabilities and relevant services and resources provided to these children by community agencies</li> <li>5. Children with disabilities, including types of disabilities and relevant services and resources provided to these children by community agencies</li> <li>6. Typical work, school, and training schedules of parents with eligible children</li> <li>7. Other child development, child care centers, and family child care programs that serve eligible children, including home visiting, publicly funded state and local re-schools, and the approximate number of eligible children served</li> <li>8. Resources that are available in the community to address the needs of eligible children and their families</li> </ol>

Standard	Performance Standard	Plan of Action
(ii)	Children with disabilities, including types of disabilities and relevant services and resources provided to these children by community agencies;	<p>9. Strengths of the community</p> <p>Administration staff will compile all information into one Community Assessment and will have a planning meeting with the Governing Body, Policy Council, Site Supervisors and Management staff to establish goals. The Community Assessment will be taken before the Governing Body and the Policy Council for approval.</p>
(iii)	Typical work, school, and training schedules of parents with eligible children;	
(iv)	Other child-development, child-care centers, and family child care programs that serve eligible children, including home visiting, publicly funded state and local re-schools, and the approximate number of eligible children served;	
(v)	Resources that are available in the community to address the needs of eligible children and their families; and,	
(vi)	Strengths of the community.	
(2)	A program must annually review and update the community assessment to reflect any significant changes including increased availability of publicly-funded pre-kindergarten (including an assessment of how the pre-kindergarten available in the community meets the needs of the parents and children served by the program, and whether it is offered for a full school day), rates of family and child homelessness, and significant shifts in community demographics and resources.	
(3)	A program must consider whether the characteristics of the community allow it to include children from diverse economic backgrounds that would be	Not applicable

Standard	Performance Standard	Plan of Action
<p>§1302.12(a)</p> <p>(a)</p> <p>(1)</p> <p>(i)</p> <p>(ii)</p> <p>(iii)</p> <p>(2)</p> <p>(3)</p>	<p>supported by other funding sources, including private pay, in addition to the program’s eligible funded enrollment. A program must not enroll children from diverse economic backgrounds if it would result in a program serving less than its eligible funded enrollment.</p> <p><b>Determining, verifying, and documenting eligibility.</b></p> <p><u>Process overview.</u></p> <p>Program staff must:</p> <p>Conduct an in-person interview with each family unless paragraph (a)(2) of this section applies;</p> <p>Verify information as required in paragraphs (h) and (i) of this section; and,</p> <p>Create an eligibility determination record for enrolled participants according to paragraph (k) of this section.</p> <p>Program staff may interview the family over the telephone if an in-person interview is not possible or convenient for the family.</p> <p>If a program has an alternate method to reasonably determine eligibility based on its community assessment, geographic and administrative data, or from other reliable data sources, it may petition the responsible HHS official to waive requirements in paragraphs (a)(1)(i) and (ii) of this section.</p>	<p>Program staff will complete a face-to-face application with the legal guardian of the child enrolling. The Family Service Worker, Site Supervisors, <b>Receptionist, Data Clerk</b> or ERSEA Manager will verify age and income. This will be documented on the <b>“Eligibility Worksheet”</b>.</p> <p>The program has an <b>“Eligibility Worksheet”</b> that follows paragraph (k).</p> <p>A program staff may interview the legal guardian of the child enrolling over the phone when they have made every effort to complete a face-to-face application. All efforts will be documented on a <b>“Enrollment Status”</b> and will be attached to <b>“Eligibility Worksheet”</b> of the application. The Family Service Worker, Site Supervisors, <b>Receptionist, Data Clerk</b> or ERSEA Manager will verify age and income.</p> <p>Not applicable</p>

Standard	Performance Standard	Plan of Action
(b)	<p><u>Age requirements.</u></p> <p>(1) For Early Head Start, except when the child is transitioning to Head Start, a child must be an infant or a toddler younger than three years old.</p> <p>(2) For Head Start, a child must:</p> <p>(i) Be at least three years of or, turn three years old by the date used to determine eligibility for public school in the community in which the Head Start program is located; and,</p> <p>(ii) Be older that the age required to attend school.</p> <p>(3) For Migrant of Seasonal Head Start, a child must be younger that compulsory school age by the date used to determine public school eligibility for the community in which the program us located.</p>	<p>Early Head Start provides services for children birth to age three (3).</p> <p>Head Start provides services for children ages three (3) to five (5). A child must be three (3) prior to September 1<sup>st</sup> (as established by the local school district) to be considered for enrollment at the beginning of the school year. <del>After</del> A child that turns three (3) (after September 1<sup>st</sup>) <del>as vacancies occur,</del> they may be considered for an enrollment opportunity. These children will be placed on the appropriate waiting list on their 3<sup>rd</sup> birthday.</p> <p>A child who turns 5 before September 1<sup>st</sup> is not age eligible for Head Start.</p> <p>Not applicable</p>
(c)	<p><u>Eligibility requirements.</u></p> <p>(1) A pregnant woman or a child is eligible if:</p> <p>(i) The family's income is equal to or below the poverty line; or,</p>	<p>A pregnant woman or a child is eligible, if: a family's total annual income is equal to or less than the poverty income guidelines as defined by the U.S. Department of Health and Human Services.</p>



Standard	Performance Standard	Plan of Action
(ii)	The family is eligible for or, in the absence of child care, would be potentially eligible for public assistance; including TANF child-only payments; or,	; or, the family receives public assistance such as TANF, SNAP or SSI (Supplemental Security Income) (does not include survivor or Social Security benefits). Family must provide current statement from the state or local public assistance agency that shows the families is potentially eligible to receive public assistance or is receiving public assistance.
(iii)	The child is homeless, as defined in part 1305; or,	Head Start or Early Head Start will utilize the most current income guidelines until they are replaced by a new version for the following school year.  A child is eligible for Head Start or Early Head Start, if the child is homeless under the McKinney-Vento Homeless Assistance Act. Homeless children means individuals who lack a fixed, regular and adequate nighttime residence; and includes children that are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative accommodations; are living in emergency or transitional shelters; are abandoned in hospitals, or are awaiting foster care placement; children who have a primary nighttime residence that is public or private place not designed for or ordinarily used as a regular sleeping accommodations for human beings; children who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings.
(iv)	The child is in foster care.	
(2)	If the family does not meet a criterion under paragraph (c)(1) of this section, a program may enroll a child who would benefit from services, provided that these participants only make up to 10 percent of a program's enrollment in accordance with paragraph (d) of this section.	A child is eligible for Head Start and Early Head Start if they are placed in 24-hour substitute care, placed away from their parents or guardians and for whom the state agency has placement and care responsibility.

Standard	Performance Standard	Plan of Action
<p>(d)</p> <p>(1)</p> <p>(i)</p> <p>(ii)</p> <p>(2)</p> <p>(i)</p>	<p><b><u>Additional allowances for programs.</u></b></p> <p>A program may enroll an additional 35 percent of participants whose families do not meet a criterion described in paragraph (c) of this section and whose incomes are below 130 percent of the poverty, if the program:</p> <p>Establishes and implements outreach, and enrollment policies and procedures to ensure it is meeting the needs of eligible pregnant women, children, and children with disabilities, before serving pregnant women or children who do not meet the criteria in paragraph (c) of this section; and,</p> <p>Establishes criteria that ensure pregnant women and children eligible under the criteria listed in paragraph (c) of this section are served first.</p> <p>If a program chooses to enroll participants who do not meet a criterion in paragraph (c) of this section, whose family incomes are between 100 and 130 percent of the poverty line, it must be able to report to the Head Start regional program office:</p> <p>How it is meeting the needs of low-income families or families potentially eligible for public assistance, homeless children, and children in foster care, and include local demographic data on these populations;</p>	<p>All Over income children or pregnant woman will only be considered for approval when the <b>“Income Eligible Waiting List”</b> and <b>“130% Waiting List”</b> has been exhausted and efforts have been made to find income eligible children or pregnant woman. This number will not exceed 10% of funded enrollment. The Family Service Workers must submit flyers and <b>“Flyer Tracking”</b> to the ERSEA Manager before approval is granted. The ERSEA Manager will track all over income children and pregnant woman.</p> <p>The program may accept 35% of families’ whose incomes are between 100-130% of the poverty guidelines. The program will maintain an Income Eligible, 130% and Over Income Waiting List for Head Start, Early Head Start and Pregnant Moms program throughout the year. Children and pregnant woman on the 130% Waiting List will only be considered for approval when the Income Eligible Waiting List has been exhausted and all efforts have been made to find income eligible children and pregnant woman. The Family Service Workers must submit flyers, newspaper clippings, bulletins, e-mails, etc. and <b>“Flyer Tracking”</b> to the ERSEA Manager before approval is granted. The ERSEA Manager may request for staff to make additional recruitment efforts when efforts are not sufficient. The ERSEA Manager will track all 130% children and pregnant woman.</p>

Standard	Performance Standard	Plan of Action
(ii)	Outreach and enrollment policies and procedures that ensure it is meeting the needs of eligible children or pregnant women, before serving over-income children or pregnant women;	ERSEA Manager will track this information and report as requested.
(iii)	Efforts, including outreach, to be fully enrolled with eligible pregnant women or children;	
(iv)	Policies, procedures, and selection criteria it uses to serve eligible children;	
(v)	Its current enrollment and its enrollment for the previous year;	
(vi)	The number of pregnant women and children served, disaggregated by the eligibility criteria in paragraphs (c) and (d)(1) of this section; and,	
(vii)	The eligibility criteria category of each child on the program's waiting list.	
(e)	<b><u>Additional allowances for Indian tribes.</u></b>	
(1)	Notwithstanding paragraph (c)(2) of this section, a tribal program may fill more than 10 percent of its enrollment with participants who are eligible under the criteria in paragraph (c) of this section, if:	Not Applicable
(i)	The tribal program who served all eligible pregnant women or children who wish to be enrolled from Indian and non-Indian families living within the approved service area of the tribal agency;	

Standard	Performance Standard	Plan of Action
(II)	The tribe has resources with its grant, without using additional funds from HHS intended to expand Early Head Start or Head Start services, to enroll pregnant women or children whose family incomes exceed low-income guidelines or who are not otherwise eligible; and,	Not Applicable
(III)	At least 51 percent of the program’s participants meet an eligibility criterion under paragraph (c)(1) of this section.	Not applicable
(2)	If another program does not serve the approved service area, the program must serve all eligible Indian and non-Indian pregnant women or children who wish to enroll before serving over-income pregnant women or children.	Not applicable
(3)	A program that meets the conditions of this paragraph (c) must annually set criteria that are approved by the policy council and the tribal council for selecting over-income pregnant women or children who would benefit from program services.	Not applicable
(4)	An Indian tribe or tribes that operates both an Early Head Start program and a Head Start program may, at its discretion, at any time during the grant period involved, reallocate funds between the Early Head Start program and the Head Start program in order to address fluctuations in client populations, including pregnant women and children from birth to compulsory school age. The reallocation of such funds between programs by an Indian tribe or tribes during a year may not serve as a basis for any reduction of the base grant for either program in succeeding years.	Not applicable  Not Applicable

Standard	Performance Standard	Plan of Action
(f)	<b><u>Migrant or Seasonal eligibility requirements.</u></b> A child is eligible for Migrant or Seasonal Head Start, if the family meets an eligibility criterion in paragraphs (c) and (d) of this section; and the family's income comes primarily from agricultural work.	
(g)	<b><u>Eligibility requirements for communities with 1,000 or fewer individuals.</u></b>	Not Applicable
(1)	A program may establish its own criteria for eligibility provided that it meets the criteria outlines in section 645(a)(2) of the Act.	
(2)	No child residing in such community whose family is eligible under criteria described in paragraphs (c) through (f) of this section, may be denied an opportunity to participate in the program under the eligibility criteria established under this paragraph (g).	Not Applicable
(h)	<b><u>Verifying age.</u></b> Program staff must verify a child's age according to the program policies and procedures. A program's policies and procedures cannot require families to provide documents that confirm a child's age, if doing so creates a barrier for the family to enroll the child.	
(i)	<b><u>Verifying eligibility.</u></b>	
(1)	To verify eligibility based on income, program staff must use tax forms, pay stubs, or other proof of income to determine the family income for the relevant time period.	Age will be determined by verifying one of the following documents; legal birth certificate, Baptismal certificate (with seal), Medicaid card, Passport or shot record. If doing so creates a barrier for the family to enroll the child, no documentation is required.

Standard	Performance Standard	Plan of Action
(i)	<p>If the family cannot provide tax forms, pay stubs, or other proof of income for the relevant time period, program staff may accept written statements from employers, including individuals who are self-employed, for the relevant time period and use information provided to calculate total annual income with appropriate multipliers.</p>	<p>Staff with ERSEA training must verify all current money wages or salary before deductions; except from net income from non-farm self-employment &amp; net income from farm self-employment;</p> <p>the following may be verified for proof of income; check stubs, current W-2, Income Tax Forms from previous year, Unemployment compensation, Worker' compensation, Social Security, Supplemental security income, Public assistance or welfare payments (TANF), Veterans' payments, Survivor benefits, Disability benefits, Pension or retirement income, Interest income, Dividends; Rents, royalties and estates and trusts, Educational assistance, Child support, Alimony, Financial assistance from outside of the household, military income (including pay and allowances), or foreign government pensions. Other sources when approved by the ERSEA Manager.</p> <p>The period of time to be considered for eligibility is: 1) the twelve months immediately preceding the month in which application for enrollment of the child was made, or 2) for the calendar year immediately preceding the calendar year in which the application is made, whichever more accurately reflects the family's current needs</p> <p>If a family cannot provide all W-2 forms, pay stubs, or pay envelopes for the relevant time period families <del>must</del> can provide an "Employment Verification" form from all employers. Appropriate staff with ERSEA training must verify with the person who completed the "Employment Verification" that the information is accurate and this will be documented on the form. Staff with ERSEA training will use the formula below to calculate the income, when applicable.</p> <p><b>Income will be calculated for a 12-month period using the following formula:</b></p>

Standard	Performance Standard	Plan of Action
(ii)	If the family reports no income for the relevant time period, a program may accept the family’s signed declaration to the effect, if program staff describes efforts made to verify the family’s income, and explains how the family’s total income was calculated or seeks information from third parties about the family’s eligibility, if the family gives written consent. If a family gives consent to contact third parties, program staff must adhere to program safety and privacy policies and procedures and ensure the eligibility determination record adheres to paragraph (k)(2) of this section.	<ul style="list-style-type: none"> <li>• <b>Weekly X 52</b></li> <li>• <b>Every two weeks X 26</b></li> <li>• <b>Twice a month X 24</b></li> <li>• <b>Monthly X 12</b></li> </ul> <p>When a family reports no income for the relevant time period staff will complete a <b>“No Income Verification”</b> form. The <b>“No Income Verification”</b> “will state who pays their rent, if they receive SNAP, WIC, and/or Medicaid. Information pertinent to the family’s situation will be documented on the <b>“No Income Verification”</b>. Staff with ERSEA training will seek information from a 3<sup>rd</sup> party with parents’ consent and complete the appropriate section on the <b>“No Income Verification”</b>. <b>“No Income Verification”</b> must be approved by the ERSEA Manager.</p>
(iii)	If the family can demonstrate a significant change in income for the relevant time period, program staff may consider current income circumstances.	
(2)	To verify whether a family is eligible for, or in the absence of child care, would be potentially eligible for public assistance, the program must have documentation from either the state, local, or tribal public assistance agency that shows the family either receives public assistance or that shows the family is potentially eligible to receive public assistance.	<p>As per section 645 (a) of the Head Start Act, we will consider at the time of enrollment, information that most accurately reflects the needs of the family with documentation on the <b>“Enrollment Status”</b>.</p> <p>If a family receives TANF, SNAP or Supplemental Security Income no other income will be calculated. TANF, SNAP or Supplemental Security Income makes the family income eligible. The TANF, SNAP or Supplement Security document from the state or local public assistant agency must be current in order to be applicable.</p>
(3)	To verify whether a family is homeless, a program may accept a written statement from a homeless services provider, school personnel, or other service agency attesting that child is homeless or any other documentation that indicates homelessness, including documentation from a public or private agency, a declaration, information gathered on enrollment or	

Standard	Performance Standard	Plan of Action
	<p>application forms, or notes from an interview with staff to establish the child is homeless; or any other document that establishes homelessness.</p>	<p>For a child to be documented under homeless a family must provide a written statement from a homeless services provider, school personnel, or other service agency attesting that the child is homeless or any other documentation that indicates homelessness. These documents must be kept and attached to <b>“Eligibility Worksheet”</b> along with the <b>“Family Residency Verification”</b> form.</p>
(i)	<p>If a family can provide one of the documents described in this paragraph (i)(3), program staff must describe efforts made to verify the accuracy of the information provided and state whether the family is eligible because they are homeless.</p>	
(ii)	<p>If a family cannot provide one of the documents described in this paragraph (i)(3) to prove the child is homeless, a program may accept the family’s signed declaration to that effect, if, in a written statement, program staff describe the child’s living situation that meets the definition of homeless in part 1305 of this chapter.</p>	<p>Staff with ERSEA training will contact the person that wrote the statement and document on the <b>“Family Residency Verification”</b> the accuracy of the information provided.</p>
(iii)	<p>Program staff may seek information from third parties who have firsthand knowledge about a family’s living situation, if the family gives written consent. If the family gives consent to contact third parties, program staff must adhere to program privacy policies and procedures and ensure the eligibility determination record adheres to paragraph (k) of this section.</p>	<p>Staff with ERSEA training can fill out the <b>“Family Residency Verification”</b> to attest that a child is homeless under McKinney-Vento Homeless Assistance Act when a family cannot provide official documents verifying homelessness.</p>
(4)	<p>To verify whether a child is in foster care, program staff must accept either a court order or other legal or government-issued document, a written statement from a government child welfare official that demonstrates the child is in foster care, or proof of a foster care payment.</p>	<p>Staff with ERSEA training will seek information from a 3<sup>rd</sup> party with parents’ consent and complete the appropriate section of <b>“Family Residency Verification”</b>.</p> <p>In order for a child to be counted as child in Foster Care or Kinship Care a family/guardian must provide the Family Service</p>



Standard	Performance Standard	Plan of Action
(j)	<p><b><u>Eligibility duration.</u></b></p>	<p>Worker, Site Supervisor or ERSEA Manager with a current court order or legal or government-issued document or written statement from a government child welfare official demonstrating the child is in foster care or kinship care. These documents must be kept and attached to “<b>Eligibility Worksheet</b>” form.</p>
(1)	<p>If a child is determined eligible under this section and is participating in a Head Start program, he or she will remain eligible through the end of the succeeding program year except that the Head Start program may choose not to enroll a child when there are compelling reasons for the child not to remain in Head Start, such as when there is a change in the child’s family income and there is a child with a greater need for Head Start services.</p>	<p>Each child enrolled in the Head Start Program will be remain eligible through the end of the second year.</p> <p>When a family drops from Head/Early Head and then decides to re-apply, the family will need to complete a new application. The child will be placed on appropriate Waiting List according to their income.</p>
(2)	<p>Children who are enrolled in a program receiving funds under the authority of section 645A of the Act remain eligible while they participate in the program.</p>	
(3)	<p>If a child moves from an Early Head Start program to a Head Start program, program staff must verify the family’s eligibility again.</p>	<p>Early Head Start children enrolled remain eligible until their 3<sup>rd</sup> birthday or according to their transition plan.</p>
(4)	<p>If a program operates both an Early Head Start and a Head Start program, and the parents wish to enroll their child who has been enrolled in the program’s Early Head Start, the program must ensure, whenever possible, the child receives Head Start services until enrolled I school, provided the child is eligible.</p>	<p>Early Head Start children must complete an application for Head Start and income must be verified to determine family’s eligibility. Early Head Start children are given extra points as determined on the “<b>Selection Criteria</b>” for Head Start enrollment opportunities.</p>

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<p>(k)</p> <p>(1)</p> <p>(2)</p> <p>(i)</p> <p>(ii)</p> <p>(A)</p> <p>(B)</p> <p>(iii)</p> <p>(A)</p>	<p><b>Records</b></p> <p>A program must keep eligibility determination records for each participant and ongoing records of the eligibility training for staff required by paragraph (m) of this section. A program may keep these records electronically.</p> <p>Each eligibility determination record must include:</p> <p>Copies of any documents or statements, including declarations, that are deemed necessary to verify eligibility under paragraphs (h) and (i) of this section;</p> <p>A statement that program staff has made reasonable efforts to verify information by:</p> <p>Conducting either an in-person, or a telephone interview with the family as described under paragraph (a)(1)(i) or (a)(2) of this section; and,</p> <p>Describing efforts made to verify eligibility, as required under paragraph (h) through (i) of this section; and, collecting documents required for third party verification that includes the family’s written consent to contact each third party, the third parties’ names, titles, and affiliations, and information from third parties regarding the family’s eligibility.</p> <p>A statement that identifies whether:</p> <p>The family’s income is below income guidelines for its size, and lists the family’s size;</p>	<p>All eligibility determination records must be kept <del>and stapled to</del> the <del>“Eligibility Worksheet”</del> in each child’s ERSEA file. Calculating tape must be attached to the eligibility records, when applicable.</p> <p>The <b>“Eligibility Worksheet”</b> can only be filled out by those individuals who have had the ERSEA Training.</p> <p>Staff will complete the <b>“Eligibility Worksheet”</b> which includes the following:</p> <ol style="list-style-type: none"> <li>1. How the application was conducted and if the telephone interview was conducted all efforts made will be documented on a narrative.</li> <li>2. Income Resource including homeless and Foster Care.</li> <li>3. Family’s eligibility status such as Income Eligible, 130% or Over Income.</li> <li>4. Family unit size.</li> <li>5. The Poverty Guidelines</li> <li>6. Family’s total yearly income.</li> </ol> <p>Eligibility Worksheet will be signed and dated when income and shot record documents are submitted and make application complete to be placed on the Waiting List.</p> <p>All income verified and an enrollment status, if applicable must be located in the ERSEA Federal File section. with the <b>“Eligibility Worksheet”</b>.</p>

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<p>(B)</p> <p>(C)</p> <p>(D)</p> <p>(E)</p> <p>(3)</p> <p>(I)</p>	<p>The family is eligible for or, in the absence of child care, potentially eligible for public assistance; The child is a homeless child or the child is in foster care;</p> <p>The family was determined to be eligible under the criterion in paragraph (c)(2) of this section; or,</p> <p>The family was determined to be eligible under the criterion in paragraph (d)(1) of this section.</p> <p>A program must keep eligibility determination records for those currently enrolled, as long as they are enrolled, and, for one year after they have either stopped receiving services; or are no longer enrolled.</p> <p><b><u>Program policies and procedures on violating eligibility determination regulations.</u></b></p> <p>A program must establish written policy and procedures that describe all actions taken against staff who intentionally violate federal and program eligibility determination regulations and who enroll pregnant women and children that are not eligible to receive Early Head Start or Head Start services.</p>	<p>If accusations are brought against a staff regarding falsification of an applicant’s eligibility the person with the information must report the accusation to the ERSEA Manager. The Head Start Director and ERSEA Manager will meet with staff, parent/guardian and all involved. If it is determined a staff has intentionally violated federal and program eligibility determination regulations and enrolled pregnant women or child that was not eligible to receive Early Head Start or Head Start services will be a terminated. Employees who intentionally commit fraud on income information may suffer legal consequences of arrest, fines, expulsions, incarceration, etc. These charges might be federal, local state and civil suits.</p> <p>If accusations are brought against families or a pregnant mom regarding falsification of their eligibility the person with the information must report the accusation to the ERSEA Manager. The Head Start Director and ERSEA Manager will meet with staff,</p>

Standard	Performance Standard	Plan of Action
<p>(m)</p> <p>(1)</p> <p>(i)</p> <p>(ii)</p> <p>(iii)</p> <p>(2)</p>	<p><b><u>Training on eligibility.</u></b></p> <p>A program must train all governing body, policy council, management, and staff who determine eligibility on applicable federal regulations and program policies and procedures. Training must, at a minimum:</p> <p>Include methods on how to collect complete and accurate eligibility information from families and third-party sources;</p> <p>Incorporate strategies for treating families with dignity and respect and for dealing with possible issues of domestic violence, stigma, and privacy; and,</p> <p>Explain program policies and procedures that describe actions taken against staff, families, or participants who attempt to provide or intentionally provide false information.</p> <p>A program must train management and staff members who make eligibility determinations within 90 days of hiring new staff.</p>	<p>parent/guardian and all involved. If it is determined that family or pregnant mom has intentionally violated federal and program eligibility determination regulations the family or pregnant mom will not be a placed on the waiting list or the child's slot or pregnant mom's slot will be considered vacant. Families who intentionally commit fraud on income information may suffer legal consequences of arrest, fines, expulsions, incarceration, etc. These charges might be federal, local state and civil suits.</p> <p>ERSEA Manager will train all governing body, policy council, Site Supervisor, Family Service Workers on federal regulations and program policies and procedures. Training will include methods to collect complete and accurate eligibility information from families and third-party sources.</p> <p>Governing body, policy council, Site Supervisor/Family Service Worker will be given strategies for treating families with dignity and respect and for dealing with possible issues of domestic violence, stigma, and privacy.</p> <p>Training will explain policies and procedures with regard to falsifying information. See (I) Program Policies and procedures on violating eligibility determination regulation.</p> <p>ERSEA Manager will train new staff within 90 days of hiring.</p>

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<p>(3)</p> <p>(4)</p> <p><b>§1302.13</b></p>	<p>A program must train all governing body and policy council members within 180 days of the beginning of the term of a new governing body or policy council.</p> <p>A program must develop policies on how often training will be provided after the initial training.</p> <p><b><u>Recruitment of children.</u></b></p> <p>In order to reach those most in need of services, a program must develop and implement a recruitment process designed to actively inform all families with eligible children within the recruitment area of the availability of program services, and encourage and assist them in applying for admission to the program. A program must include specific efforts to actively locate and recruit children with disabilities and other vulnerable children, including homeless children and children in foster care.</p>	<p>ERSEA Manager will train new governing body and policy council members within 180 days of the beginning of the term.</p> <p>Training will be every year with staff members and policy council and every other year with governing body.</p> <p><b><u>See Annual Schedule of Events for Head Start and Early Head Start at End of Plan</u></b></p> <p><b><u>Pregnant Woman</u></b></p> <table border="1" data-bbox="1123 797 1892 1416"> <thead> <tr> <th data-bbox="1123 797 1671 834">ACTION</th> <th data-bbox="1671 797 1892 834">TIMELINE</th> </tr> </thead> <tbody> <tr> <td data-bbox="1123 834 1671 943">Current Selection Criteria and Poverty Guidelines will be implemented for the upcoming school year, when applicable.</td> <td data-bbox="1671 834 1892 943">March/April</td> </tr> <tr> <td data-bbox="1123 943 1671 1016">Request help from Policy Council and parents to recruit pregnant woman.</td> <td data-bbox="1671 943 1892 1016">as needed</td> </tr> <tr> <td data-bbox="1123 1016 1671 1125">Consult with Dr's office and school counselors to inform them upcoming openings in the Pregnant Mom's Program.</td> <td data-bbox="1671 1016 1892 1125">as needed</td> </tr> <tr> <td data-bbox="1123 1125 1671 1416">           Distribute flyers and brochures to (but not limited to):           <ul style="list-style-type: none"> <li>• Agencies serving children with Disabilities</li> <li>• DHS office</li> <li>• WIC</li> <li>• Public Libraries</li> <li>• School Districts</li> </ul> </td> <td data-bbox="1671 1125 1892 1416">as needed</td> </tr> </tbody> </table>	ACTION	TIMELINE	Current Selection Criteria and Poverty Guidelines will be implemented for the upcoming school year, when applicable.	March/April	Request help from Policy Council and parents to recruit pregnant woman.	as needed	Consult with Dr's office and school counselors to inform them upcoming openings in the Pregnant Mom's Program.	as needed	Distribute flyers and brochures to (but not limited to): <ul style="list-style-type: none"> <li>• Agencies serving children with Disabilities</li> <li>• DHS office</li> <li>• WIC</li> <li>• Public Libraries</li> <li>• School Districts</li> </ul>	as needed
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		<ul style="list-style-type: none"> <li>• Clinics</li> <li>• Shelters</li> <li>• Workforce</li> <li>• Convenient and/or Grocery Stores</li> <li>• Laundry Mats</li> <li>• Restaurants</li> <li>• Centers</li> <li>• Post Office</li> <li>• Dr.'s office</li> <li>• Dentist office</li> <li>• Churches</li> <li>• Utility offices</li> <li>• Community Centers</li> <li>• Housing Authority</li> </ul>	
		Complete applications with prospective pregnant woman.	as needed
		Approve all applications and place on Waiting List (Applications approved will be valid through July of each school year)	as needed
		Pregnant Woman will be accepted as slots become available, income eligible woman with the highest points determined by the Selection Criteria will be accepted first.	as needed
		Pregnant Woman from the 130% or Over Income Waiting List will only be accepted when the income eligible waiting list has been exhausted. 130% and Over income pregnant woman will only be accepted with the approval of the ERSEA Manager	as needed

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<p>§1302.14</p> <p>(a)</p> <p>(1)</p> <p>(2)</p> <p>(3)</p> <p>(4)</p>	<p><u>Selection process.</u></p> <p><u>Selection criteria.</u></p> <p>A program must annually establish selection criteria that weigh the prioritization of selection of participants, based on community needs identified in the community needs assessment as describes in §1302.11(b), and including family income, whether the child is homeless, whether the child is in foster care, the child’s age, whether the child is eligible for special education and related services, or early intervention services, as appropriate, as determined under the Individuals with Disabilities Education Act (IDEA) (20 U.S.C. 1400 et seq.) and, other relevant family or child risk factors.</p> <p>If a program serves migrant or seasonal families, it must select participants according to criteria in paragraph (a)(1) of this section, and give priority to children whose families can demonstrate they have relocated frequently within the past two-years to pursue agricultural work.</p> <p>If a program operates in a service area where Head Start eligible children can enroll in high-quality publicly funded pre-kindergarten for a full school day, the program must prioritize younger children as part of the selection criteria in paragraph (a)(1) of this section. If this priority would disrupt partnerships with local education agencies, then it is not required. An American Indian and Alaska Native or Migrant or</p>	<p>The Selection Criteria will be reviewed to reflect any changes that may have impacted the communities. The ERSEA Manager Site Supervisors and FSW will draft changes that are needed. The “<b>Selection Criteria</b>” will be reviewed and approved in February or March if revisions are made.</p> <p>Concho Valley Council of Governments Head Start/Early Head Start will utilize the “<b>Selection Criteria</b>” to prioritize entry into the program. The “<b>Selection Criteria</b>” will determine points given to each child and the child with the highest points will be accepted into the program first.</p> <p><b>Head Start-</b>If children have the same number of points, priority will be given to the 4-year-old or the child that will be turning 4 first according to the date of birth and if children have the same date of birth the family who completed their application first has priority. If the family completed the application on the same day, then the family with lowest annual income will have priority. A child’s points will only change when a child has been determined by the LEA to be eligible for special education or related services.</p> <p><b>Early Head Start:</b> If children have the same points, the family who completed the application first has priority. If the family completed the application on the same day, then the family with lowest annual income will have priority. <b>If the family have the same annual income, the child who is older will have priority.</b></p> <p><b>Pregnant Women:</b> If the Pregnant Women have the same points, the pregnant women who completed their application first will have priority.</p>

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<p>(b) (1)</p> <p>(2)</p> <p>(c)</p> <p>§1302.15</p>	<p>Seasonal Head Start program must consider whether such prioritization is appropriate in their community. A program must not deny enrollment based on a disability or chronic health condition or its severity.</p> <p><u>Children eligible for services under IDEA.</u> A program must ensure at least 10 percent of its total funded enrollment is filled by children eligible for services under IDEA, unless the responsible HHS official grants a waiver.</p> <p>If the requirement in paragraph (b)(1) of this section has been met, children eligible for services under IDEA should be prioritized for the available slots in accordance with the program’s selection criteria described in paragraph (a) of this section.</p> <p><u>Waiting List.</u>A program must develop at the beginning of each enrollment year and maintain during the year a waiting list that ranks children according to the program’s selection criteria.</p>	<p><b>Head Start/Early Head Start/Pregnant Woman 130% &amp; Over Income Waiting List:</b> If children or Pregnant Woman have the same points the family with lowest annual income will have priority.</p> <p>We do not deny enrollment based on disability or chronic health condition or its severity.</p> <p>Not less than 10 percent of the total funded enrollment will be children with disabilities who are determined to be eligible for special education and related services as determined by the local education agency and the early intervention agency.</p> <p>Head Start, Early Head Start and Pregnant Women will have three separate waiting list and children and pregnant woman will be placed according to their income determined and ranked with points determined through the Selection Criteria. Income Eligible Waiting List will have children or pregnant woman whose income falls equal or below the poverty guidelines. 130% Waiting List will have children or pregnant women whose income falls between 101%-130%. Over Income Waiting List will have children or pregnant women whose income is over the 130%.</p>



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(a)	<p><b>Enrollment.</b></p> <p><u>Funded enrollment.</u> A program must maintain its funded enrollment level and fill any vacancy as soon as possible. A program must fill any vacancy within 30 days.</p>	<p>In both Head Start and Early Head Start, funded enrollment level will be maintained: vacancies will be filled as soon as possible but not to exceed 30 calendar days.</p>
(b)	<p><u>Continuity of enrollment.</u></p>	
(1)	<p>A program must make efforts to maintain enrollment of eligible children for the following year.</p>	<p>Open enrollment will be held in the Spring for enrollment opportunity for the following school year.</p>
(2)	<p>Under exceptional circumstances, a program may maintain a child's enrollment in Head Start for a third year, provided that family income is verified again. A program may maintain a child's enrollment in Early Head Start as describes in §1302.12(j)(2).</p>	<p>3<sup>rd</sup> year students will have to re-enroll and income eligibility and "Selection Criteria" will be re-established. 3<sup>rd</sup> year students <b>will placed on appropriate Waiting List</b> who are income eligible will remain in the Head Start program. <del>3<sup>rd</sup> year students who are over income will be placed on the "130% Waiting List" &amp; "Over Income Waiting List"</del> and selection process will be followed.</p>
(3)	<p>If a program serves homeless children or children in foster care, it must make efforts to maintain the child's enrollment regardless of whether the family or child moves to a different service area, or transition the child to a program in a different service area, as required in §1302.72(a), according to the family's needs.</p>	<p>We will work with families to maintain the child's enrollment when feasible and will collaborate with the new service area to transition children.</p>
(c)	<p><u>Reserved slots.</u> If a program determines from the community assessment there are families experiencing homelessness in the area, or children in foster care that could benefit from services, the program may</p>	<p>Follow standard</p>

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	<p>reserve one or more enrollment slots for pregnant women and children experiencing homelessness and children in foster, when a vacancy occurs. No more than three percent of a program's funded enrollment slots may be reserved. If the reserved enrollment slot is not filled within 30 days, the enrollment slot becomes vacant and then must be filled in accordance with paragraph (a) of this section.</p>	
(d)	<p><u>Other enrollment.</u> Children from diverse economic backgrounds who are funded with other sources, including private pay, are not considered part of a program's eligible funded enrollment.</p>	<p>Not applicable</p>
(e)	<p><u>State immunization enrollment requirements.</u> A program must comply with state immunization enrollment and attendance requirements, with the exception of homeless children as described in §1302.16(c)(1).</p>	<p>Follow state requirements. Homeless children and foster children shall be admitted temporarily for 30 days if acceptable evidence of vaccination is not available. The child will be referred to an appropriate health provider to obtain the required the vaccinations.</p>
(f)	<p><u>Voluntary parent participation.</u> Parent participation in any program activity is voluntary, including consent for data sharing, and is not required as a condition of the child's enrollment.</p>	<p>Follow standard</p>
<b>§1302.16</b>	<b>Attendance.</b>	
(a)	<p><u>Promoting regular attendance.</u> A program must track attendance for each child.</p>	<p>Attendance is taken daily and tracked through Child Plus.</p>
(1)	<p>A program must implement a process to ensure children are safe when they do not arrive at school. If a child is unexpectedly absent and a parent has not contacted the program within one hour of program</p>	<p>Each day a child is absent the Site Supervisor/Family Service Worker or designated staff will contact the family before the day ends and document efforts and/or reasons the child was absent in Child Plus under attendance notes. If a child is absent due to an illness (attach Dr's note, if available) or family emergency no</p>

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	<p>start time, the program must attempt to contact the parent to ensure the child’s well-being.</p>	<p>further action is required. If a child is absent for the 2<sup>nd</sup> consecutive day and no contact has been made a home visit will be conducted by the Family Service Worker and documented on the “<b>2<sup>nd</sup> Consecutive Day Home Visit/No Contact Notes</b>” form. When these absences are resulting from other factors including temporary family problems, that affects the child’s regular attendance will be addressed by the Family Service Worker who will provide the appropriate family support and will be sensitive to each family situation. Information gathered will be documented on the “<b>Narrative</b>” form or “<b>2<sup>nd</sup> Consecutive Day Home Visit/No Contact Notes</b>” form. Child Plus Report 2320-Individual Attendance report will be submitted to the ERESA Manager on the 4<sup>th</sup> consecutive day a child is out.</p>
(2)	<p>A program must implement strategies to promote attendance. At a minimum, a program must:</p>	
(i)	<p>Provide information about the benefits of regular attendance;</p>	<p>Head Start and Early Head Start will implement the following strategies to promote attendance:</p>
(ii)	<p>Support families to promote the child’s regular attendance;</p>	<ol style="list-style-type: none"> <li>1. At “Meet the Teacher” or Parent Meeting, staff will share the Attendance Works video.</li> <li>2. Share attendance letter at the beginning of the year and as needed throughout the year.</li> <li>3. Conduct Home visit when child is absent for 2 consecutive days and no contact has been made.</li> <li>4. Contact daily when child is absent. All efforts and contacts will be documented in Child Plus under attendance notes and if necessary, a “<b>Narrative</b>” may be attached to this Report for additional communication.</li> </ol>
(iii)	<p>Conduct a home visit or make other direct contact with a child’s parents if a child has multiple unexplained absences (such as two consecutive unexplained absences); and,</p>	
(iv)	<p>Within the first 60 days of program operation, and on an ongoing basis thereafter, use individual child attendance data to identify children with patterns of absence that put them at risk of missing ten percent of program days per year and develop appropriate strategies to improve individual attendance among</p>	<p>Within 60 days of program operation and thereafter an “<b>Attendance Success Plan</b>” will be developed by the Family Service Worker on individual children with patterns of absences that puts them at risk of missing 10% of program days per year.</p>

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	<p>identified children, such as direct contact with parents or intensive case management, as necessary.</p>	<p>The <b>“Attendance Success Plan”</b> will be completed with the family at a face-to-face meeting with information showing the family the number of days missed in relation to the number of days attended. This form will explain strategies that will be taken to improve attendance including intensive case management when necessary. The <b>“Attendance Success Plan”</b> must be submitted to the ERSEA Manager upon completion.</p>
(3)	<p>If a child ceases to attend, the program must make appropriate efforts to reengage the family to resume attendance, including as described in paragraph (a)(2) of this section. If the child’s attendance does not resume, then the program must consider that slot vacant. This action is not considered expulsion as described in §1302.17.</p>	<p>When all the above efforts have been made and child’s attendance does not resume, the child’s slot must be considered an enrollment vacancy. All documentation must be presented to the ERSEA Manager for final decision on the enrollment vacancy.</p>
(b)	<p><u>Managing systematic program attendance issues.</u> If a program’s monthly average daily attendance rate falls below 85 percent, the program must analyze the causes of absenteeism to identify any systematic issues that contribute to the program’s absentee rate. The program must use this data to make necessary changes in a timely manner as part of ongoing oversight and correction as described in §1302.102(b) and inform its continuous improvement efforts as described in §1302.102(c).</p>	<p>When the Grantee falls below 85% the Site Supervisor and/or Family Service Worker will complete an <b>“85% Below”</b> form that explains why the attendance fell below 85% and the steps taken to rectify the problem. The <b>“85% Below”</b> form is due to the ERSEA Manager on the 5<sup>th</sup> of each month.</p>
(c)	<p><u>Supporting attendance of homeless children.</u></p>	
(1)	<p>If a program determines a child is eligible under §1302.12(c)(1)(iii), it must allow the child to attend for up to 90 days or as long as allowed under state licensing requirements, without immunization and</p>	<p>If a child is determined homeless, the child to be enrolled temporarily for 30 days without immunization records. The Family Service Worker will work with the families to become</p>

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<p>(2)</p> <p><b><u>§1302.17</u></b></p> <p>(a)</p> <p>(1)</p> <p>(2)</p> <p>(3)</p>	<p>other records, to give the family reasonable time to present these documents. A program must work with families to get children immunized as soon as possible in order to comply with state licensing requirements.</p> <p>If a child experiencing homelessness is unable to attend classes regularly because the family does not have transportation to and from the program facility, the program must utilize community resources, where possible, to provide transportation for the child.</p> <p><b><u>Suspension and expulsion.</u></b></p> <p><u>Limitations on suspension.</u></p> <p>A program must prohibit or severely limit the use of suspension due to a child’s behavior. Such suspensions may only be temporary in nature.</p> <p>A temporary suspension must be used only as a last resort in extraordinary circumstances where there is a serious safety threat that cannot be reduced or eliminated by the provision of reasonable modifications.</p> <p>Before a program determines whether a temporary suspension is necessary, a program must engage with a mental health consultant, collaborate with the parents, and utilize appropriate community resources – such as behavior coaches, psychologists, other appropriate specialist, or other resources – as needed, to determine no other reasonable option is appropriate.</p>	<p>Texas state compliant with current immunization requirement of the State of Texas.</p> <p>The Family Service Worker will assist children experiencing homelessness and unable to attend classes regularly with community transportation where available.</p> <p>No child may be suspended without Head Start Directors Approval.</p> <p>Head Start and Early Head Start will prohibit or severely limit the use of suspension due to a child’s behavior. If, as a last resort, suspension is necessary, it will only be temporary in nature.</p> <p>Temporary suspension will only be used as a last resort in extraordinary circumstances where there is a serious safety threat that cannot be reduced or eliminated by the provision of reasonable modifications.</p> <p>If the teaching staff has a concern regarding a child’s behavior, the teacher will begin documenting the child’s behavior on the</p>

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		<p><b>“Behavior Observation Notes”</b>. Documentation must include the following information and continue for a period of 10 days:</p> <ol style="list-style-type: none"> <li>a. What happened immediately before the problem behavior;</li> <li>b. Describe the problem behavior (exactly what did the child do or say);</li> <li>c. do or say);</li> <li>d. What happened immediately after the problem behavior;</li> <li>e. The activity the child was participating in at the time of the</li> <li>f. problem behavior;</li> <li>g. The time of day the behavior occurred;</li> <li>h. The child(ren) he/she was playing with at the time of the</li> <li>i. Problem behavior.</li> </ol> <p>The teaching staff will then discuss concerns with the Health/Mental Health Manager and may be consulted with the Mental Health Professional on contract for help with strategies that can be used in the classroom. If the strategies are not effective a referral to the Mental Health Professional may be initiated, with permission from the parents/guardians.</p> <p>The child will be returned to full participation in all program activities as quickly as possible, while ensuring child safety. The Site Supervisor, teaching staff, parents/guardians and/or the Mental Health Professional will develop a written plan of action, <b>(Health and Developmental Initial Plan)</b> will include the following action steps:</p> <ul style="list-style-type: none"> <li>• An initial meeting with the parents/guardians;</li> <li>• A return date;</li> <li>• Written steps that will be taken in the classroom to enable the child’s participation in all program activities;</li> </ul>
(4)	<p>If a temporary suspension is deemed necessary, a program must help the child return to full participation in all program activities as quickly as possible while ensuring child safety by:</p>	
(i)	<p>Continuing to engage with the parents and a mental health consultant, and continuing to utilize appropriate community resources;</p>	
(ii)	<p>Developing a written plan to document the action and supports needed;</p>	
(iii)	<p>Providing services that include home visits; and,</p>	
(iv)	<p>Determining whether a referral to a local agency responsible for implementing IDEA is appropriate.</p>	
(b)	<p><u>Prohibition on expulsion.</u></p>	
(1)	<p>A program cannot expel or unenroll a child from Head Start because of a child’s behavior.</p>	

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(2)	<p>When a child exhibits persistent and serious challenging behaviors, a program must explore all possible steps and document all steps taken to address such problems, and facilitate the child's safe participation in the program. Such steps must include, at a minimum, engaging a mental health consultant, considering the appropriateness of providing appropriate services and supports under section 504 of the Rehabilitation Act to ensure that the child who satisfies the definition of disability in 29 U.S.C. 705(9)(b) of the Rehabilitation Act is not excluded from the program on the basis disability, consulting with the parents and the child's teacher, and:</p>	<ul style="list-style-type: none"> <li>• How often meetings and or home visits will take place with the parents/guardians to ensure the child's continued participation; (Health and Developmental Follow-up Notes)</li> </ul> <p>If the teaching staff has a concern regarding a child's behavior, the teacher will begin documenting the child's behavior on the "<b>Behavior Observation Notes</b>". Documentation must include the following information and continue for a period of 10 days:</p> <ol style="list-style-type: none"> <li>a. What happened immediately before the problem behavior;</li> <li>b. Describe the problem behavior (exactly what did the child do or say);</li> <li>c. do or say);</li> <li>d. What happened immediately after the problem behavior;</li> <li>e. The activity the child was participating in at the time of the</li> <li>f. problem behavior;</li> <li>g. The time of day the behavior occurred;</li> <li>h. The child(ren) he/she was playing with at the time of the</li> <li>i. Problem behavior.</li> </ol> <p>The teaching staff will then discuss concerns with the Mental Health/Health Manager and the Mental Health Professional on contract for help with strategies that can be used in the classroom. If the strategies are not effective a referral to the Mental Health Professional and/or the LEA may be initiated, with permission from the parents/guardians.</p> <p>If a child has an IFSP or and IEP, we must consult with ECI or the LEA to ensure the child continues to receive the needed support services.</p>
(i)	<p>If the child has an individualized family service plan (IFSP) or individualized education program (IEP), the program must consult with the agency responsible for the IFSP or IEP to ensure the child receives the needed support services; or</p>	
(ii)	<p>If the child does not have an IFSP or IEP, the program must collaborate, with parental consent, with the local agency responsible for implementing IDEA to determine the child's eligibility for services.</p>	

Standard	Performance Standard	Plan of Action
<p>(3)</p> <p><b>§1302.18</b></p> <p>(a)</p> <p>(b)</p> <p>(1)</p>	<p>If, after a program has explored all possible steps and documented all steps taken as described in paragraph (b)(2) of this section, a program, in consultation with the parents, the child’s teacher, the agency responsible for implementing IDEA (if applicable), and the mental health consultant, determines that the child’s continued enrollment presents a continued serious safety threat to the child or other enrolled children and determines the program is not the most appropriate placement for the child, the program must work with such entities to directly facilitate the transition of the child to a more appropriate placement.</p> <p><b>Fees</b></p> <p><u>Policy on fees.</u> A program must not charge eligible families a fee to participate in Head Start, including special events such as field trips, and cannot in any way condition an eligible child’s enrollment or participation in the program upon the payment of a fee.</p> <p><u>Allowable fees.</u></p> <p>A program must only accept a fee from families of enrolled children for services that are in addition to services funded by Head Start, such as child care before and after funded Head Start hours.</p>	<p>If a child does not have an IFSP or an IEP, we must collaborate, with parental consent, with ECI or the LEA to determine the child’s eligibility for services.</p> <p>If, after a program has explored all possible steps and documented all steps taken as described in paragraph (b)(2) of this section, a program, in consultation with the parents, the child’s teacher, the agencies responsible for implementing the IFSP or the IEP (if applicable), and the mental health consultant, determines that the child’s continued enrollment presents a continued serious safety threat to the child or other enrolled children and determines the program is not the most appropriate placement for the child, the program must work with such entities to directly facilitate the transition of the child to a more appropriate placement</p> <p>There are no program fees for income eligible families to participate in our Head Start or Early Head Start program.</p> <p>Follow standard</p>



Standard	Performance Standard	Plan of Action
(2)	In order to support programs serving children from diverse economic backgrounds or using multiple funding sources, a program may charge fees to private pay families and other non-Head Start enrolled families to the extent allowed by any other applicable federal, state or local funding sources.	Follow standard
<p><b>HS/EHS</b>  <b>Service Area: ERSEA</b>  <b>Procedure: Application Process</b>  <b>References: None</b></p> <p><b>Prior to submitting the application to the ERSEA Manager, the Intake Staff will:</b></p> <ol style="list-style-type: none"> <li>1. Review entire application to ensure that it is complete and begin Enrollment Status page to document all activities.</li> <li>2. Family Service Worker enters the application into Child Plus and sets their Enrollment History as New with date that is on the Eligibility Worksheet and writes in application number on the Enrollment Status.</li> <li>3. Submit the following items: <ul style="list-style-type: none"> <li>• Complete Application with Enrollment Status notes.</li> <li>• Head Start/Early Head Start Eligibility Worksheet with copies of Income (Calculated Selection Criteria Points)</li> <li>• Age documentation</li> <li>• Compliance Certification Form</li> <li>• Medical Card (if applicable)</li> <li>• Health (Physical &amp; Dental, if applicable)</li> <li>• Health-Consents, Authorizations, &amp; Releases and Health History (Completed June-April for current school year)</li> <li>• Admission</li> <li>• IEP/IFSP (if applicable)(points are not given unless a current IEP/IFSP is in place)</li> </ul> </li> </ol> <p>If any of these items are missing, follow up must occur at the site, prior to sending the application to the ERSEA Manager.</p> <ol style="list-style-type: none"> <li>4. Submit all documents in a folder with label, including child's name (last, first), site name with Head Start or Early Head Start, and child's date of birth. (Manila folder for income eligible, gray folders for 130% and red folders for over.) Place folder in Pink envelope and submit to ERSEA Manager. Rural will e-mail during school year.</li> </ol> <p><b>Application arrives at Administration Office:</b></p>		

Standard	Performance Standard	Plan of Action
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<ol style="list-style-type: none"> <li>1. ERSEA Manager reviews application and contents to ensure that the file is ready to process. If the application is incomplete the file is returned to the site for additional follow-up prior to processing. The ERSEA Manager will document on the Enrollment Status any errors found and inform the Family Service Worker. The application must be resubmitted within one week. If it is not, then an explanation is required and will be documented on the Enrollment Status.</li> <li>2. ERSEA Manager processes the application by initialing the Eligibility Worksheet.</li> <li>3. Depending upon site's enrollment, the following is followed:  <b>Child is placed on appropriate Waiting List (Income Eligible, 130% and Over Income) prior to school starting:</b> <ol style="list-style-type: none"> <li>a. ERSEA Manager and Family Service Worker and/or Site Supervisor discuss the classroom placement.</li> <li>b. The ERSEA Manager/Family Service Worker sends the family an acceptance letter. The letter indicates any entry needs needed prior to the beginning of school with dates to submit documents.</li> <li>c. The ERSEA Manager or Family Service Worker and/or Site Supervisor document date letter was sent on Accept date on Waiting List.</li> <li>d. The ERSEA Manager/Family Service Worker will flag the application if there are any specific concerns (mental health and/or special needs) and route it to the content area Managers.</li> </ol> </li> </ol> <p><b>Child placed on appropriate Waiting List (due to full center)</b></p> <ol style="list-style-type: none"> <li>a. The Family Service Worker sends the family a letter indicating that the child has been placed on the Waiting List.</li> <li>b. The Family Service Worker makes a copy of letter sent and placed in file.</li> </ol>
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CONCHO VALLEY  
COUNCIL OF GOVERNMENTS

HEAD START/EARLY HEAD START



ANNUAL RECRUITMENT SCHEDULE OF EVENTS

Month	Schedule of Events
<b>January/ February (kick off)</b>	<ul style="list-style-type: none"> <li>• ERSEA Team assist in reviewing Selection Criteria to see if points need to be changed using the Community Assessment Data</li> <li>• ERSEA Team review current enrollment forms and update if necessary.</li> <li>• ERSEA Team assist in updating flyers if necessary.</li> <li>• Family Service Workers begin 2<sup>nd</sup> year updates with children that are returning.</li> <li>• All sites determine Pre-Registration dates for April.</li> </ul>
<b>March/ April</b>	<ul style="list-style-type: none"> <li>• ERSEA Manager completes Recruitment Training with all persons responsible for completing applications in March.</li> <li>• ERSEA Team sets goal for the number of applications needed for the following school year.</li> </ul>

Standard	Performance Standard	Plan of Action
	<ul style="list-style-type: none"> <li>• Site Supervisors begin contacting families of children on the waiting list (that were not selected for enrollment and are not kindergarten eligible) to see if they are still interested in services and to let them know of Pre-Registration dates.</li> <li>• Designated staff begin to contact LEAs, West Texas Rehab and ECI see if there are age eligible children for the program and inform them of Pre-Registration dates.</li> <li>• Designated staff will email MOU partners about Pre-Registration dates.</li> <li>• Recruitment Material is created and/or purchased and sent to sites.</li> <li>• Rural Site Supervisors will advertise Pre-Registration in local newspaper, marquee, and radio station if available</li> <li>• Designated staff for San Angelo will advertise Pre-Registration in local newspaper, magazine, marquee, and radio station.</li> <li>• Set up recruitment stations at local events, when feasible.</li> </ul>	
May/July	<ul style="list-style-type: none"> <li>• Complete Pre-Registration application and waiting list turned in the month of May.</li> <li>• ERSEA Manager will approve Pre-Registration applications.</li> <li>• ERSEA Manager or Family Service Workers send out acceptance letters.</li> <li>• Conduct Summer Registration Days in June and/or July for sites that are not full and do not have a waiting list.</li> <li>• Sites that are not full continue to work on incomplete files.</li> <li>• Schedule accepted children's one on one visit to complete all other forms needed to start on the first day of school.</li> </ul>	
August	<ul style="list-style-type: none"> <li>• Recruitment is ongoing and is conducted accordingly to each Site's needs.</li> <li>• Files are approved, placed on waiting list and accepted for sites that are not fully enrolled.</li> <li>• 130% and Over income families are accepted if no one is on the Income Eligible Waiting List.</li> </ul>	
September/December	<ul style="list-style-type: none"> <li>• Recruitment is ongoing and is conducted accordingly to each site's needs. Each site should at all times maintain full enrollment along with a waiting list.</li> <li>• Set up recruitment stations at local events.</li> </ul>	
<p><b>A file is considered for enrollment slots only if the ERSEA Manager has approved it.</b></p>		



## 1302 Education and Child Development Program Services

### **Subpart C – Education and Child Development Program Services**

1302.30 Purpose.

1302.31 Teaching and the learning environment.

1302.32 Curricula.

1302.33 Child screenings and assessments.

1302.34 Parent and family engagement in education and child development services.

1302.35 Education in home-based programs.

1302.36 Tribal language preservation and revitalization.

<b>Standard</b>	<b>Performance Standard</b>	<b>Plan of Action</b>
<b>Subpart C</b>	<b>Education and Child Development Program Services</b>	
<p data-bbox="191 228 428 266"><b>§1302.30</b></p> <p data-bbox="191 1300 428 1338"><b>§1302.31</b></p>	<p data-bbox="428 228 1108 266"><b>Purpose.</b></p> <p data-bbox="428 305 1108 1256">All programs must provide high-quality early education and child development services, including for children with disabilities, that promote children’s cognitive, social, and emotional growth for later success in school. A center-based or family child care program must embed responsive and effective teacher-child interactions. A home-based program must promote secure parent-child relationships and help parents provide high-quality early learning experiences. All programs must implement a research-based curriculum, and screening and assessment procedures that support individualization and growth in the areas of development described in the Head Start Early Learning Outcomes Framework: Ages Birth to Five and support family engagement in children’s learning and development. A program must deliver developmentally, culturally, and linguistically appropriate learning experiences in language, literacy, mathematics, social and emotional functioning, approaches to learning, science, physical skills, and creative arts. To deliver such high-quality early education and child development services, a center-based or family child care program must implement, at a minimum, the elements contained in §§1302.31 through 1302.34, and a home-based program must implement, at a minimum, the elements in §§1302.33 and 1302.35.</p> <p data-bbox="428 1300 1108 1338"><b>Teaching and the learning environment.</b></p>	

Standard	Performance Standard	Plan of Action
(a)	<p>Teaching and the learning environment. A center-based and family child care program must ensure teachers and other relevant staff provide responsive care, effective teaching, and an organized learning environment that promotes healthy development and children’s skill growth aligned with the Head Start Early Learning Outcomes Framework: Ages Birth to Five, including for children with disabilities. A program must also support implementation of such environment with integration of regular and ongoing supervision and a system of individualized and ongoing professional development, as appropriate. This includes, at a minimum, the practices described in paragraph (b) through (e) of this section.</p>	<ol style="list-style-type: none"> <li>1. Teaching staff and other relevant staff are provided professional development on program policies and procedures.</li> <li>2. Staff and classrooms are monitored using the Monitoring Protocol, CLASS tool and are provided Coaching as needed to ensure teaching staff and other relevant staff provide responsive care, effective teaching and appropriate supervision that promote healthy development and children’s growth aligned with the Head Start and Early Head Start Early Learning Outcomes Framework: Birth to Five. (ELOF)</li> <li>3. All staff are provided training on Active Supervision. Teaching staff ensure no child is left alone or unsupervised, inside or outside the classroom. Teaching staff will not sit down while the children are on the playground; staff position themselves so they can always observe all children; this allows teaching staff to react quickly when necessary and to stay close to children that may need additional support. Teaching staff will use the “Transition Roll Call” to account for all children with name-to-face recognition by visually identifying each child when transitioning children from the classroom.</li> <li>4. Teaching staff should always be able to account for the children in their care. They continuously scan the entire environment to know where everyone is and what they are doing. They also count the children frequently. This is especially important during transitions when children are moving from one location to another.</li> <li>5. Teaching staff are provided support from their Site Supervisor as well as ongoing professional development from the administrative staff.</li> <li>6. Head Start and Early Head Start Teaching staff are observed at least two times during the program year by reliable CLASS observers using the CLASS tool.</li> <li>7. Coaching may be provided to teaching staff as needed.</li> </ol>
(b)	<p><u>Effective teaching practices.</u></p>	

Standard	Performance Standard	Plan of Action
(1)	Teaching practices must:	<ol style="list-style-type: none"> <li>1. Head Start and Early Head Start teaching staff are provided professional development on the CLASS domains and dimensions; Emotional Support, Classroom Organization and Instruction Support.</li> <li>2. Head Start teaching practices are aligned with the CLASS domains, dimensions and indicators.</li> <li>3. All teaching staff rely on a consistent daily schedule and routines to foster trust and emotional security.</li> <li>4. All teaching staff develop lesson plans with a variety of activities that promote language development, higher-order thinking skills, problem-solving and emotional and behavioral skill development.</li> </ol>
(i)	Emphasize nurturing and responsive practices, interactions, and environments that foster trust and emotional security; are communication and language rich; promote critical thinking and problem-solving; social, emotional, behavioral, and language development; provide supportive feedback for learning; motivate continued effort; and support all children’s engagement in learning experiences and activities;	<ol style="list-style-type: none"> <li>1. All teaching staff develops lesson plans that provide intentional learning experiences that build upon the individual needs of children and focus on the growth and development of children as defined in the ELOF. (Early Learning Outcomes Framework).</li> <li>2. All teaching staff must provide a consistent daily schedule to establish routines and must plan transitions that include intentional learning opportunities.</li> </ol>
(ii)	Focus on promoting growth in the developmental progressions described in the Head Start Early Learning Outcomes Framework: Ages Birth to Five by aligning with and using the Framework and the curricula as described in §1302.32 to direct planning of organized activities, schedules, lesson plans, and the implementation of high-quality early learning experiences that are responsive to and build upon each child’s individual pattern of development and learning;	<ol style="list-style-type: none"> <li>1. All teaching staff use assessment data to plan individualization, as well as large and small group activities.</li> </ol>
(iii)	Integrate child assessment data in individual and group planning; and,	<ol style="list-style-type: none"> <li>1. Teaching staff provide developmentally appropriate learning experiences that focus on the 5 domains outlined in the ELOF. <b>Infant/Toddler Domains:</b> Approaches to Learning including initiative, curiosity and creativity; Social and Emotional Development including social studies; Language and Communication, Cognition, Perceptual, Motor and Physical Development. <b>Preschooler Domains:</b> Approaches to Learning,</li> </ol>
(iv)	Include developmentally appropriate learning experiences in language, literacy, social and emotional development, math, science, social studies, creative arts, and physical development that are focused toward achieving progress outlined in the Head Start Early Learning Outcomes Framework; Ages Birth to Five.	<ol style="list-style-type: none"> <li>1. Teaching staff provide developmentally appropriate learning experiences that focus on the 5 domains outlined in the ELOF. <b>Infant/Toddler Domains:</b> Approaches to Learning including initiative, curiosity and creativity; Social and Emotional Development including social studies; Language and Communication, Cognition, Perceptual, Motor and Physical Development. <b>Preschooler Domains:</b> Approaches to Learning,</li> </ol>

Standard	Performance Standard	Plan of Action
		<p>Social and Emotional Development, Language and Communication, Literacy, Mathematics Development, Scientific Reasoning, Perceptual, Motor and Physical Development.</p>
(2)	<p>For dual language learning, a program must recognize bilingualism and biliteracy as strengths and implement research-based teaching practices that support their development. These practices must:</p>	<p>1. We will provide training for staff on bilingualism and biliteracy and their importance to dual language learners.</p>
(i)	<p>For an infant or toddler, dual language learning, include teaching practices that focus on the development of the home language, when there is a teacher with appropriate language competency, and experiences that expose the child to English;</p>	<p>1. For infants and toddler dual language learners, teaching staff will focus on the child’s development of their home language while planning English rich language experiences.</p>
(ii)	<p>For a preschool age, dual language learner, include teaching practices that focus on both English language acquisition and the continued development of the home language; or,</p>	<p>1. For preschool age dual language learners, teaching staff will focus on both English language acquisition and the continued development of the child’s home language, when possible. 2. The learning environment will include culturally and linguistically appropriate materials.</p>
(iii)	<p>If staff do not speak the home language of all children in the learning environment, include steps to support the development of the home language for dual language learners such as having culturally and linguistically appropriate materials available and other evidence-based strategies. Programs must work to identify volunteers who speak children’s home language/s who could be trained to work in the classroom to support children’s continued development of the home language.</p>	<p>1. If staff do not speak the home language of all children in the classroom, the program or teaching staff will try to identify volunteers who speak children’s home language(s) to help support the continued development of their home language as well as supporting their acquisition of the English language.</p>
(c)	<p><u>Learning environment.</u> A program must ensure teachers implement well-organized learning</p>	<p>1. The indoor learning environment will be arranged in well-defined learning centers and will be supplied with</p>



Standard	Performance Standard	Plan of Action
	<p>environments with developmentally appropriate schedules, lesson plans, and indoor and outdoor learning experiences that provide adequate opportunities for choice, play, exploration and experimentation among a variety of learning, sensory, and motor experiences and:</p>	<p>developmentally appropriate STEAM (science, technology, engineering, art, math) materials that will allow for choices, creative expression, exploration and experimentation.</p> <p>2. The outdoor learning environment offers adequate space and will be supported by appropriate materials and equipment to allow for choices, exploration and experimentation.</p>
(1)	<p>For infants and toddlers, promote relational learning and include individualized and small group activities that integrate appropriate daily routines into a flexible schedule of learning experiences; and,</p>	<p>1. The infant/toddler learning environment will provide developmentally appropriate daily routines within a flexible schedule to promote individualization and small group activities.</p> <p>2. The learning environment will be arranged to allow infant/toddlers the opportunity to explore and experience a variety of sensory and motor materials in a safe manner.</p>
(2)	<p>For preschool age children, include teacher-directed and child-initiated activities, active and quiet learning activities, and opportunities for individual, small group, and large group learning activities.</p>	<p>1. The preschool learning environment will be organized into well-organized learning centers which include:</p> <ul style="list-style-type: none"> <li>• Pretend and Learn Center</li> <li>• Construction</li> <li>• Library/Listen</li> <li>• Writing/ABC Corner</li> <li>• Science/Math</li> <li>• Health/Nutrition</li> <li>• Creative Arts</li> <li>• Table Toys</li> <li>• Technology</li> <li>• Sand &amp; Water</li> </ul> <p>2. A “Safe Place” is provided to help promote self-regulation.</p> <p>3. The learning environment and daily schedule will allow for a balance of teacher-directed and child-initiated activities, individually and for large and small groups.</p>
(d)	<p>Materials and space for learning. To support implementation of the curriculum and the</p>	<p>1. Administration and Site Supervisors will ensure there are an adequate number of supplies and materials to support</p>

Standard	Performance Standard	Plan of Action
(e)	<p>requirements described in paragraphs (a), (b), (c), and (e) of this section a program must provide age-appropriate equipment, materials, supplies and physical space for indoor and outdoor learning environments, including functional space. The equipment, materials, and supplies must include any necessary accommodations and the space must be accessible to children with disabilities. Programs must change materials intentionally and periodically to support children's interest, development, and learning.</p> <p><u>Promoting learning through approaches to rest, meals, routines, and physical activity.</u></p> <p>(1) A program must implement an intentional, age-appropriate approach to accommodate children's need to nap or rest, and that, for preschool age children in a program that operates for 6 hours or longer per day provides a regular time every day at which preschool age children are encouraged but not forced to rest or nap. A program must provide alternative quiet learning activities for children who do not need or want to rest or nap.</p>	<p>implementation of the curriculum and that equipment, materials and supplies are age appropriate.</p> <p>2. Administration and Site Supervisors will ensure the indoor and outdoor physical space is appropriate for the children being serviced according to the most stringent federal and state guidelines.</p> <p>3. Necessary accommodations to materials and space will be made to accommodate children with disabilities to the extent possible.</p> <p>4. The program curriculum is themed-based; classroom supplies and materials will be intentionally changed according to the appropriate theme and changed periodically to support children's interest, development and learning.</p> <p>5. No screen time for any child under the age of 2 is allowed. Any screen time must be prior approved ie: lesson plan and educational and used as a supplement to an activity that is listed on your lesson plan. Screen time may not exceed 20 minutes/day. Screen time may not be used during meals, snack or nap times. Screentime must be age appropriate and may not include advertising or violence.</p> <p>1. All teaching staff develop a classroom daily activity schedule to establish routines that are age appropriate and meet the developmental needs of the children.</p> <p>2. Planned activities for Head Start include a specified time to allow children to nap or rest. Early Head Start will be flexible in nap time, especially for infants. Nap time will be listed on their daily schedule but will be flexible to where the infant/toddler can nap when needed throughout the day.</p> <p>3. No child will be forced to rest or nap.</p> <p>4. A quiet alternative supervised activity may be provided to children who do not wish to rest or nap.</p> <p>5. During nap/rest time for 18 months and older one teaching staff must be free from activities, not directly involving the teaching, care and supervision of children, such as administrative and clerical duties,</p>

Standard	Performance Standard	Plan of Action
(2)	<p>A program must implement snack and meal times in ways that support development and learning. For bottle-fed infants, this approach must include holding infants during feeding to support socialization. Snack and meal times must be structured and used as learning opportunities that support teaching staff-child interactions and foster communication and conversations that contribute to a child’s learning, development, and socialization. Programs are encouraged to meet this requirement with family style meals when developmentally appropriate. A program must also provide sufficient time for children to eat, not use food as a reward or punishment, and not force children to finish their food.</p>	<p>meal preparation, janitorial duties and personal use of electronic devices. For Classrooms serving children under 18 months if more than two paid staff are present, you can follow the above.</p> <ol style="list-style-type: none"> <li>1. The program will provide breakfast, lunch and a snack daily for all children.</li> <li>2. Bottle-fed children will be held while fed to support socialization.</li> <li>3. Teaching staff will sit with the children during meals and snacks to model appropriate behavior and promote language development through conversations.</li> <li>4. Teaching staff will promote family style dining to develop independence and self-help skills.</li> <li>5. Teaching staff will allow sufficient time to eat.</li> <li>6. Food will not be used as a reward or punishment.</li> <li>7. Children will be encouraged to eat a variety of foods but will not be forced to eat or finish their food.</li> </ol>
(3)	<p>A program must approach routines, such as hand washing and diapering, and transitions between activities, as opportunities for strengthening development, learning, and skill growth.</p>	<ol style="list-style-type: none"> <li>1. Routines such as hand washing, toileting and transition activities <b>will</b> be positive interactions between teaching staff and children. These are seen as opportunities for skills development. Transitions are intentional and learning will be embedded as individual, small groups and large groups of children are moving from one activity to another.</li> </ol>
(4)	<p>A program must recognize physical activity as important to learning and integrate intentional movement and physical activity into curricular activities and daily routines in ways that support health and learning. A program must not use physical activity as reward or punishment.</p> <p><b><u>Curricula.</u></b></p>	<ol style="list-style-type: none"> <li>1. Physical activity and gross motor movement will be included as an integral part of the daily schedule.</li> <li>2. Physical activity will not be used as a reward or punishment.</li> </ol>

Standard	Performance Standard	Plan of Action
<p>§1302.32</p>	<p><u>Curricula.</u></p> <p>(a)</p> <p>(1) Center-based and family child care programs must implement developmentally appropriate research-based early childhood curricula, including additional curricular enhancements, as appropriate that:</p> <p>(i) Are based on scientifically valid research and have standardized training procedures and curriculum materials to support implementation;</p> <p>(ii) Are aligned with Head Start Early Learning Outcomes Framework: Ages Birth to Five and, as appropriate, state early learning and development standards; and are sufficiently content-rich to promote measurable progress toward development and learning outlined in the Framework; and,</p> <p>(iii) Have an organized developmental scope and sequence that include plans and materials for learning experiences based on developmental progressions and how children learn.</p> <p>(2) A program must support staff to effectively implement curricula and at a minimum monitor curriculum implementation and fidelity, and provide support, feedback, and supervision for continuous improvement of its implementation through the system of training and professional development.</p> <p>(b) <u>Adaptation.</u> A program that chooses to make significant adaptations to a curriculum or a curriculum</p>	<p>1. The program uses a researched-based developmentally appropriate early childhood curriculum for the children we serve.</p> <p>1. Our curricula has standardized training procedures and materials to support implementation.</p> <p>1. Our curricula are aligned with the Head Start Early Learning Outcomes Framework: Ages Birth to Five. (ELOF) 2. Our Head Start curricula are also aligned with state learning standards and are content-rich to promote measurable progress toward develop and learning.</p> <p>1. Our curricula have organized developmental scope and sequence that include plans and materials for learning experiences based on developmental progressions and how children learn.</p> <p>1. Teaching staff receive training, ongoing support and supervision regarding the utilization and implementation of the curricula.</p> <p>Follow Standard</p>

Standard	Performance Standard	Plan of Action
<p><b>§1302.33</b></p> <p>(a)</p> <p>(1)</p> <p>(2)</p>	<p>enhancement described in paragraph (a)(1) of this section to better meet the needs of one or more specific populations must use an external early childhood education curriculum or content area expert to develop such significant adaptations. A program must assess whether the adaptation adequately facilitates progress toward meeting school readiness goals, consistent with the process described in §1302.102(b) and (c). Programs are encouraged to partner with outside evaluators in assessing such adaptations.</p> <p><b>Child screening and assessments.</b></p> <p><u>Screening.</u></p> <p>In collaboration with each child’s parent and with parental consent, a program must complete or obtain a current developmental screening to identify concerns regarding a child’s developmental, behavioral, motor, language, social, cognitive, and emotional skills within 45 calendar days of when the child first attends the program or, for the home-based program option, receives a home visit. A program that operates for 90 days or less must complete or obtain a current developmental screening within 30 calendar days of when the child first attends the program.</p> <p>A program must use one or more research-based developmental standardized screening tools to complete the screenings. A program must use as part of the screening additional information from family members, teachers, and relevant staff familiar with the child’s typical behavior.</p>	<p>See <b>“Behavioral Screening Policy”</b></p> <p>See <b>“Developmental Screening Policy”</b></p> <p><b>Policy: Head Start/Early Head Start Behavioral Screening Procedure:</b></p> <ol style="list-style-type: none"> <li>1. Head Start/Early Head Start staff will inform parent/guardian of the types and purposes of all screenings to be administered prior to the screenings.</li> <li>2. Parental consent for screenings will be obtained prior to the screening.</li> <li>3. A timely and systematic approach toward screening identifies children who need to be referred for more formal assessments in order to receive the benefit of intervention, or other related services.</li> <li>4. At enrollment, staff will explain to parents that we are required to do a Behavioral Screening for each child within 45 days calendar days of entry into the program. At this time the parent will be asked to sign a <b>“Consent, Authorizations and Releases”</b> form giving staff permission to conduct a Behavioral Screening.</li> </ol>

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<p>(3)</p> <p>(i)</p> <p>(ii)</p> <p>(4)</p>	<p>If warranted through screening and additional relevant information and with direct guidance from a mental health or child development professional a program must, with the parent’s consent, promptly and appropriately address any needs identified through:</p> <p>Referral to the local agency responsible for implementing IDEA for a formal evaluation to assess the child’s eligibility for services under IDEA as soon as possible, and not to exceed timelines required under IDEA; and,</p> <p>Partnership with the child’s parents and the relevant local agency to support families through the formal evaluation process.</p> <p>If a child is determined to be eligible for services Under IDEA, the program must partner with parents and the local agency responsible for implementing IDEA, as appropriate, and deliver the service in subpart F of this part.</p>	<p>5. Within 45 days of their start date and not prior to the child entering the program teaching staff will complete a <b>Health and Behavior Observation Form 10</b> for each child. The <b>Health and Behavior Observation Form 10</b> is a brief screening describing children’s general demeanor in several areas: health, behavior, performance and communication.</p> <p>6. Early Head Start parents/guardians are asked to complete a <b>“Mental Wellness Checklist 0-2”</b> within 2 weeks of their start date and not prior to the child entering the program into the program and within 2 weeks of the required age according to the <b>“TH Steps Medical Checkup Periodicity Schedule” (EPSDT)</b>, regarding their child’s behavior. Head Start parents/guardians are asked to complete a <b>“Mental Wellness Checklist 3-5”</b> within 45 days of their start date and not prior to the child entering the program regarding their child’s behavior.</p> <p>7. The <b>“Health and Behavior Observation, Form 10”</b> and <b>“Mental Wellness Checklists”</b> may be reviewed by the Mental Health Professional on contract to help identify any concerns that may need intervention.</p> <p>8. If the teaching staff have concerns with a child’s mental wellness, the teaching staff will review the child’s <b>“Mental Wellness Checklist”</b> and discuss the concern with the Health /Mental Health Manager to determine if a referral would be beneficial.</p> <p><b>Policy: Head Start Developmental Screening Procedure:</b></p> <ol style="list-style-type: none"> <li>1. Head Start staff will inform parent/guardian of the types and purposes of all screenings to be administered prior to the screenings being completed.</li> <li>2. Parental consent for screenings will be obtained prior to the screening.</li> <li>3. A timely and systematic approach toward screening identifies children who may need a formal assessment in order to receive</li> </ol>

Standard	Performance Standard	Plan of Action
		<p>the benefit of early intervention. In collaboration with each child’s parent, and within 45 days of their start date and not prior to the child entering the program, staff will administer a linguistically and age-appropriate developmental screening.</p> <p>4. At enrollment, staff will explain to parents/guardians that we are required to do a developmental screening within 45 days of entry into the program to determine each child’s current level of development and to identify possible concerns regarding a child’s development, so we can develop an individualized approach to learning for each child. This is not applicable to second- and third-year children unless they did not receive the screening during their first year (late enrollment).</p> <p>5. Parents/guardians will be asked to sign the <b>“Consents, Authorizations &amp; Release”</b> form giving permission for Head Start staff to conduct the developmental screening.</p> <p>6. If parents/guardians do not allow the developmental screening, staff will discuss with parents/guardians what the screening is and why we are required to conduct a screening.</p> <p>7. If noncompliance is exhibited after barriers are addressed and education is provided parent/guardian will be asked to sign the <b>“Decline of Services”</b> form. The <b>“Decline of Services”</b> form will be filed in place of the LAP-D.</p> <p>8. Teaching staff will use the screening tool appropriate for the age of the child and will screen the child in their primary language.</p> <p>9. Screenings should be administered during a quiet part of the day or if ratios allow, children may be taken to an area outside the classroom to conduct the screening.</p> <p>10. All newly enrolled children must have a developmental screening within 45 days of entry into the program.</p> <p>11. When children are uncooperative or unresponsive, the child should be given more time in the classroom to feel comfortable and secure. The developmental screening must take place within 45 calendar days of the child’s start date.</p>

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		<p>12. Staff will follow the instructions for administering the LAP-D as outlined on the screening tool.</p> <ul style="list-style-type: none"> <li>• If the result is “PASS”, no further action or testing is needed.</li> </ul> <p>If the result is “REFER”,</p> <ol style="list-style-type: none"> <li>1. The teaching staff will rescreen the child in approximately 4 to 6 weeks. If the child fails the rescreen then:</li> <li>2. The teaching staff or other designated staff will discuss the results of the screening with parents and with their consent will complete the <b>Health and Developmental Initial Plan (H&amp;D)</b> and obtain parent signature. Parents will also be asked to signed a <b>Parent-Guardian Consent to Exchange Information</b> with the LEA.</li> <li>3. Copies of the H&amp;D, the Consent to Exchange Information and the LAP-Ds will be sent to the <b>Disability</b> Manager. The original copy of the documents will be placed in the Education section of the Childs file.</li> <li>4. The <b>Disability</b> Manager will initiate and send the referral to LEA and will send a copy to the site to be placed in the education section of the child’s file. If parent or guardian declines services the parent will be asked to sign the “<b>Decline of Services</b>”. The “<b>Decline of Services</b>” will be attached to the H&amp;D and will be placed in the education section of the child’s file.</li> <li>5. + If the child is determined eligible for services a copy of the ARD packet/IEP will be placed in the Disability Section of the child’s federal file.</li> <li>6. The results of the developmental screening and information received from parents will be used to plan individual instruction for each child.</li> </ol> <p><b>Policy: Early Head Start Developmental Screening (Developmental Screening) (D-Check)</b></p> <p><b>Procedure:</b></p>



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		<ol style="list-style-type: none"> <li>1. Early Head Start staff will inform parent/guardian of the types and purposes of all screenings to be administered prior to the screenings being completed.</li> <li>2. Parental consent for screenings will be obtained prior to the screening.</li> <li>3. Early Head Start staff will fill out the D-Check Cover Sheet and the front of the D-CHECK Screening Packet with the Child's full name, date of birth, age in months and date of screening. Leave nothing Blank.</li> <li>4. Find the child's current age in months and count backwards six months. Begin to administer D-Check Screening at this age and continue up to current age in months.</li> <li>5. The initial D-Check Screenings must be completed within the first 2 weeks of the Child's start date</li> <li>6. Complete every item for each developmental milestone column. (Thinking/Learning, Receptive Language/ Hearing, Expressive Language, Gross Motor, Fine Motor/Vision, Social /Emotional, Self-Help/Nutrition).</li> <li>7. Conduct the D-Check Screening according to <b>the "TH STEPS Medical Checkup Periodicity Schedule" (EPSDT)</b>. For example: If a child enters the program at 5 months of age you must complete an initial D-Check Screening for 0-5 months within 2 weeks of their enrollment. Then, following the <b>"TH STEPS Medical Checkup Periodicity Schedule" (EPSDT)</b>, when the child turns 6 months you must complete the D-Check Screening again, for the appropriate age group. The D-Check Screening must be conducted on or within two weeks of the child's birthday. For Example, if the child's birthday is 3/17, the D-Check cannot be completed before the 17<sup>th</sup> of the month.</li> </ol>

Standard	Performance Standard	Plan of Action
<p>(5)</p> <p>(i)</p>	<p>If, after the formal evaluation describe in paragraph (a)(3)(i) of this section, the local agency responsible for implementing IDEA determines the child is not eligible for the early intervention or special education and related services under IDEA, the program must:</p>	<p>8. Make a copy to the D-Check Screening, file the original in the student file.</p> <p><b>Policy: Referral Process for Failing the Developmental Check (D-Check) Screening</b> If a child scores 2 – X’s in any one developmental milestone column (Example: 2-X’s in Expressive Language) the teaching staff will begin the referral process.</p> <p><b>Procedure:</b></p> <ol style="list-style-type: none"> <li>1. The teaching staff will complete the Health and Developmental Initial Plan (H&amp;D) and obtain parent signature. The parents will also sign a Parent/Guardian Exchange of Information with ECI.</li> <li>2. Submit copy of the <b>H&amp;D</b>, the Exchange of Information, and copy of the D-Check to Early Head Start Education Manager and the Disability Manager. The original <b>copies</b> will be placed in the Childs file.</li> <li>3. The Disability Manager will initiate referral to ECI and will send a copy to the Site to be placed in the child’s file. If parent/or guardian declines services the parent will be asked to sign the “<b>Decline of Services</b>” form. The decline of services will be attached to the H&amp;D and will be placed in the child’s file.</li> <li>4. If a child is eligible for services a copy of the IFSP will be placed in the Disability Section of the child’s federal file.</li> </ol> <p>Follow Standard</p>

Standard	Performance Standard	Plan of Action
ii)  (A)          (B)    (b) (1)	<p>Seek guidance from a mental health or child development professional to determine if the formal evaluation shows the child has a significant delay in one or more areas of development that is likely to interfere with the child’s development and school readiness; and,</p> <p>If the child has a significant delay, the partner with parents to help the family access services and supports to help address the child’s identified needs.</p> <p>Such additional services and supports may be available through a child’s health insurance or it may be appropriate for the program to provide needed services and supports under section 504 of the Rehabilitation Act if the child satisfies the definition of disability in 29 U.S.C. section 605(9)(b) of the Rehabilitation Act, to ensure that the child who satisfies the definition of the disability in 29 U.S.C. 705(9)(b) of the rehabilitation Act is not excluded from the program on the basis of disability.</p> <p>A program may use program funds for such services and supports when no other sources of funding are available.</p> <p><u>Assessment for individualization.</u>            A program must conduct standardized and structured assessments, which may be observation-based or direct, for each child that provide ongoing information to evaluate the child’s developmental level and progress in outcomes aligned to the goals described in the Head Start Early Learning Outcomes Framework: Ages Birth to Five. Such assessments must result in</p>	<p>Follow Standard</p> <p>Follow Standard</p> <p>Follow Standard</p> <p>Follow Standard</p> <p>1. Teaching staff conduct development assessments 3 times a year for Head Start and 4 times a year for Early Head Start, when feasible.</p>

Standard	Performance Standard	Plan of Action
(2)	<p>usable information for teachers, home visitors, and parents and be conducted with sufficient frequency to allow for individualization within the program year.</p> <p>A program must regularly use information from paragraph (b)(1) of this section along with informal teacher observations and additional information from family and staff, as a relevant, to determine a child's strengths and needs, inform and adjust strategies to better support individualized learning and improve teaching practices in center-based and family child care settings, and improve home visit strategies in home-based models.</p>	<ol style="list-style-type: none"> <li>2. Teaching staff observe children in different setting throughout the day and document using checklists or anecdotal notes.</li> <li>3. Teaching staff use information from checklists and anecdotal notes to evaluate children's developmental level and progress in meeting School Readiness Goals, which are aligned with Head Start Early Learning Outcomes Framework: Ages birth to five. (HSELOP)</li> <li>4. Data from assessments are used to individualize instruction for each child and shared with parents during conferences and home visits.</li> </ol>
(3)	<p>If warranted from the information gathered from paragraph (b)(1) and (2) of this section and with direct guidance from a mental health or child development professional and a parent's consent, a program must refer the child to the local agency responsible for implementing IDEA for a formal evaluation to assess a child's eligibility for services under IDEA&gt;</p>	<ol style="list-style-type: none"> <li>1. Data from assessments and information from parents are used to determine each child's strength and needs and to establish goals for each child throughout the program year.</li> <li>2. Teaching staff plan intentional activities for individual children, small groups of children or during whole group time to develop skills needed to meet children's goals.</li> </ol>
(c)	<p><u>Characteristics of screenings and assessments.</u></p>	<ol style="list-style-type: none"> <li>1. If concerns arise from observations and assessment data and with parent's consent, a child will be referred to the appropriate professional for further evaluation.</li> </ol>
(1)	<p>Screenings and assessment must be valid and reliable for the population and purpose for which they will be used, including by being conducted by qualified and trained personnel, and being age, developmentally, culturally and linguistically appropriate, and appropriate for children with disabilities, as needed.</p>	
(2)		Follow Standard

Standard	Performance Standard	Plan of Action
	<p>If a program serves a child who speaks language other than English, a program must use qualified bilingual staff, contractor, or consultant to:</p> <p>(i) Access language skills in English and in the child’s home language, to assess both the child’s progress in the home language and in English language acquisition;</p> <p>(ii) Conduct screenings and assessments for domains other than language skills in the language or languages that best capture the child’s development and skills in the specific domain; and,</p> <p>(iii) Ensure those conducting the screening or assessment know and understand the child’s language and culture and have sufficient skill level in the child’s home language to accurately administer the screening or assessment and to record and understand the child’s responses, interactions, and communications.</p> <p>(3) If a program serves a child who speaks a language other than English and qualified bilingual staff, contractors, or consultant are not able to conduct screening and assessments, a program must use an interpreter in conjunction with a qualified staff person to conduct screening and assessments as described in paragraph (c)(2)(i) through (iii) of this section.</p> <p>(4) If a program serves a child who speaks a language other than English and can demonstrate that there is not a qualified bilingual staff person or interpreter, then screenings and assessments may be conducted in English. In such a case, a program must also gather</p>	<p>Follow Standard</p> <p>Follow Standard</p> <p>Follow Standard</p> <p>Follow Standard</p> <p>Follow Standard</p>

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<p>(d)</p> <p><b>§1302.34</b></p> <p>(a)</p> <p>(b)</p> <p>(1)</p> <p>(2)</p>	<p>and use other information, including structured observations over time and information gathered in a child’s home language from the family; for use in evaluating the child’s development and progress.</p> <p>Prohibitions on use of screening and assessment data. The use of screening and assessment items and data on any screening or assessment authorized under this subchapter by any agent of the federal government is prohibited for the purposes of ranking, comparing, or otherwise evaluating individual children for purposes other than research, training, or technical assistance, and is prohibited for the purposes of providing rewards and sanctions for individual children or staff. A program must not use screening or assessments to exclude children from enrollment or participation.</p> <p><b><u>Parent and family engagement in education and child development services.</u></b></p> <p>Purpose. Center-based and family child care programs must structure education and child development services to recognize parents’ role as children’s lifelong educators, and to encourage parents to engage in their child’s education.</p> <p>Engaging parents and family members. A program must offer opportunities for parents and family members to be involved in the program’s education services and implement policies to ensure:</p> <p>The program’s settings are open to parents during all programs hours;</p>	<p>Follow Standard</p> <p>Follow Standard</p> <p>1. Staff recognizes parents as their child’s life long educator. The program provides training on child development, positive discipline and guidance. Parents are encouraged to participate in classroom activities and home to school connection.</p>

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(3)	Teachers regularly communicate with parents to ensure they are well-informed about their child’s routines, activities, and behavior;	<p>1. Parents are welcome and encouraged to visit the Head Start/Early Head Start center during operating hours.</p>
	Teachers hold parent conferences, as needed, but no less than two times per program year, to enhance the knowledge and understanding both staff and parents of the child’s education and developmental progress and activities in the program;	<p>1. Teaching staff post their daily activity schedule and lesson plans for parents to review.</p> <p>2. Teaching staff communicate with parents through Class Dojo, newsletters, flyers and verbally to ensure they are well-informed about family engagement activities.</p> <p>3. Teaching staff communicate regularly with parents about their children’s behavior. If necessary, teaching staff may request a private meeting with parents.</p>
	Parents have the opportunity to learn about and to provide feedback on selected curricula and instructional materials used in the program;	<p>1. Teaching staff conduct two parent teacher conferences per year to discuss and share children’s developmental progress.</p>
	Parents and family members have opportunities to volunteer in the class and during group activities;	<p>1. Parents are encouraged to review the lesson plans and make suggestions for goals and activities.</p> <p>2. Parents are encouraged to share their knowledge and interests on topics and activities.</p> <p>3. Teaching staff share with parents, activities they can do at home to extend their child’s learning.</p>
	Teachers inform parents, about the purposes of and the results from screenings and assessments and discuss their child’s progress;	<p>1. Parents and family members are encouraged to volunteer in the classroom and participate in group activities.</p>
	Teachers inform parents, about the purposes of and the results from screenings and assessments and discuss their child’s progress;	<p>1. At the beginning of each child’s entry into the program, parents are informed of the screenings and assessments required and are given the results during parent-teacher</p>

<b>Standard</b>	<b>Performance Standard</b>	<b>Plan of Action</b>
<p>(8)</p> <p><b>§1302.35</b></p> <p><b>§1302.36</b></p>	<p>Teachers, except those described in paragraph (b)(8) of this section, conduct at least two home visits per program year for each family, including one before the program year begins, if feasible, to engage the parents in the child’s learning and development, except that such visits may take place at a program site or another safe location that affords privacy at the parent’s request, or if a visit to the home present significant safety hazards for staff; and,</p> <p>Teachers that serve migrant or seasonal families make every effort to conduct home visits to engage the family in the child’s learning and development.</p> <p><b>Education in home-based programs.</b></p> <p><b>Tribal language preservation and revitalization.</b></p>	<p>conferences, home visits and informal communication with parents.</p> <p>1. Teaching staff will conduct at least 2 home visits during the program year when feasibly possible. 2. Home visits will take place in the home unless otherwise requested by parents.</p> <p>Not Applicable</p> <p>Not Applicable</p> <p>Not Applicable</p>





# 1302 Health Program Services

## **Subpart D – Health Program Services**

1302.40 Purpose.

1302.41 Collaboration and communication with parents.

1302.42 Child Health status and care.

1302.43 Oral health practices.

1302.44 Child nutrition.

1302.45 Child mental health and social and emotional well-being.

1302.46 Family support services for health, nutrition, and mental health.

1302.47 Safety practices.

Standard	Performance Standard	Plan of Action
Subpart D	Health Program Services	
§1302.40	<b>Purpose.</b>	
(a)	A program must provide high-quality health, oral health, mental health, and nutrition services that are developmentally, culturally, and linguistically appropriate and that will support each child’s growth and school readiness.	
(b)	A program must establish and maintain a Health Services Advisory Committee that includes Head Start parents, professionals, and other volunteers from the community.	
§1302.41	<b>Collaboration and communication with parents.</b>	
(a)	For all activities described in this part, programs must collaborate with parents as partners in the health and well-being of their children in a linguistically and culturally appropriate manner and communicate with parents about their child’s health needs and development concerns in a timely and effective manner.	
(b)	At a minimum, a program must:	
(1)	Obtain advance authorization from the parent or other person with legal authority for all health and developmental procedures administered through the program or by contract or agreement, and, maintain written documentation if they refuse to give authorization for health services; and,	<ol style="list-style-type: none"> <li>1. Encourage parents/guardians to discuss their reasons for refusal of health services.</li> <li>2. Family Service Worker (FSW) will share information and/or brochures explaining the important of a variety of health services.</li> </ol>
		<b>Policy: Decline of Services</b>
		<b>Procedure:</b>
		<ol style="list-style-type: none"> <li>1. If parents/guardians refuse to give authorization for health services after barriers are addressed and education is provided, with approval from the Health Manager, the child’s parent/guardian will be asked to sign the <b>Decline of Services</b></li> </ol>

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(2)	Share with parents the policies for health emergencies that require rapid response on the part of staff or immediate medical attention.	<p>form. (This form should be attached behind the specific <b>Health and Developmental Initial Follow-up Plan</b> for the services being denied.)</p> <p><b>Policy: Emergency Response Systems</b></p> <p><b>Procedures:</b></p> <ol style="list-style-type: none"> <li>1. Emergency telephone numbers should be displayed next to each telephone in the center, including portable telephones.</li> <li>2. When calling about an emergency be prepared to give the following information to the emergency response team: <ul style="list-style-type: none"> <li>• Name of the caller;</li> <li>• Agency;</li> <li>• Nature of emergency;</li> <li>• Telephone number</li> <li>• Address;</li> <li>• Directions;</li> <li>• Location of injured person</li> <li>• Number and age of person involved;</li> <li>• Condition of person involved</li> <li>• What help has already been provided.</li> </ul> </li> <li>3. Each classroom teacher, teacher assistant, and substitute will be trained as to where the children’s emergency contact information is kept and emergency numbers are posted.</li> <li>4. Copies of the following information will accompany staff and children when they go outside to play, for fire drills, and/or any other time they leave the classroom. <ul style="list-style-type: none"> <li>• Form 2935 <b>State Admission Information</b> Texas Department of Family and Protective Services will be used as the Emergency Contact Information for each child.</li> </ul> </li> <li>5. Form 2935 <b>State Admission Information</b> must be updated monthly with parents using the <b>Monthly Emergency Updates</b> and filed in the State Files.</li> </ol>

Standard	Performance Standard	Plan of Action
<p>§1302.42</p> <p>(a)</p> <p>(1)</p> <p>(2)</p> <p>(b)</p> <p>(1)</p> <p>(i)</p>	<p><b>Child Health status and care.</b></p> <p><u>Source of health care.</u></p> <p>A program, within 30 calendar days after the child first attends the program or, for the home-based program option, receives a home visit, must consult with parents to determine whether each child has ongoing sources of continuous, accessible health care – provided by a health care professional that maintains the child’s ongoing health record and is not primarily a source of emergency or urgent care – and health insurance coverage.</p> <p>If the child does not have such a source of ongoing care and health insurance coverage or access to care through the Indian Health Services, the program must assist families in accessing a source of care and health insurance that will meet these criteria, as quickly as possible.</p> <p><u>Ensuring up-to-date child health status.</u></p> <p>Within 90 calendar days after the child first attends the program or, for the home-based program option, receives a home visit, with the exceptions noted in paragraph (b)(3) of this section, a program must:</p> <p>Obtain determinations from health care and oral health care professionals as to whether or not the child is up-to-date on a schedule of age appropriate preventive and primary medical and oral health care, based on: the well-child visits and dental periodicity schedules as</p>	<ol style="list-style-type: none"> <li>1. Interview parents/guardians at the time of enrollment to determine if the child has a health care and dental provider that serves as a <b>Medical Home</b>, that can continue beyond the time of Head Start/Early Head Start enrollment.</li> <li>2. Interview parents/guardians at the time of enrollment to determine the source of funding for health care.</li> <li>3. Assist families with accessing health care via Medicaid or SCHIP.</li> <li>4. Give a list of health care providers to families, update as changes occur.</li> <li>5. A list of health care providers will be placed in the <b>Welcome Packet</b> and/or <del>Operational Policies and Procedures</del>. Parents will sign stating they received a copy.</li> </ol> <ol style="list-style-type: none"> <li>1. The Head Start/Early Head Start program will follow the <b>Texas Health Steps Medical Checkups Periodicity Schedule (EPSDT)</b> for children birth through twenty years of age.</li> <li>2. The Head Start/Early Head Start program will follow the <b>Center for Disease Prevention Immunization Schedule</b>.</li> <li>3. Ask parents/guardians for information on the enrolled child’s last immunization, medical, dental, or mental health visit and/or screening from their health care provider.</li> <li>4. If dental and physical is not obtained by the first day of entry into the program a <b>Health and Developmental Initial Plan</b> will be initiated. The FSW will update information using the <b>Health and Developmental Initial Plan</b> until follow-up treatment is complete or ongoing care is established.</li> </ol>

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	<p>prescribed by the Early and Periodic Screening, diagnosis, and treatment (EPSDT) program of the Medicaid agency of the state in which they operate, immunization recommendations from the local Health Services Advisory Committee that are based on prevalent community health problems;</p>	<ol style="list-style-type: none"> <li>5. Familiarize parents/guardians with schedule of preventive care. (Refer to <b>Early and Periodic Screening, Diagnostic, and Treatment Schedule</b>).</li> <li>6. If necessary, have parents/guardians sign a <b>Parent/Guardian Consent to Exchange Information</b> form to request the above-mentioned information from their health care provider.</li> <li>7. Review data from the health care provider to determine if the child is up-to-date on a schedule of age-appropriate preventive and primary health care.</li> <li>8. If there are any concerns or missing data on the physical or dental exam, that have not been addressed by the health care professional, designated staff will initiate a <b>Health and Developmental Initial Plan</b>. The <b>Health and Developmental Initial Plan</b> will indicate the concern that has not been addressed by the health care professional. If available, literature will be provided to parent/guardians. and referred to appropriate health staff.</li> <li>9. The FSW will continue to update the <b>Health and Developmental Initial Plan</b> using the <b>Health and Developmental Follow-up Notes</b> until treatment is complete or on-going care is established.</li> <li>10. The FSW will attach all <b>Health and Developmental Follow-up Notes</b> to the <b>Health and Developmental Initial Follow-up Plan</b> and file in the appropriate section of the children’s file.</li> <li>11. If noncompliance is still exhibited after barriers are addressed and education is provided, with approval of the Health Manager the child’s parent/guardian will be asked to sign the <b>Decline of Services</b> form.</li> </ol> <p><b>Policy: Anemia Screening</b>  <b>Procedure:</b></p> <ol style="list-style-type: none"> <li>1. <b>Head Start</b>/Early Head Start staff will inform parent/guardian of the types and purposes of all screenings to be administered during and/or prior to the screenings being completed.</li> <li>2. Children enrolled in <b>Head Start</b>/Early Head Start will have hemoglobin/hematocrit screenings according to the EPSDT Periodicity Chart. (These screenings may be obtained from an outside source – example WIC, THSteps physical, Head Start physical, other.)</li> </ol>

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		<ol style="list-style-type: none"> <li>3. If anemia screening is not obtained by the first day of entry into the program the FSW will discuss, with the parent/guardian, the requirement and the reason for obtaining an anemia test and provide them with literature. <b>Health and Developmental Initial Plan</b> will be initiated. The FSW will update information using the <b>Health and Developmental Follow-up Notes</b> until follow-up treatment is complete or ongoing care is established.</li> <li>4. Children with abnormal hemoglobin/hematocrit levels will be referred to their medical provider for further evaluation.</li> <li>5. If the physician does not perform anemia screening, parent/guardian will be referred to other sources for obtaining this screening</li> <li>6. Anemia blood screening may be performed on-site when results cannot be obtained from other sources as often as feasibly possible to keep children up-to-date according to the <b>TH Steps Medical Checkup Periodicity Schedule (EPSDT)</b>. Parents/guardians will be asked to sign the <b>Consent for Anemia and Lead Screen</b> form prior to blood being drawn. Parents/guardians will be informed of when blood will be drawn. Anemia blood screening will be performed on-site by qualified health staff or provider or agency. Document results on the <b>Lead &amp; Anemia Screening Results</b> form and <b>Early Head Start Health Tracking</b>.</li> <li>7. If the anemia screening results are abnormal, designated staff will initiate a <b>Health and Developmental Initial Plan</b>. The <b>Health and Developmental Initial Plan</b> will indicate the anemia level, anemia literature will be provided to parent/guardians, and the referral information.</li> <li>8. The FSW will attach all <b>Health and Developmental Follow-up Notes</b> to the <b>Health and Developmental Initial Plan</b> and file in the appropriate section of the children's file.</li> <li>9. If noncompliance is exhibited after barriers are addressed and education is provided, with approval of the Health Manager the child's parent/guardian will be asked to sign the <b>Decline of Services</b> form.</li> </ol> <p><b>EXPECTED VALUES: The following hemoglobin/hematocrit are considered normal:</b></p>

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		<ul style="list-style-type: none"> <li>• <b>Hgb-11.3-14.1 g/dl Hct-33-41%</b></li> </ul> <p><b>Policy: Blood Lead Screening</b></p> <p><b>Procedure:</b></p> <ol style="list-style-type: none"> <li>1. Head Start/Early staff will inform parent/guardian of the types and purposes of all screenings to be administered during and/or prior to the screenings being completed.</li> <li>2. Children enrolled in <b>Head Start</b>/Early Head Start will have Blood Lead screenings according to the EPSDT Periodicity Chart. (These screenings may be obtained from an outside source – example WIC, THSteps physical, Head Start physical, other.)</li> <li>3. If Blood Lead screening is not obtained by the first day of entry into the program staff will discuss, with the parent/guardian, the requirement and the reason for obtaining a lead test and provide them with literature. <b>Health and Developmental Initial Plan</b> will be initiated. Staff will update information using the <b>Health and Developmental Follow-up Notes</b> until follow-up treatment is complete or ongoing care is established.</li> <li>4. Children with abnormal blood lead levels will be referred to their medical provider for further evaluation.</li> <li>5. If the physician does not perform a blood lead screening, parent/guardian will be referred to other sources for obtaining this screening.</li> <li>6. Blood Lead screening may be performed on-site when results cannot be obtained from other sources as often as feasibly possible to keep children up-to-date according to the <b>TH Steps Medical Checkup Periodicity Schedule (EPSDT)</b>. Parents/guardians will be asked to sign the <b>Consent for Anemia and Lead Screen</b> form prior to blood being drawn. Parents/guardians will be informed of when blood will be drawn. Blood Lead screening will be performed on-site by qualified health staff or provider or agency. Document results on the <b>Lead &amp; Anemia Screening Results</b> form and <b>Health Tracking</b>.</li> <li>7. If the lead results are abnormal, designated staff will initiate a <b>Health and Developmental Initial Plan</b>. The <b>Health and Developmental Initial Plan</b> will indicate the lead level, lead literature will be provided to parent/guardians, and the referral information.</li> </ol>

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		<p>8. The FSW will attach all <b>Health and Developmental Follow-up Notes</b> to the <b>Health and Developmental Initial Plan</b> and file in the appropriate section of the children’s file.</p> <p>9. If noncompliance is exhibited after barriers are addressed and education is provided, with approval of the Health Manager the child’s parent/guardian will be asked to sign the <b>Decline of Services</b> form.</p> <p><b>Expected Values:</b></p> <ul style="list-style-type: none"> <li>• <b>Negative Risk</b></li> <li>• <b>&lt; 5</b></li> </ul> <p><b>TB QUESTIONNAIRE:</b></p> <ol style="list-style-type: none"> <li>1. Head Start/Early staff will inform parent/guardian of the types and purposes of all screenings to be administered during and/or prior to the screenings being completed.</li> <li>2. Parental consent for screenings will be obtained prior to the screening.</li> <li>3. A <b>TB Questionnaire</b> will be completed according to the <b>TH Steps Medical Checkup Periodicity Schedule (EPSDT)</b>. Early Head Start children must have questionnaire within 2 weeks of entry into the program according to the age requirement on the <b>TH Steps Medical Checkup Periodicity Schedule (EPSDT)</b>. Head Start children must complete the questionnaire within 45 days of entry into the program but not prior to the child’s first day of class. Staff will complete this questionnaire with parent/guardians.</li> <li>4. If yes or I don’t know is answered on the questionnaire the FSW will complete a <b>Health and Developmental Initial Plan</b> and provide parent/guardian with information on TB exposure. Child will also be required to have a TB skin test, if the provider deems it necessary.</li> <li>5. The FSW will update information using the <b>Health and Developmental Follow-up Notes</b> until follow-up treatment is complete or ongoing care is established.</li> <li>6. <b>TB Questionnaire</b> will be filed in child’s health file and results will be documented on <b>Health Tracking Log</b>.</li> <li>7. If noncompliance is exhibited after barriers are addressed and education is provided, with approval of the Health Manager the</li> </ol>



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		<p>child's parent/guardian will be asked to sign the <b>Decline of Services</b> form.</p> <p><b>Policy: Child Immunization Requirements</b>  <b>Procedure:</b></p> <ol style="list-style-type: none"> <li>1. Program applicants must submit an official immunization record stating child's full name and date of birth generated from a state or local health authority, including a registry, with their enrollment application.</li> <li>2. A new enrollee must have at least one of each age-appropriate mandatory immunization and is on schedule to receive subsequent doses as rapidly as medically feasible according to <b>The Center for Disease Control Prevention</b> or an exemption statement authorized by the <b>Department of State Health Services Immunization Branch</b> to attend the program.</li> <li>3. Any child may be placed on the <b>Waiting List</b> if immunizations are up to date, have an authorized exemption statement or must provide a statement from the doctor as to when the remaining immunizations will be completed and will be approved by the Health Manager on a case-by-case basis.</li> <li>4. Staff will place a copy of the child's most current immunization record in the child's Head Start/Early Head Start Health File and place a copy in the DHS File.</li> <li>5. All children attending Head Start/Early Head Start must remain current on all immunizations. The Health Manager and/or the FSW will review the immunization status of a provisionally enrolled child every 30 days to ensure continued compliance and completing the required doses of vaccine(s). If appropriate doses have not been received at the end of a 30-day period, the child is no longer in compliance, and will be excluded until the appropriate doses are received.</li> <li>6. The Health Manager and/or the FSW will communicate with families of a child enrolled provisionally about needed immunizations by completing the <b>Immunization Notice Form</b> and give a copy to the parent/guardian.</li> <li>7. The Health Manager and/or the FSW will provide assistance to ensure parents are informed and have the resources needed to complete or remain current with their child's immunizations.</li> </ol>

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(ii)	Assist parent with making arrangements to bring the child up-to-date as quickly as possible; and, if necessary, directly facilitate provision of health services to bring the child up-to-date with parent consent as described in §1302.41(b)(1).	<ol style="list-style-type: none"> <li>8. If immunizations are not brought currently the exclusion date The Health Manager and/or the FSW will complete the <b>Immunization Notice Form</b> excluding the child from attending classes until the child is current with immunizations or has a doctor’s note stating why the child is not current and when the child will be current</li> <li>9. The FSW will attach a copy of the updated immunization record or doctor’s note to the <b>Immunization Notice Form</b> and file in the appropriate section of the children’s file and copies sent to the Health Manager.</li> <li>10. The Health Manager and/or the FSW will continue to work with the family until the child is completely up to date on all required age-appropriate immunizations.</li> <li>1. The Health Manager and/or the FSW will continue to review the <b>Health and Developmental Initial Plan</b> for children that are not up-to-date.</li> <li>2. The Health Manager and/or the FSW will work with families to ensure they are informed and have the resources needed to complete the requirements. (State Medicaid/EPDDT program)</li> <li>3. Continue to update the <b>Health and Developmental Initial Plan</b> using the <b>Health and Developmental Follow-up Notes</b> until follow-up is complete or ongoing care is established.</li> <li>4. The FSW will attach all <b>Health and Developmental Follow-up Notes</b> to the <b>Health and Developmental Initial Plan</b> and file in the appropriate section of the children’s file. Copies will be sent to the Health Coordinator.</li> </ol>
(1)	Within 45 days after the child first attends the program or, for the home-based program option, receives a home visit, a program must either obtain or perform evidence-based vision and hearing screenings.	<ol style="list-style-type: none"> <li>1. At enrollment, parents/guardian will be informed regarding the screenings that are required within 45 days of enrollment and asked to sign a <b>Health-Consent, Authorization and Release</b> form giving Head Start/Early Head Start permission to conduct the screenings.</li> <li>2. If noncompliance is exhibited after barriers are addressed and education is provided, with approval of the Health Manager, the child’s parent/guardian will be asked to sign the <b>Decline of Services</b> form.</li> <li>3. See Hearing Screening Policy</li> <li>4. See Vision Screening Policy</li> </ol>

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		<p><b>HEARING SCREENING POLICY</b></p> <p><b>PROCEDURE: HEAD START</b></p> <ol style="list-style-type: none"> <li>1. Head Start/Early Head Start staff will inform parent/guardian of the types and purposes of all screenings to be administered prior to the screenings being completed.</li> <li>2. Parental consent for screenings will be obtained prior to the screening. Head Start children will receive a hearing screening using a standardized screening tool within 45 days of entry into the program.</li> <li>3. Children 3, 4, and 5 years of age initial screenings will be performed by trained Head Start staff or other trained professionals using the <b>Pure Tone Audiometer or other state approved equipment.</b></li> <li>4. Results will be documented on the <b>Vision and Hearing Screener Report</b>, the tracking form and a copy will be attached to the <b>State Admission Form.</b></li> <li>5. All children failing to respond or failing the test will be re-screened within 3 – 4 weeks of the initial test using the <b>Pure Tone Audiometer or other state approved equipment.</b></li> <li>6. If a 3-year-old child fails the rescreen, parent/guardian(s) and staff will complete the questions on the <b>3-Year-Old Vision and Hearing Screener Report</b> taken from <b>THSteps Hearing Checklist for Parents</b>. If the parents/guardians answered No to any of the questions a <b>Health and Developmental Initial Plan</b> will be developed with the parent/guardian and appropriate referral will be initiated.</li> <li>7. If a 4 or 5-year-old child fails the re-screen or fails to respond to the <b>Pure Tone Audiometer or other state approved equipment</b>, a <b>Health and Developmental Initial Plan</b> will be developed with the parent/guardian and appropriate referral will be initiated.</li> <li>8. Continue to update the <b>Health and Developmental Initial Plan</b> using the <b>Health and Developmental Follow-up Notes</b> until follow-up treatment is complete or ongoing care is established.</li> <li>9. The FSW will attach all <b>Health and Developmental Follow-up Notes</b> to the <b>Health and Developmental Initial Plan</b> and file in the appropriate section of the children’s file.</li> </ol>

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		<p><b>EHS HEARING SCREENING PROCEDURE:</b></p> <ol style="list-style-type: none"> <li>1. Early Head Start staff will inform parent/guardian of the types and purposes of all screenings to be administered prior to the screenings.</li> <li>2. Parental consent for screenings will be obtained prior to the screening.</li> <li>3. Early Head Start parent/guardian will complete the <b>THSteps Hearing Checklist for Parents</b> at all required ages according to the <b>TH Steps Medical Checkup Periodicity Schedule (EPSDT)</b> within 2 weeks of entry into the program and within 2weeks of the required age according to the schedule.</li> <li>4. If parents answer <b>NO</b> to any of the questions on the <b>THSteps Hearing Checklist for Parents</b> or if parents /EHS staff has other concerns a <b>Health and Developmental Initial Plan</b> will be developed with the parent/guardian and appropriate referral will be initiated.</li> <li>5. Document results as Refer.</li> <li>6. The <b>Health and Developmental Initial Plan</b> will be updated using the <b>Health and Developmental Follow-up Notes</b> until treatment is complete or ongoing care is established.</li> <li>7. The <b>Health and Developmental Initial Plan</b> will be filed in child's health folder.</li> <li>8. All results will be documented on the electronic tracking system and attached to the <b>State Admission Form</b>.</li> </ol> <p><b>VISION SCREENING PROCEDURE: HEAD START</b></p> <ol style="list-style-type: none"> <li>1. Head Start staff will inform parent/guardian of the types and purposes of all screenings to be administered during prior to the screenings.</li> <li>2. Parental consent for screenings will be obtained prior to the screening.</li> <li>3. Head Start children will receive a vision screening within 45 days of entry into the program.</li> <li>4. The vision screening for children 3, 4, and 5 years of age will be performed by trained Head Start staff or other trained</li> </ol>

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		<p>professionals using the <b>10-foot HOTV Vision Chart or other state approved equipment or chart.</b></p> <ol style="list-style-type: none"> <li>5. Results will be documented on the <b>Vision &amp; Hearing Screener Report</b> form and a copy will be attached to the <b>State Admission Form</b>. Results will also be documented on the health tracking form.</li> <li>6. All children who fail to respond or fail the test will be re-screened using the <b>10-foot HOTV Vision Chart or other state approved equipment or chart</b> within 2-3 weeks of the initial test.</li> <li>7. If a 3-year-old fails to respond or fails the rescreening, staff will perform the <b>Corneal Light Reflex and Cover Test immediately following the rescreen.</b></li> <li>8. If a 3-year-old fails the <b>Corneal Light Reflex or the Cover Test</b> the staff will complete a <b>Health and Developmental Initial Plan</b> with the parent/guardian and a referral will be made to the appropriate health provider.</li> <li>9. If a 4 or 5-year-old child fails the re-screen or fails to respond after being re-screened, a <b>Health and Developmental Initial Plan</b> will be developed with the parent/guardian and a referral will be made to the appropriate health provider.</li> <li>10. The FSW will continue to update the <b>Health and Developmental Initial Plan</b> using the <b>Health and Developmental Follow-up Notes</b> until follow-up treatment is complete or ongoing care is established.</li> <li>11. If a parent/guardian refuses to authorize treatments, staff will provide parents/guardians with information (education) regarding the services being requested for their child.</li> <li>12. If noncompliance is exhibited after barriers are addressed and education is provided, the child's parent/guardian will be asked to sign the <b>Decline of Services</b> form.</li> <li>13. The FSW will file the <b>Health and Developmental Initial Plan</b>, the <b>Health and Developmental Follow-up Notes</b> and if applicable, the <b>Decline of Services</b> form in the appropriate area of the children's file.</li> </ol> <p><b>VISION SCREENING PROCEDURE: EARLY HEAD START</b></p>

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		<ol style="list-style-type: none"> <li>1. Early Head Start Staff will inform parent/guardian of the types and purposes of all screenings to be administered during and/or prior to the screening being completed.</li> <li>2. Parental consent for screenings will be obtained prior to the screening.</li> <li>3. Vision screening will be completed within 2 weeks of entry into the program and within 2weeks of the required age according to the <b>TH Steps Medical Checkup Periodicity Schedule (EPSDT)</b></li> <li>4. The Early Head Start staff will use the Vision Questionnaire form. A <b>NO</b> response on the questionnaire will require a referral.</li> <li>5. The FSW will develop an <b>Initial Health and Developmental Plan</b> and discuss results with parent/guardian and refer to his/her health care provider.</li> <li>6. The <b>Health and Developmental Initial Plan</b> will be updated using the <b>Health and Developmental Follow-up Notes</b> until treatment is complete or ongoing care is established.</li> <li>7. All results will be entered into the electronic tracking system.</li> <li>8. If a parent/guardian refuses to authorize treatments The Health Manager and/or the FSW will provide parents/guardians with information regarding the services being requested for their child.</li> <li>9. If noncompliance is exhibited after barriers are addressed and education is provided, the child's parent/guardian will be asked to sign the <b>Decline of Services</b> form. (This form should be attached behind the specific service being declined).</li> <li>10. The FSW will file the <b>Health and Developmental Initial Plan</b> any <b>Health and Developmental Follow-up Notes</b> and if applicable, the <b>Decline of Services</b> form in the appropriate section in the children's file.</li> </ol>
(3)	If a program operates for 90 days or less, it has 30 days from the date the child first attends the program to satisfy paragraphs (b)(1) and (2) of this section.	Not Applicable
(4)	A program must identify each child's nutritional health needs, taking into account available health information,	<ol style="list-style-type: none"> <li>1. Parents/guardians will complete a <b>Nutrition Assessment</b> during the enrollment process.</li> </ol>

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	<p>including the child’s health records, and family and staff concerns, including special dietary requirements, food allergies, and community nutrition issues as identified through the community assessment or by the Health Services Advisor Committee.</p> <p><u>Ongoing Care.</u></p> <p>(c) (1) A program must help parents continue to follow recommended schedules of well-child and oral health care.</p> <p>(2) A program must implement periodic observations or other appropriate strategies for program staff and</p>	<ol style="list-style-type: none"> <li>2. Upon entry in the EHS Program an <b>Infant Feeding Schedule</b> is obtained from the parent/guardian and updated monthly or upon parent’s request; if request is within the age-appropriate schedule</li> <li>3. Obtain a physician’s note for any nutritional health problems and special dietary requirements.</li> <li>4. If a child or parent/guardian has a religious reason for a food substitution, discuss with contract dietitian an alternate meal pattern and document justification for substitutions. Alternative meal pattern will be discussed with parent /guardian to ensure food substitution meets religious reasons.</li> <li>5. Refer to child’s IEP/IFSP for any nutritional related accommodations required for children with disabilities.</li> <li>6. Develop a <b>Memorandum of Understanding</b> with Community Agencies such as: WIC, Texas Extension Office on Nutrition-related needs for Head Start/Early Head Start Families.</li> <li>7. Ask the Health Services Advisory Committee to contribute their knowledge of existing nutrition related prevalent health problems that will impact families.</li> <li>8. Use the information obtained from the above sources in planning program services.</li> <li>9. Disseminate nutrition information to children, parent/guardian, and staff based on identified needs.</li> </ol> <ol style="list-style-type: none"> <li>1. Communicate with parents/guardians to determine date and time of next appointment.</li> <li>2. Remind parents/guardians of upcoming appointments.</li> <li>3. Inform parents/guardians to follow recommended <b>TH Steps Medical Checkup Periodicity Schedule (EPSDT)</b> and <b>Texas Department of State Health Services.</b></li> <li>4. Update and monitor tracking systems at lease weekly to ensure all children’s health needs are current and kept up to date.</li> </ol> <ol style="list-style-type: none"> <li>1. Staff will welcome parents/guardians every morning.</li> <li>2. Teachers and/or the Teacher Assistant will complete <b>Daily Well Check</b> with parent/guardian as the child arrives to school.</li> </ol>

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(3)	<p>parents to identify any new or recurring developmental, medical, oral, or mental Health concerns.</p> <p>A program must facilitate and monitor necessary oral health preventive care, treatment and follow-up, including topical fluoride treatments. In communities where there is a lack of adequate fluoride available through the water supply and for every child with moderate to severe tooth decay, a program must also facilitate fluoride supplements, and other necessary preventive measures, and further oral health treatment as recommended by the oral health professional.</p>	<p>3. The FSW Staff will review any abnormal screenings, physical, dentals result with parent/guardian.</p> <p>1. The FSW will communicate with parents/guardians about the importance of a dental checkup.</p> <p>2. The Teacher and/or the Teacher Assistant will follow the requirements by ensuring the following:</p> <ul style="list-style-type: none"> <li>○ For children age two and over: Once daily, after a meal, to encourage self-help skills the children may apply or the teacher may assist children with applying a small smear of fluoride toothpaste on their toothbrush.</li> <li>○ For children between one and two years of age: Once daily, after a meal staff must brush children’s teeth with a soft bristled toothbrush, using a small smear (grain of rice amount is usually recommended for this age group) of toothpaste that contains fluoride.</li> </ul> <p>3. Water Reports will be reviewed for fluoride levels.</p>
(d)	<u>Extended follow-up care.</u>	
(1)	<p>A program must facilitate further diagnostic testing, evaluation, treatment, and follow-up plan, as appropriate, by a licensed or certified professional for each child with a health problem or developmental delay, such as elevated lead levels or abnormal hearing or vision results that may affect child’s development, learning, or behavior.</p>	<p>1. Upon notification/knowledge of abnormal results/recommended follow-up treatment staff will work with parents/guardians to make arrangements to get appropriate treatment completed.</p> <p>2. The FSW will develop a <b>Health and Developmental Initial Plan</b> and discuss results with parent/guardian and refer to his/her health care provider.</p> <p>3. The <b>Health and Developmental Initial Plan</b> will be updated using <b>Health and Developmental Follow-up Notes</b> until treatment is complete or ongoing care is established.</p>
(2)	<p>A program must develop a system to track referrals and services provided and monitor the implementation of a follow-up plan to meet any treatment needs associated with a health, oral health, social and emotional, or developmental problem.</p>	<p>1. A summary of results, referrals, Health &amp; Developmental Follow-up plans will be entered into the electronic tracking system. (Child Plus).2. If a parent/guardian refuses to authorize treatment the Health Services staff will provide parents/guardians with information regarding the services being requested for their child.</p> <p>2. If noncompliance is exhibited after barriers are addressed and education is provided, the child’s parent/guardian will be asked</p>



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(3)	A program must assist parents, as needed, in obtaining any prescribed medications, aids, or equipment for medical and oral health conditions.	<p>to sign the <b>Decline of Services</b> form. This form should be attached behind the specific service being declined.</p> <p>3. The FSW will file the <b>Health and Developmental Initial Plan</b> and <b>Health and Developmental Follow-up Notes</b>, referrals and if applicable, the <b>Decline of Services</b> form in the appropriate section in the children’s file.</p> <p>1. The FSW will make an appropriate referral to assist parents in obtaining any prescribed medications, aids or equipment for medical and oral health conditions.</p>
(e)	<u>Use of funds.</u>	
(1)	A program must use program funds for the provision of diapers and formula for enrolled children during the program day.	Follow Standard.
(2)	A program may use program funds for professional medical and oral health services when no other source of funding is available. When program funds are used for such services, grantee and delegate agencies must have written documentation of their efforts to access other available sources of funding.	<p>1. Head Start/Early Head Start staff will refer family/pregnant woman to public health insurance programs, (Medicaid, SCHIP).</p> <p>2. If families are denied for public health insurance, they must provide documentation showing the child and/or pregnant woman was denied.</p> <p>3. If the child and/or pregnant woman do not have a medical or dental provider, the FSW will determine which provider to refer the child/pregnant woman to, based on established agreements with medical and dental providers.</p> <p>4. The FSW staff will contact local community agencies to see if funds are available to help cover cost.</p> <p>5. When determined no other funds are available and appropriate documentation has been collected, the FSW will complete a <b>Request for Payment of Services</b> that contains the following information: Pregnant woman and/or Child’s name, parents/guardians name, Medical or Dental Provider, type of medical or dental care that is needed and cost of services. The <b>Request for Payment of Services</b> will be forwarded to Head Start Director for approval.</p>

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<p>§1302.43</p>	<p><b>Oral health practices.</b></p> <p>A program must promote effective oral health hygiene by ensuring all children with teeth are assisted by appropriate staff, or volunteers, if available, in brushing their teeth with toothpaste containing fluoride once daily.</p>	<p>6. The <b>Request for Payment of Services</b> will be returned to the Health Manager. Once approved the Health Manager will meet with parents/Pregnant Woman and Health care provider to make arrangements for services.</p> <ol style="list-style-type: none"> <li>1. Each child will have his/her own toothbrush and toothpaste labeled with his/her first &amp; last name. Each storage slot must be labeled with the child's first and last name.</li> <li>2. Provide new toothbrushes to each child at least, but not limited to every three months. Site Supervisors will create a colored toothbrush schedule and send it to the Health Manager. The colored toothbrushes must be changed every 3 months.</li> <li>3. Toothbrushes and toothpaste will be stored out of reach of children when not in use. If tooth brush storage does not have an attached cover or lid to cover the tooth brushes then a cover will be placed over the storage box.</li> <li>4. Head Start/Early Head Start staff will use activities to promote effective dental hygiene in conjunction with meals for infants, toddlers, and preschool children.</li> <li>5. Staff will follow the requirements by ensuring the following: <ul style="list-style-type: none"> <li>○ For children age two and over: Once daily, after lunch, to encourage self-help skills the children may apply or the teacher may assist children with applying a small smear of fluoride toothpaste on their toothbrush.</li> <li>○ For children between one and two years of age: Once daily, after a meal staff must brush children's teeth with a soft bristled toothbrush, using a small smear of toothpaste that contains fluoride.</li> <li>○ <b>Toothbrushing is to be done with Teachers modeling toothbrushing and the child standing over the sink.</b></li> </ul> </li> <li>6. For infants under the age of one: staff must wash their hands and then cover a finger with a gauze pad or soft cloth and gently wipe infants' gums after each feeding. Staff must wash their hands after each individual child's gums have been cleaned.</li> </ol>

Standard	Performance Standard	Plan of Action
<p>§1302.44</p> <p>(a) (1)</p> <p>(2)</p> <p>(i)</p> <p>(ii)</p>	<p><b>Child nutrition.</b></p> <p><u>Nutrition service requirements.</u> A program must design and implement nutrition services that are culturally and developmentally appropriate, meet the nutritional needs of and accommodate the feeding requirements of each child, including children with special dietary needs and children with disabilities. Family style meals are encouraged as described in §1302.31(e)(2).</p> <p>Specifically, a program must:</p> <p>Ensure each child in a program that operates for fewer than six hours per day receives meals and snacks that provide one third to one half of the child’s daily nutritional needs;</p> <p>Ensure each child in a program that operates for six hours or more per day receives meals, snacks that provide one half to two thirds of the child’s daily nutritional needs, depending upon the length of the program day;</p>	<ol style="list-style-type: none"> <li>1. Head Start/Early Head Start participates in the <b>Child and Adult Care Food Program.</b></li> <li>2. Head Start/Early Head Start staff will talk with the family about any food allergies, special diet requests, or other nutrition concerns that have been identified on the <b>Nutritional Assessment</b> form.</li> <li>3. Obtain a doctor’s statement if accommodations for special diet - are required.</li> <li>4. If a child or parent/guardian has a religious reason for a food substitution, discuss with contract dietitian an alternate meal pattern and document justification for substitutions. Alternative meal pattern will be discussed with parent /guardian to ensure food substitution meets religious reasons.</li> <li>5. Develop nutritionally balanced menus and provide a variety of foods which includes cultural and ethnic preferences.</li> <li>6. In Head Start we serve Family Style. In Early Head Start Family Style will begin at age two.</li> </ol> <p>Not applicable</p> <ol style="list-style-type: none"> <li>1. Develop cycle menus that are nutritionally balanced, fit meal patterns, provide a variety, account for cultural differences, and meet current budgetary constraints.</li> <li>2. Use the CACFP meal pattern chart to plan menus for infants, toddlers, and young children ages 3-5.</li> <li>3. Provide each child with breakfast, lunch and snack.</li> <li>4. Cooks will follow the <b>Food Buying Guide</b> to ensure proper amounts are being prepared for children.</li> <li>5. Cooks will prepare enough food that will allow for seconds for children who would like them.</li> <li>6. Infants will be fed on demand or per parent’s instructions (<b>See Infant Feeding Schedule</b>).</li> <li>7. Post the current menu in the kitchen, classrooms and parent boards.</li> </ol>

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(iii)	Serve three – to five-year-old’s meals and snacks that conform to USDA requirements in 7 CFR parts 210,220, and 226, and are high in nutrients and low in fat, sugar, and salt;	<p>8. A supply of drinking water will always be available at every meal, after active play and throughout the day.</p> <p>Follow the Standard</p>
(iv)	Feed infants and toddlers according to their individual developmental readiness and feeding skills as recommended in USDA requirements outlined in 7CFR parts 210,220, and 226, and ensure infants and young toddlers are fed on demand to the extent possible;	<ol style="list-style-type: none"> <li>1. Parents/Guardians will be informed of the USDA meal pattern guidelines for infants.</li> <li>2. Parents will complete the <b>Required Food Components/Feeding Schedule and CACFP Infant feeding Preference</b> for children ages 0 – 11 months of age.</li> <li>3. Because of the risk of choking infants and toddlers will not be served hot dogs, whole grapes, hard raw vegetable, popcorn, whole nuts, or any other choking hazardous foods.</li> <li>4. Because of the risk children younger than 1 year of age will not be served honey or cow’s milk, unless accompanied by a doctor’s note.</li> <li>5. Children 0-11 months can have fully cooked eggs if the eggs have been introduced at home and documented on the feeding schedule.</li> <li>6. When foods are on the menus that pose a high risk of choking or posing health risks toddlers will be served foods appropriate for their age.</li> <li>7. If a child cannot eat what is served, a doctor’s note will be required. Once the doctor’s note or approval statement is received, staff will assign the child a number (the same number that is assigned to the child at the beginning of the program year) and write it on the doctor’s note or approval statement. The original doctor’s note and/or approval statement will be filed in the child’s nutrition file. A copy of the doctor’s note will be sent to the Cook, Nutrition Manager, Health Manager, and Site Supervisor and to the classroom teacher.</li> <li>8. The copy of the doctor’s note or approval statement will be posted with the child’s redacted and number issued to child. The</li> </ol>

Standard	Performance Standard	Plan of Action
(v)	Ensure bottle-fed infants are never laid down to sleep with a bottle;	<p>copy of the doctor’s note or approval statement will be posted under the <b>Special Diet Poster</b> to maintain confidentiality. The <b>Special Diet Poster</b> will only be posted if there is a child on a special diet.</p> <p>9. Ensure infants and young toddlers are fed on demand to the extent possible.</p> <ol style="list-style-type: none"> <li>1. EHS staff will hold infants and establish eye contact while feeding the infants. They will never be propped up or laid down with bottles.</li> <li>2. Breast feeding mothers are encouraged to come to the Early Head Start site to feed their baby.</li> <li>3. Infants will not be laid down to sleep with a bottle.</li> <li>4. Staff will supervise all feedings in order to minimize the risk of choking.</li> <li>5. Infant cereal will be served with a spoon unless there is a medical reason which a doctor’s note will be required.</li> </ol>
(vi)	Serve all children in morning center-based settings who have not received breakfast upon arrival at the program a nourishing breakfast;	<ol style="list-style-type: none"> <li>1. If a child comes in after breakfast has been served, staff will ask parent/guardian if the child has received breakfast at home. If the child has not received breakfast at the time, they arrive at the Head Start/Early Head Start center, staff must provide a nourishing breakfast.</li> </ol>
(vii)	Provide appropriate healthy snacks and meals to each child during group socialization activities in the home-based options;	Not applicable
(viii)	Promote breastfeeding, including providing facilities to properly store and handle breast milk and make accommodations, as necessary, for mothers who wish to breastfeed during program hours, and if necessary, provide referrals to lactation consultants or counselors; and,	<ol style="list-style-type: none"> <li>1. Proper storage and handling of breast milk and infant formula is necessary to prevent spoilage, to minimize bacterial growth, and to ensure that each infant received his or her own mother’s milk or the correct formula.</li> <li>2. When a parent brings breast milk into the center, they must have the container clearly labeled with child’s name and the date it was expressed.</li> </ol>

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<p>(ix)</p> <p>(b)</p> <p><b>§1302.45</b></p> <p>(a)</p>	<p>Make safe drinking water available to children during the program day.</p> <p><u>Payment sources.</u> A program must use funds from USDA food, Nutrition, and Consumer Services child nutrition programs as the primary source of payment for meal services. Early Head Start and Head Start funds may be used to cover those allowable costs not covered by the USDA.</p> <p><b>Child mental health and social and emotional well-being.</b></p> <p><u>Wellness promotion.</u> To support a program-wide culture that promotes children’s mental health, social and emotional well-being, and overall health, a program must:</p>	<ol style="list-style-type: none"> <li>3. Unused breast milk and liquid formula will be discarded after 48 hours, if refrigerated, or after 3 months if frozen. Once frozen breast milk thaws it is never to be refrozen.</li> <li>4. If breast milk or formula is to be warmed, bottles will be placed on bottle warmer per bottle warmer directions, after which the bottle is shaken and tested on the preparer’s wrist before feeding. Bottles of formula or breast milk are never warmed in a microwave.</li> <li>5. All bottles of breast milk and formula are refrigerated until immediately before feeding any contents remaining after a feeding are discarded immediately.</li> <li>6. Home visitors and other staff will work with parents/guardians to find safe methods for storing and handling breast milk and infant formula in the home.</li> <li>7. There will a designated area for mothers who wish to breastfeed during program hours.</li> </ol> <p>1. Each center will use only an approved water supply.</p> <p>Follow Standard</p>

Standard	Performance Standard	Plan of Action
(1)	Provide supports for effective classroom management and positive learning environments; supportive teacher practices; and strategies for supporting children with challenging behaviors and other social, emotional, and mental health concerns;	1. Staff will secure an MOU or Contract with a Mental Health Professional to provide services or consultations to staff, children and families.
(2)	Secure mental health consultation services on a schedule of sufficient and consistent frequency to ensure a mental health consultant is available to partner with staff and families in a timely and effective manner;	2. Staff will secure MOUs with community agencies to help provide mental health services directly or indirectly. 3. If teaching staff/center staff or parents/guardians have concerns about a child’s mental health, the Mental Health Manager/or Mental Health Professional will be consulted, the child’s <b>Mental Wellness Checklist</b> will be shared with the Mental Health Professional to help determine if the child may need intervention services and if necessary, a referral will be initiated, with parent’s/guardian’s permission. 4. A <b>Health and Developmental Initial Follow-Up Plan</b> will be completed by the center staff/teaching staff when concerns are noted by the staff or parents. The <b>Health and Developmental Initial Follow-Up Plan</b> will be updated using the <b>Health and Development Follow-Up Notes</b> until treatment is complete or ongoing care is established.
(3)	Obtain parental consent for mental health consultation services at enrollment; and,	1. Parent will initial the <b>Health History</b> on the application.
(4)	Build community partnerships to facilitate access to additional mental health resources and services, as needed.	1. Staff will secure MOUs with community agencies to help provide mental health services directly or indirectly.
(b)	<u>Mental health consultants.</u> A program must ensure mental health consultants assists:	
(1)	The program to implement strategies to identify and support children with mental health and social and emotional concerns;	1. The Site Supervisor or FSW will call the Mental Health/ Health Manager with concerns regarding a child. 2. Mental Health/ Health Manager will do an observation and ask the contracted Mental Health Specialist to do an observation.
(2)	Teachers, including family child care providers, to improve classroom management and teacher practices	1. If support is needed, strategies and tools will be provided to address emotional concerns.

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	<p>through strategies that include using classroom observations and consultations to address teacher and individual child needs and creating physical and cultural environments that promote positive mental health and social and emotional functioning;</p>	
(3)	<p>Other staff, including home visitors, to meet children’s mental health and social and emotional needs through strategies that include observation and consultation;</p>	<p>1. Referrals will be made for any services regarding mental health and emotional needs for children, families and staff, with the permission of the parent.</p>
(4)	<p>Staff to address prevalent child mental health concerns, including internalizing problems such as appearing withdrawn and externalizing problems such as challenging behaviors; and,</p>	
(5)	<p>In helping both parents and staff to understand mental health and access mental health interventions, if needed.</p>	<p>1. Mental Health will be addressed at parent meetings in the Spring semester. If a family needs resources prior to parent meeting, they can reach out to their FSW, as needed.</p>
(6)	<p>In the implementation of the policies to limit suspension and prohibit expulsion as described in §1302.17.</p>	<p>1. Behavior Plans will be put in place, as needed. Suspension will only be used as a last resort, when children and staff are at risk.</p>
<p><b>§1302.46</b></p>	<p><b>Family support services for health, nutrition, and mental health.</b></p>	
(a)	<p><u>Parent collaboration.</u> Programs must collaborate with parents to promote children’s health and well-being by providing medical, oral, nutrition and mental health education support services that are understandable to individuals, including individuals with low health literacy.</p>	<p>1. FSW’s will collaborate with parents/guardians that express concern about health, nutrition, and mental health services.  2. Parents/guardians will complete a <b>Health Assessment and Nutrition Assessment</b> prior to enrollment into the program.  3. Upon enrollment parents/guardians will be supplied with a <b>Welcome Packet</b>.  4. Parents/guardians will complete the <b>Parent Education Training Survey</b>.</p>



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(b)	<p><u>Opportunities.</u></p> <p>(1) Such collaboration must include opportunities for parents to:</p> <p>(i) Learn about preventive medical and oral health care, emergency first aid, environmental hazards, and health and safety practices for the home including health and developmental consequences of tobacco products use and exposure to lead, and safe sleep;</p> <p>(ii) Discuss their child’s nutritional status with staff, including the importance of physical activity, healthy eating, and negative health consequences of sugar-sweetened beverages, and how to select and prepare nutritious foods that meet the family’s nutrition and food budget needs;</p> <p>(iii) Learn about healthy pregnancy and postpartum care, as appropriate, including breastfeeding support and treatment options for parental mental health or substance abuse problems, including perinatal depression;</p> <p>(iv) Discuss with staff and identify issues related to child mental health and social and emotional well-being,</p>	<p>5. Parent will complete a <b>Mental Wellness Checklist</b> within 45 days of entry date and again by February 28<sup>th</sup>.</p> <p>6. FSW’s will share and evaluate family’s health and well-being during the Family Partnership process, and provide services if needed.</p> <p>1. Upon enrollment parents/guardians will be supplied with a <b>Welcome Packet</b>.</p> <p>2. FSW’s will share information and education with parents/guardians during home visits and parent meetings.</p> <p>1. Parents/guardians will complete a <b>Health Assessment and Nutrition Assessment</b> prior to enrollment into the program.</p> <p>2. FSW’s will share information and education with parents/guardians during home visits and parent meetings.</p> <p>1. Upon enrollment parent/guardians will be supplied with a <b>Welcome Packet</b>.</p> <p>2. FSW’s will share information and education with parents/guardian during home visits and parent meetings.</p> <p>1. Parents/guardians will complete a <b>Mental Wellness Checklist</b>.</p> <p>2. FSW’s will share information and education with parents/guardians during home visits and parent meetings.</p>

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	<p>including observations and any concerns about their child’s mental health, typical and atypical behavior and development, and how to appropriately respond to their child and promote their child’s social and emotional development; and,</p> <p>Learn about appropriate vehicle and pedestrian safety for keeping children safe.</p> <p>A program must provide ongoing support to assist parents’ navigation through health systems to meet the general health and specifically identified needs of their children and must assist parents:</p> <p>In understanding how to access health insurance for themselves and their families, including information about private and public health insurance and designated enrollment periods;</p> <p>In understanding the results of diagnostic and treatment procedures as well as plans for ongoing care; and,</p> <p>In familiarizing their children with services, they will receive while enrolled in the program and to enroll and participate in a system of ongoing family health care.</p>	<ol style="list-style-type: none"> <li>1. Upon enrollment parents/guardians will be supplied with a <b>Welcome Packet</b> that includes vehicle and pedestrian safety information.</li> <li>2. Vehicle and pedestrian safety will be on the curriculum within the first 30 days of school.</li> </ol> <ol style="list-style-type: none"> <li>1. Upon completing enrollment application parent/guardian will indicate the status of health insurance.</li> <li>2. If needed the FSW’s will initiate a <b>Health and Developmental Initial Plan</b> and refer parents/guardians to health insurance agencies and help parents/guardians navigate through health systems.</li> <li>3. FSW’s will share information and education with parents/guardians during home visits and parent meetings.</li> </ol> <ol style="list-style-type: none"> <li>1. FSW’s will review any diagnostic and treatment procedures with parent/guardians.</li> <li>2. FSW’s will collaborate with parents/guardians that express concern about health, nutrition and mental health services.</li> </ol> <ol style="list-style-type: none"> <li>1. Upon completing enrollment application, the FSW’s will explain to parent/guardian of all services and screening that the child will receive while in the program.</li> <li>2. FSW’s will share information and education with parents/guardians on the importance of ongoing family care.</li> </ol>

Standard	Performance Standard	Plan of Action
<p><b>§1302.47</b></p> <p>(a)</p> <p>(b)</p> <p>(1)</p>	<p><b>Safety practices.</b></p> <p>A program must establish, train staff on, implement, and enforce a system of health and safety practices that ensure children are kept safe at all times. A program should consult <u>Caring for our Children Basics</u>, available at: <a href="http://www.acf.hhs.gov/sites/default/files/eecd/caring_for_our_children_basics.pdf">http://www.acf.hhs.gov/sites/default/files/eecd/caring_for_our_children_basics.pdf</a> for additional information to develop and implement adequate safety policies and practices described in this part.</p> <p>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. This system must ensure:</p> <p><u>Facilities.</u> All facilities where children are served, including areas for learning, playing, sleeping, toileting, and eating are, at a minimum:</p>	<ol style="list-style-type: none"> <li>1. We have a system of health and safety practices that ensure children are kept safe at all times.</li> <li>2. Administration Staff and Site Supervisors will review safety procedures with new staff prior to staff beginning job duties at the center.</li> <li>3. Staff will be trained on safety practices yearly during pre-service training.</li> <li>4. Staff will be trained on safety practices periodically and as needed during staff training and meetings.</li> <li>5. The Program will follow State Minimum Standard for Child-Care Centers.</li> </ol>

Standard	Performance Standard	Plan of Action
(i)	Meet licensing requirements in accordance with §1302.21(d)(1) and 1302.23(d);	<ol style="list-style-type: none"> <li>1. The facilities used by a program must meet state, tribal, or local licensing requirements, even if exempted by the licensing entity. When state, tribal, or local requirements vary from Head Start requirements, the most stringent provision takes precedence.</li> <li>2. 1302.23(d) – Not applicable.</li> </ol>
(ii)	Clean and free from pests;	<ol style="list-style-type: none"> <li>1. Head Start/Early Head Start facilities will be treated for pests on an as needed basis by a licensed professional or an Integrated Pest MGMT person.</li> <li>2. If a specific problem has been noted, the appropriate treatment will be given upon the advice of the licensed professional.</li> <li>3. The service will be conducted after the children have left for the day or on days that the children will not be attending.</li> </ol>
(iii)	Free from pollutants, hazards and toxins that are accessible to children and could endanger children’s safety;	<ol style="list-style-type: none"> <li>1. Follow recommendations of the state and local authorities involving water and soil contaminants.</li> </ol>
(iv)	Designed to prevent child injury and free from hazards, including choking, strangulation, electrical, and drowning hazards, hazards posed by appliances and all other safety hazards;	<ol style="list-style-type: none"> <li>1. Indoor premises will be cleaned daily.</li> <li>2. Remove excess garbage and food from classrooms after meals.</li> <li>3. Playground will be checked daily and documented on the <b>Center Daily Health and Safety Checklist</b>.</li> <li>4. Lead free paint will be used when painting interior and exterior surfaces.</li> <li>5. Follow State Minimum Standard of Child-Care Centers.</li> </ol>
(v)	Well lit, including emergency lighting;	<ol style="list-style-type: none"> <li>1. Flashlights are placed in each room used by children in an easily accessible designated area.</li> <li>2. Flashlights will be tested daily and documented on the <b>Classroom Daily Health and Safety Checklist</b> and <b>Center Daily Health and Safety Checklist</b>.</li> <li>3. Classroom will have safe and effective lighting.</li> </ol>

Standard	Performance Standard	Plan of Action
(vi)	Equipped with safety supplies that are readily accessible to staff, including, at a minimum, fully-equipped and up-to-date first aid kits and appropriate fire safety supplies;	<ol style="list-style-type: none"> <li>1. Fire extinguishers are in each center, checked/recorded monthly on the <b>Fire Safety Practices</b> form 7263 and inspected once a year and serviced every 6 years by a fire extinguisher service professional.</li> <li>2. Train staff on the use and location of fire extinguishers  <b>First Aid Kits must be:</b> <ul style="list-style-type: none"> <li>○ Clearly labeled;</li> <li>○ Kept in a clean and sanitary condition;</li> <li>○ Easily accessible to all staff;</li> <li>○ Stored in a designated location known to all employees; and</li> <li>○ Kept out of the reach of children;</li> <li>○ The First Aid Kit must be checked monthly to ensure it is fully stocked with the required supplies and supplies have not expired;</li> <li>○ Staff will take the first aid kit whenever leaving the center;</li> <li>○ Site Supervisors will train staff, substitutes, and volunteers where the first aid kit i kept.</li> </ul> <b>Texas Department of Family and Protective Services 746.4003</b> </li> <li>3. First Aid Kits must contain the following: <ul style="list-style-type: none"> <li>○ A guide to first aid and emergency care;</li> <li>○ Adhesive tape;</li> <li>○ Antiseptic solution or wipes;</li> <li>○ <del>Cotton balls;</del></li> <li>○ Multi-size adhesive bandages;</li> <li>○ Scissors;</li> <li>○ Sterile gauze pads;</li> <li>○ Thermometer;</li> <li>○ Tweezers;</li> <li>○ Waterproof, disposable gloves.</li> </ul> </li> <li>4. Site Supervisor/designated staff will complete monthly inventory.</li> <li>5. Restock first aid supplies after use or as supplies expire.</li> <li>6. Each center will have an inventory check list. The <b>First Aid Kit Checklist</b> must be kept in the First Aid Kit.</li> <li>7. Notify Health Manager/designated staff when supplies are needed to restock the First-Aid Kit.</li> </ol>

Standard	Performance Standard	Plan of Action
(vii)	Free from firearms or other weapons that are accessible to children;	<b>Must follow Texas Department of Family and Protective Services. §746.3707.</b>
(viii)	Designed to separate toileting and diapering areas from areas for preparing food, cooking, eating, or children’s activities; and,	<ol style="list-style-type: none"> <li>1. Toilets and hand washing facilities will be adequate, cleaned daily, in working condition, and easily reached by the children.</li> <li>2. Toileting and diapering areas will be separate from areas used for cooking, eating, or children’s activities.</li> </ol>
(ix)	Kept safe through an ongoing system of preventative maintenance.	<ol style="list-style-type: none"> <li>1. The <b>Classroom Daily Health/Safety Checklist and Center Daily Health and Safety Checklist</b> will be completed daily.</li> <li>2. If any repairs or maintenance is required a <b>Repair and Maintenance Request</b> will be submitted to the Facility Manager. Attach pictures if applicable of before and after.</li> <li>3. Facility Manager will follow-up on <b>Repair and Maintenance Request</b> with staff.</li> <li>4. Follow-up will continue until work is complete.</li> </ol>
(2)	<u>Equipment and materials.</u> Indoor and outdoor play equipment, cribs, cots, feeding chairs, strollers, and other equipment used in the care of enrolled children, and as applicable, other equipment and materials meet standards set by the Consumer Product Safety Commission (CPSC) or the American Society for Testing and Materials, International (ASTM). All equipment and materials must at a minimum:	<ol style="list-style-type: none"> <li>1. Toys must be removed after being placed in children’s mouth once child is finished playing with the toy, or immediately after coming into contact with bodily secretions. These toys will be placed in a container labeled soiled toys.</li> <li>2. All materials purchased will be made of non-toxic materials.</li> <li>3. At the end of everyday contaminated toys will be sanitized <b>with a product that is registered by the Environmental Protection Agency (EPA). You must follow the products labeling instructions for sanitizing.</b></li> </ol>

Standard	Performance Standard	Plan of Action
(i)	Be clean and safe for children’s use and are appropriately disinfected;	
(ii)	Be accessible only to children for whom they are age appropriate;	<ol style="list-style-type: none"> <li>1. Staff will provide child size tables, chairs, equipment, toys, materials and other furniture that is age appropriate to the children served.</li> <li>2. Adaptations will be made as needed for children with disabilities.</li> </ol>
(iii)	Be designed to ensure appropriate supervision of children at all times;	<ol style="list-style-type: none"> <li>1. Provide direct access from the building onto an appropriately fenced area when possible.</li> <li>2. Under no circumstances will a child be left alone or unsupervised while in the care of staff, volunteers that can be counted in child-staff ratio, therapist and consultants.</li> <li>3. HS/EHS classroom staff must know the children and how many children they are responsible for at all times.</li> <li>4. HS/EHS Classroom staff must use the classroom <b>Transition Roll-Call</b> to take roll call of the children before transitioning to a location outside of the classroom and upon arrival to new location.</li> <li>5. Both classroom staff must also count the children after roll call and communicate this number to each other.</li> <li>6. While moving to a new location one staff must position themselves at the front of the line and one staff must position themselves at the back of the line.</li> <li>7. During outdoor play or other play activities, the staff must position themselves at opposite ends of the area and move around as necessary so all children can be visually supervised at all times.</li> <li>8. Both classroom staff must count children several times during outside play/activity and communicate this number to each other to ensure all children are accounted for at all times.</li> </ol>

Standard	Performance Standard	Plan of Action
<p>(iv)</p> <p>(v)</p>	<p>Allow for the separation of infants and toddlers from preschoolers during play in center-based programs; and,</p> <p>Be kept safe through an ongoing system of preventative maintenance.</p>	<p>9. Both staff must count the children once they are back in the classroom and communicate this number to each other.</p> <p>10. Assure that there is an appropriate number of adults with the children at all times, based on the number of children present.</p> <p>11. Outdoor playgrounds are enclosed with fences and two gates and/or two exits where applicable.</p> <p>12. During nap/rest time for 18 months and older one teaching staff must be free from activities, not directly involving the teaching, care and supervision of children, such as administrative and clerical duties, meal preparation, janitorial duties and personal use of electronic devices. For Classrooms serving children under 18 months if more than two paid staff are present, you can follow the above.</p> <p>1. The indoor and outdoor space used by the Early Head Start and Head Start children will be independent of each other.</p> <p>1. Complete daily the <b>Classroom Daily Health and Safety Checklist</b>, <b>Center Daily Health and safety Checklist</b> and <b>Daily Playground Safety Checklist</b> and report any unsafe conditions to the designated person immediately.</p> <p>2. If any repairs or maintenance is required a <b>Repair and Maintenance Request</b> will be submitted to the Facility Manager and Compliance Specialist for reviews. Attach pictures if applicable before and after.</p> <p>3. Facilities Manager will follow-up on the <b>Repair and Maintenance Request</b>.</p> <p>4. Follow-up will continue until work is complete.</p>



Standard	Performance Standard	Plan of Action
(3)	<u>Background checks.</u> All staff have complete background check in accordance with §1302.90(b).	<b>See 1302.90(b) Personnel policies.</b>
(4)	<u>Safety training.</u>	
(i)	<u>Staff with regular child contact.</u> All staff with regular child contact have initial orientation training within three months of hire and ongoing training in all state, local, tribal, federal and program-developed health, safety and child care requirements to ensure the safety of children in their care; including, at a minimum, and as appropriate based on staff roles and ages of children they work with, training in:	
(A)	The prevention and control of infectious diseases;	
(B)	Prevention of sudden infant death syndrome and use of safe sleeping practices;	
(C)	Administration of medication, consistent with standards for parental consent;	
(D)	Prevention and response to emergencies due to food and allergic reactions;	
(E)	Building and physical premises safety, including identification of and protection from hazards, bodies of water, and vehicular traffic;	
(F)	Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment;	

Standard	Performance Standard	Plan of Action
(G)	Emergency preparedness and response planning for emergencies;	
(H)	Handling and storage of hazardous materials and the appropriate disposal of bio contaminants;	
(I)	Appropriate precautions in transporting children, if applicable;	
(J)	First aid and cardiopulmonary resuscitation; and,	
(K)	Recognition and reporting of child abuse and neglect, in accordance with the requirements at (b)(5) of this section.	
(ii)	<u>Staff without regular child contact.</u> All staff with no regular responsibility for or contact with children have initial orientation training with three months of hire; ongoing training in all state, local, tribal, federal and program-developed health and safety requirements applicable to their work; and training in the program’s emergency and disaster preparedness procedures.	<ol style="list-style-type: none"> <li>1. During new hire orientation required paperwork will be completed with new staff.</li> <li>2. Staff will be supplied with all required and appropriate trainings.</li> <li>3. Site Supervisors will review procedures with new staff prior to staff beginning job duties at the site.</li> <li>4. Staff will receive training yearly during pre-service training.</li> <li>5. Staff will be trained on procedures periodically and as needed during all staff trainings, supervisor meetings and individual training if needed.</li> <li>6. Staff will receive active supervision a minimum of 3 times/ year or as needed. Training such as abuse and neglect will be conducted annually and on an as needed basis.</li> </ol>
(5)	<u>Safety practices.</u> All staff and consultant follow appropriate practices to keep children safe during all activities, including, at a minimum:	
(i)	Reporting of suspected or known child abuse and neglect, including that staff comply with applicable federal, state, local, and tribal laws;	<ol style="list-style-type: none"> <li>1. Staff will be trained on the definition, how to identify, important things to remember, and how to report incidents of Child Abuse and Sexual Abuse. Trainings will occur during onboarding, in-service and throughout the year, as needed.</li> </ol>

Standard	Performance Standard	Plan of Action
(ii)	Safe sleep practices, including ensuring that all sleeping arrangements for children under 18 months of age use firm mattresses or cots, as appropriate, and for children under 12 months, soft bedding materials or toys must not be used;	<p>2. All federal, state, and local laws will be followed and reporting will be completely confidential and solely on the reporting person. Each staff member is responsible for reporting cases of suspect or identified child abuse for they are all mandated reporters.</p> <p>3. Reported cases must be kept confidential and not shared with other staff members.</p> <p>1. Cribs and mats will be spaced three feet apart when occupied.</p> <p>2. Children must be assigned to the same crib and mat to help avoid spreading of contagious illnesses.</p> <p>3. Children under 18 months of age will use firm mattresses or mats.</p> <p>4. Soft bedding, blankets or toys will not be allowed in the cribs with the babies.</p> <p>5. Linens will be washed on a weekly basis, as well as immediately following an illness, and after accidents. Crib sheets for infants will be washed on a daily basis.</p> <p>6. Cribs and mats will be disinfected on a weekly basis or as needed.</p>
(iii)	Appropriate indoor and outdoor supervision of children at all times;	<p>1. Provide direct access from the building onto an appropriately fenced area when possible.</p> <p>2. Under no circumstances will a child be left alone or unsupervised while in the care of staff, volunteers that can be counted in child-staff ratio, therapist and consultants.</p> <p>3. HS/EHS classroom staff must know the children and how many children they are responsible for at all times.</p> <p>4. HS/EHS Classroom staff must use the classroom <b>Transition Roll-Call</b> to take roll call of the children before transitioning to a location outside of the classroom and upon arrival to new location.</p> <p>5. Both classroom staff must also count the children after roll call and communicate this number to each other.</p> <p>6. While moving to a new location one staff must position themselves at the front of the line and one staff must position themselves at the back of the line.</p>

Standard	Performance Standard	Plan of Action
(iv)	Only releasing children to an authorized adult, and;	<ol style="list-style-type: none"> <li>7. During outdoor play or other play activities, the staff must position themselves at opposite ends of the area and move around as necessary so all children can be visually supervised at all times.</li> <li>8. Both classroom staff must count children several times during outside play/activity and communicate this number to each other to ensure all children are accounted for at all times.</li> <li>9. Both staff must count the children once they are back in the classroom and communicate this number to each other.</li> <li>10. Assure that there is an appropriate number of adults with the children at all times, based on the number of children present.</li> <li>11. Outdoor playgrounds are enclosed with fences and two gates and/or two exits where applicable.</li> </ol> <ol style="list-style-type: none"> <li>1. During the registration process, an <b>Admission Information Form</b> will be completed with the names of those persons authorized to pick up the child.</li> <li>2. Staff will ask for picture identification of the person picking the child up and verify that person is on the pick-up list. Copy of picture identification must be made and stapled to the sign in sheet. This step will continue until staff is familiar with persons on the pick-up list.</li> <li>3. If the legal guardian would like to add or remove a person from the pick-up list on the <b>Admission Information Form</b> the legal guardian must complete an <b>Add/Remove Authorization for Releasing a Child Form</b> in person. (Forms will be stapled to the <b>Admission Information Form</b>.)</li> <li>4. In cases where the parent wishes to deny access to the non-custodial parent, they will be required to provide the program with appropriate copies of legal documentation (custody decree, restraining order, termination of parental rights).</li> <li>5. In cases where potential kidnapping or violence is an issue, photographs of the person should be provided to assist staff in identifying these individuals.</li> </ol>

Standard	Performance Standard	Plan of Action
<p>(v)</p> <p>(6)</p>	<p>All standards of conduct described in §1302.90(c).</p> <p><u>Hygiene practices.</u> All staff systematically and routinely implement hygiene practices that at a minimum ensure:</p>	<p>6. In cases where there are concerns on the part of the custodial parent, but there is no legal documentation available, the FSW will make appropriate referrals to legal aid or other legal counsel.</p> <p>7. If an adult shows up to the site and does not have authorization for pick up the child:</p> <ol style="list-style-type: none"> <li>1) Staff will escort the adult to the office,</li> <li>2) Staff will inform this person that there is documentation on file prohibiting release of the child,</li> <li>3) Staff will ask the adult to leave the center,</li> <li>4) If the adult refuses to leave, staff will contact the police,</li> <li>5) Staff will contact custodial parent and ERSEA Manager to inform them of the incident.</li> </ol> <p>Under <u>NO</u> circumstances will letters or phone calls be accepted to make any changes to the <b>Add/Remove Authorization for Releasing a Child Form</b>. Disciplinary action <u>WILL</u> be taken if a child is released to an unauthorized person.</p> <p>Any person authorized to pick up a child other than the parent/guardian must be at least 18 years old.</p> <p>If the person designated to pick up the child demonstrates inability to safely transport the child, the staff will suggest another form of transportation. However, if the person designated insists on transporting the child, staff will notify the local law enforcement of the situation to ensure the safety of the child.</p> <p>1. All staff, consultants, contractors, and volunteers will be asked to review, sign and abide by the program’s Standard of Conduct as listed in §1302.90(c)</p> <p>1. Plan and implement training for staff, volunteers, and children in hand washing procedures.</p>

Standard	Performance Standard	Plan of Action
(i)	Appropriate toileting, hand washing, and diapering procedures are followed;	<p>2. Wash hands with soap and running water for 20 seconds when performing the following: This applies to staff and all children.</p> <ul style="list-style-type: none"> <li>○ After diapering or toileting;</li> <li>○ Before setting tables;</li> <li>○ Before handling, preparing and consuming food;</li> <li>○ After handling animals;</li> <li>○ Before and after dispensing medication;</li> <li>○ After cleaning or using cleaning products;</li> <li>○ After arriving at the center daily;</li> <li>○ After outdoor activities;</li> <li>○ Before and after playing in the water table;</li> <li>○ After playing in the sand table.</li> </ul> <p>3. Place hand washing posters in all restrooms and at all sinks as a reminder.</p> <p>4. Provide hand washing soap and paper towels at every sink.</p> <p>1. Classroom staff will be trained on <b>Diaper Changing Procedures</b>.</p> <p>2. Early Head Start staff will record eliminations and document on <b>Cuddle Grams</b> and give to the parent/guardian daily.</p> <p><b><u>Diaper Changing Procedure:</u></b></p> <ol style="list-style-type: none"> <li>1. A designated area will be established specifically for diapering that is not located in or near any food handling areas.</li> <li>2. Surfaces of mats will be kept clean, waterproof, and free of cracks, tears and crevices.</li> <li>3. Only Head Start/Early Head Start staff or the child’s parent/guardian will engage in the diapering of a child.</li> </ol> <p><b><u>Early Head Start Procedure:</u></b></p> <ol style="list-style-type: none"> <li>1. Wash hands thoroughly;</li> <li>2. Get supplies ready, including applying gloves;</li> <li>3. Protect the surface with clean, non-porous disposable paper;</li> <li>4. Place child on diapering surface keeping one hand on child or child safety mechanism at all times;</li> <li>5. Undress the child to expose diaper. If clothes are soiled place clothes in plastic bag;</li> <li>6. Wipe from front to back using each cloth or towel only once</li> <li>7. Put soiled wipes in soiled diaper;</li> </ol>

Standard	Performance Standard	Plan of Action
		<ol style="list-style-type: none"> <li>8. Place soiled diaper in lined trash can (if possible, tuck diaper in gloves);</li> <li>9. Dispose gloves in trash can &amp; close trash lid;</li> <li>10. Diaper &amp; dress the child;</li> <li>11. Wash child's hands at the sink;</li> <li>12. Return child to supervised area;</li> </ol> <p>If area became soiled clean, sanitize area. Sanitizing requires a four-step process. For the sanitizing process to be effective, you must follow these steps in order:</p> <ol style="list-style-type: none"> <li>1. Wash with soap and water;</li> <li>2. Rinse with clean water;</li> <li>3. Soak in or spray on a disinfected solution (at least 2 minutes);</li> <li>4. Allow the surface to air dry.</li> <li>5. Wash hands thoroughly;</li> <li>6. Record on diaper changing schedule.</li> </ol> <p><b><u>Head Start Procedure:</u></b></p> <ol style="list-style-type: none"> <li>1. Wash hands thoroughly;</li> <li>2. Get supplies ready, including applying gloves;</li> <li>3. Undress the child to expose diaper or pull up;</li> <li>4. If applicable place child on diapering surface;</li> <li>5. Wipe from front to back using each cloth or towel only once;</li> <li>6. Put soiled wipes in soiled diaper;</li> <li>7. Place soiled diaper in lined trash can (if possible, tuck diaper in gloves);</li> <li>8. Dispose glove in trash can and close lid;</li> <li>9. Diaper and dress child;</li> <li>10. Wash child's hands;</li> <li>11. Return child to supervised area;</li> </ol> <p>If area became soiled clean, sanitize the area. Sanitizing requires a four- step process. For the sanitizing process to be effective, you must follow these steps in order:</p> <ol style="list-style-type: none"> <li>1. Wash hands with soap and water;</li> <li>2. Rinse with clean water;</li> <li>3. Soak in or spray on disinfected solution (at least 2 minutes);</li> <li>4. Allow surface to air dry.</li> </ol>

Standard	Performance Standard	Plan of Action
(ii)	Safe food preparation; and,	<p>5. Wash hands thoroughly;</p> <p>6. Record on diaper changing schedule.</p> <p>1. Sanitize with a product that is registered by the Environmental Protection Agency (EPA). You must follow the products labeling instructions for sanitizing.</p> <ol style="list-style-type: none"> <li>1. Follow recommended sanitation codes for storage, preparation, and serving of food.</li> <li>2. Nutrition Manager/Specialist/designated staff will monitor all Head Start/Early Head Start sites 3 times per year to stay in compliance with sanitation codes.</li> <li>3. Staff will provide training annually on sanitation for food service staff.</li> <li>4. Gloves will be worn when touching food directly.</li> <li>5. All HS/EHS staff, volunteers or visitors (such as monitors) will be required to wear hair covering while in the kitchen area when food is being prepared or placed into serving dishes.</li> <li>6. Food prepared and delivered from a place other than the Head Start center will be delivered in insulated catering containers to maintain temperatures.</li> <li>7. Before the food leaves the kitchen, temperatures will be taken to ensure meats are at the proper degrees and recorded on the <b>Food Temperature Record</b>. This form is to be completed daily and kept in a central file at the center to be available for review.</li> </ol> <p><b>Policy: Compliance of Sanitation</b></p> <ol style="list-style-type: none"> <li>1. <b>Keep it Clean</b> – Keep everything that touches food clean. <ul style="list-style-type: none"> <li>○ Wash hands with hot soapy water for at least 20 seconds before preparing food.</li> <li>○ Keep raw meat from coming into contact with other foods during preparation.</li> <li>○ Wash your hands and all utensils and surfaces with hot soapy water after contact with raw meat.</li> </ul> </li> </ol>



Standard	Performance Standard	Plan of Action
		<ul style="list-style-type: none"> <li>○ Never chop fresh vegetables or salad ingredients on a cutting board that was used for raw meat without properly cleaning it first. If possible, use a separate cutting board for the sole preparation of raw meat, poultry and fish.</li> <li>○ Carefully wash cutting boards and knives with hot soapy water and then sanitize with a solution of household bleach and water. Some cutting boards can be cleaned in the dishwasher.</li> <li>○ Wash fruits and vegetables before use and store appropriately.</li> </ul> <p>2. <b>Keep it Cold</b>– As a general rule; keep cold foods cold and hot foods hot.</p> <ul style="list-style-type: none"> <li>○ Pick up meat and refrigerated items last during your shopping trip.</li> <li>○ Store properly wrapped meat in the meat compartment or the coldest part of your refrigerator. You may want to place meat in plastic bags to prevent possible leakage.</li> <li>○ Thaw meat in the refrigerator. Do not thaw meat on the kitchen counter.</li> </ul> <p>3. Keeps the refrigerator setting at 35 degrees Fahrenheit to 40 degrees Fahrenheit and the freezer at 0 Degrees Fahrenheit or below. Use a refrigerator thermometer for accuracy. Document temperature reading on <b>Temperature Record daily</b>.</p> <p>4. Proper storage and refrigeration of both raw and cooked beef is important for quality and safety reasons.</p> <p><b>Follow these recommended storage guidelines:</b></p> <ul style="list-style-type: none"> <li>○ Beef can be frozen in its original, transparent packaging for up to two weeks. For longer storage, prevent freezer burn by re-wrapping beef in moisture-proof, air-tight wrapping materials such as heavy-duty aluminum foil, freezer paper or plastic freezer bags. Label and date all packages.</li> </ul> <p>5. <b>Cook it Properly</b> – Use a thermometer to verify cooking temperatures and document temperature reading on <b>Food Temperature Record</b>.</p> <p>6. Certain bacteria that may be present in food, such as E. coli, are eliminated by cooking foods properly. Heat kills E. coli bacteria.</p>

Standard	Performance Standard	Plan of Action
		<p><b>Follow these cooking guidelines to keep food safe:</b></p> <ul style="list-style-type: none"> <li>○ Ground Beef – Cook to 160 Degree Fahrenheit internal temperature.</li> <li>○ Chicken and Turkey – Cook to 170 Degrees Fahrenheit internal temperature.</li> <li>○ When basting be careful not to contaminate meats by reusing leftover marinade or adding sauce with a brush previously used on raw meats. Bring marinades to a rolling boil for one minute for safe use on cooked meats.</li> <li>○ Stir, rotate and cover goods when microwaving to ensure even cooking. Check temperature with an instant-read thermometer in at least three spots and follow recommended standing times outside the microwave so food completes cooking.</li> </ul> <p>7. Leftover food must be thrown out after each meal.</p> <p><b>Policy: Food Recall Action Plan</b></p> <ol style="list-style-type: none"> <li>1. The Nutrition Manager/Specialist will review any recall notification reports when received or any press release for public notification.</li> <li>2. The Nutrition Manager/ Specialist will communicate the information to all Head Start sites as quickly as possible via email and/or phone call so that Site Supervisors and cooks understand their responsibilities.</li> <li>3. The cooks will remove and inventory the recalled food. Food should be placed in a bag with removal date.</li> <li>4. Collect health-related information needed for public communications if required. <ul style="list-style-type: none"> <li>○ Whether the product was served.</li> <li>○ The dates the product was served.</li> <li>○ Any reports of possible health problems related to the recalled product.</li> </ul> </li> <li>5. Submit information to manufacture, distributor, or State Agency describing the quantity in stock if required.</li> <li>6. Determine if the food item is to be returned or destroyed per notification.</li> </ol>

Standard	Performance Standard	Plan of Action
(iii)	Exposure to blood and body fluids are handled consistent with standards of the Occupational Safety Health Administration.	<ol style="list-style-type: none"> <li>7. Follow written instructions in the recall notice to return or destroy product.</li> <li>8. Document and submit information necessary for any reimbursement of food cost.</li> <li>9. Maintain all files completed pertaining to the food recall for three years plus the current year.</li> <li>10. Complete the <b>Food Recall Information Sheet</b> and submit to Nutrition Manager/Specialist.</li> </ol> <ol style="list-style-type: none"> <li>1. Supplies used to clean and handle bodily fluids should be labeled as Bodily Fluids Only, Broom, Mop, Bucket and Dust Pan.</li> <li>2. Nonporous disposable gloves will be made available to all staff and volunteers.</li> <li>3. Staff must wear nonporous gloves when in contact with blood, visibly bloody bodily fluids or other potentially infectious materials.</li> <li>4. Clean and disinfect work surfaces contaminated with blood or other bodily fluids immediately using the recommended liquid the <b>recommended EPA approved</b> solution and designated cleaning supplies.</li> <li>5. Clean and disinfect rugs using appropriate carpet cleaning solution (do not use vacuum cleaner)</li> <li>6. Dispose of all contaminated materials in a plastic bio-hazard bag and secure with tie.</li> <li>7. Clean, rinse and disinfect materials used for cleaning spills using the recommended liquid bleach solution.</li> <li>8. Staff will be trained on <b>Bloodborne Pathogens</b> before they start assigned job duties and yearly thereafter.</li> </ol> <p><b>Satanize: Bodily Fluids and Surfaces</b></p> <ol style="list-style-type: none"> <li>1. Satanize with a product that is registered by the EPA. You must follow the products labeling instructions for sanitizing.</li> </ol>

Standard	Performance Standard	Plan of Action
(7)	<p>Administrative safety procedures. Programs establish, follow, and practice, as appropriate, procedures for, at a minimum:</p> <p>(i) Emergencies;</p> <p>(ii) Fire prevention and response;</p> <p>(iii) Protection from contagious disease, including appropriate inclusion and exclusion policies for when a child is ill, and from an infectious disease outbreak, including appropriate notifications of any reportable illness;</p>	<ol style="list-style-type: none"> <li>1. Supervisors will review <b>Parent Handbook</b> with new staff prior to staff beginning job duties at the center.</li> <li>2. Supervisors will review <b>Emergency Response Plan</b> that includes fire prevention and response with staff prior to staff beginning job duties at the center.</li> <li>3. Staff will be trained on safety practices yearly during pre-service training.</li> <li>4. Staff will be trained on safety practices periodically and as needed during all staff training, supervisor meetings and individual training if needed.</li> </ol> <ol style="list-style-type: none"> <li>1. The <b>Welcome Packet and Parent Handbook</b> will contain a copy of the following guidelines for exclusion from Head Start/Early Head Start classrooms: Texas Department of State Health Services in 25 TAC 97.7.</li> <li>2. Staff will complete an <b>Incident/Illness Report</b> form 7239 when a child is temporarily excluded from school due to a communicable disease listed in the operation handbook, or when any injury happens on school grounds. For minor illness an <b>Acute Illness Report</b> will be completed. A copy of the <b>Incident/Illness Report &amp; Acute Illness Report</b> will be sent to the Health Manager and original placed in the Child's State File.</li> <li>3. A child may be readmitted to the program when he or she meets appropriate criteria.</li> <li>4. Some conditions may require approval by a local health official, before re-admittance is possible.</li> <li>5. Staff may consult with local health officials and/or TDFPS regarding these conditions if applicable.</li> <li>6. Staff, volunteers, and substitutes will be trained at orientations.</li> <li>7. After being absent 4 consecutive days a <b>Daily/4-Consecutive Days Absence Report</b> along with a copy of the <b>Incident/Illness Report &amp; Health &amp; Developmental Initial Plan</b> will be submitted to the ERSEA Manager.</li> </ol>

Standard	Performance Standard	Plan of Action
(iv)	The handling, storage, administration, and record of administration of medication;	<p><b>These procedures are in accordance with Day Care Licensing Minimum Standards and Head Start Performance Standards.</b></p> <p><b>Policy: Administration of Medication</b></p> <p><b>Procedure:</b></p> <ol style="list-style-type: none"> <li>1. Head Start/Early Head Start staff will be trained at orientation, pre-service, and/or as needed on Medication Procedures, the use of Medical Equipment when applicable and possible side effects.</li> <li>2. All medications must be in their original container.</li> <li>3. Pharmacy label and/or Doctor's instructions must include the following information: <ol style="list-style-type: none"> <li>a. Child's first and last name;</li> <li>b. Name of the medication;</li> <li>c. Date prescription was filled;</li> <li>d. Name of Health Care Provider who wrote the prescription;</li> <li>e. Medication expiration date;</li> <li>f. Dosage and frequency;</li> <li>g. Storage instruction if available.</li> </ol> </li> <li>4. On the original container staff will write the date the medication was brought into the center;</li> <li>5. Place a picture of the student within a week on medication storage box/sack.</li> <li>6. Parent/guardian must complete and sign <b>Authorization for Dispensing Medication</b> form 7238.</li> <li>7. Medication will be administered only by Site Supervisor or designated person unless an emergency situation occurs.</li> <li>8. Designated staff must be aware of the administration, handling and storage of children's medication per instructions.</li> <li>9. Store all medications in a locked cabinet or locked box except for emergency medication may be kept readily available but out of reach of children.</li> <li>10. Head Start/Early Head Start designated staff will document each time medication is administered on the <b>Authorization for Dispensing Medication</b> form 7238.</li> <li>11. The <b>Authorization for Dispensing Medication</b> form 7238 for each child will be kept confidential and in a notebook. The notebook will be kept at each Head Start/ Early Head Start Site.</li> </ol>

Standard	Performance Standard	Plan of Action
		<p>12. Review the <b>Authorization for Dispensing Medication</b> form 7238 with the parent/guardian at the end of the designated period which medication is to be given.</p> <p>13. For medications given for an extended period of time or emergency medication the <b>Authorization for Dispensing Medication</b> form 7238 will be reviewed with parent/guardian monthly.</p> <p>14. Encourage parents/guardians to give the first dose of medication at home, so they can observe whether the child has any type of reaction.</p> <p>15. Staff will watch for any changes in the child’s normal behavior such as signs of lethargy, moodiness, aggressiveness, difficulty breathing, or physical reactions such as rashes.</p> <p>16. If changes in the child’s normal behavior are noted after administering the medication staff will document changes on the <b>Illness/Incident Report</b> and the <b>Authorization for Dispensing Medication</b> form 7238 and immediately brought to the parent’s/guardian’s attention. If an error occurs with regards to administering medication the person that administered the medication must complete a <b>Medication Error Report</b>.</p> <p>17. A copy of the <b>Incident/Illness Report</b> will be given to the parent/guardian and encourage them to share this information with the physician.</p> <p>18. If Head Start/Early Head Start classroom staff needs to take medication during program operation hours, the Site Supervisor must be informed.</p> <p>19. Arrangements will made for staff’s medication to be stored in a locked cabinet or locked box.</p> <p><b>Policy: Medication Error Report</b>  <b>Procedure:</b>  A medication error consists of the following:</p> <ul style="list-style-type: none"> <li>• Incorrect dosage</li> <li>• Incorrect time</li> <li>• Incorrect person</li> <li>• Incorrect route</li> <li>• incorrect medication</li> </ul>

Standard	Performance Standard	Plan of Action
<p>(v)</p> <p>(vi)</p>	<p>Maintaining procedures and systems to ensure children are only released to an authorized adult; and,</p> <p>Child specific health care needs and food allergies that include accessible plans of action for emergencies. For food allergies, a program must also post individual child food allergies prominently where staff can view wherever food is served.</p>	<p>In the event, a medication error occurs, the staff who administered the medication in error will:</p> <ol style="list-style-type: none"> <li>1. Call 911 and poison control for guidelines and/or instructions to follow, if necessary.</li> <li>2. Call child's parent/guardian to explain medication error.</li> <li>3. Call the Health Manager for assistance.</li> <li>4. Complete <b>Medication Error Report</b> and <b>Incident/Illness Report</b>.</li> <li>5. A copy of the <b>Medication Error Report</b> and <b>Incident/Illness Report</b> will be sent to the Health Manager and to the child's parent/guardian and to the staff that made the medication error. Original will be filed in child's State File.</li> <li>6. In the event a medication error occurs, a copy of the <b>Medication Error Report</b> will be sent to Head Start Director and Health Manager.</li> <li>7. Additional training will be provided by the Health Manager for the staff responsible for the medication error.</li> </ol> <p><b>See §1302.47(5)(iv)</b></p> <ol style="list-style-type: none"> <li>1. Parent/guardian will complete a <b>Health History and Nutrition Assessment</b>.</li> <li>2. Staff will review any concerns, health care needs and food allergies with parent/guardian.</li> <li>3. If concerns require an Individual <b>Health Care Plan</b> and/or <b>Food Allergy Emergency Plan</b>, staff will ask parent to obtain one from a health care professional.</li> <li>4. A <b>Food Allergy Emergency Plan</b> must include the following: <ul style="list-style-type: none"> <li>o Possible symptoms if exposed to a food on the list; and</li> <li>o The steps to take if the child has an allergic reaction (Example: Use Epi Pen, call 911, etc.</li> </ul> </li> <li>5. <b>Food Allergy Emergency Plan</b> must be obtained prior to admission into the program.</li> <li>6. The child's parent/guardian and health care professional must sign and date the plan.</li> </ol>





<b>Standard</b>	<b>Performance Standard</b>	<b>Plan of Action</b>
3. Center Name & Classroom		Once a child enrolls the form must be sent to the Nutrition Manager and placed in the Child's Federal File in the Nutrition Component.



## 1302 Family & Community Engagement Program Services

### **Subpart E – Family & Community Engagement Program Services**

1302.50 Family engagement.

1302.51 Parent activities to promote child learning and development.

1302.52 Family partnership services.

1302.53 Community partnerships and coordination with other early childhood and education programs.

Standard	Performance Standard	Plan of Action
<p><b>1302.50</b> (a)</p> <p>(b)</p> <p>(1)</p>	<p><b>Family engagement.</b></p> <p><u>Purpose</u></p> <p>A program must integrate parent and family engagement strategies into all systems and program services to support family well-being and promote children’s learning and development. Programs are encouraged to develop innovative two-generation approaches that address prevalent needs of families across their program that may leverage community partnerships or other funding sources.</p> <p><u>Family engagement approach</u></p> <p>A program must:</p> <p>Recognize parents as their children’s primary teachers and nurturers and implement intentional strategies to engage parents in their children’s learning and development and support parent-child relationships, including specific strategies for father engagement;</p>	<ol style="list-style-type: none"> <li>1. Parents are encouraged to volunteer and participate in program related activities, such as classroom and center engagements to strengthen parent-child relationships, reinforce parents as primary teacher, and to engage parents in their children’s learning. <b>Teachers and staff will follow the Family Engagement Approach set by the FAMCO manager.</b></li> <li>2. During education home visits and parent-teacher conferences, parents assist Head Start/Early Head Start staff with developing observable goals for their child. Child portfolios and assessment reports are shared with parents to engage, inform and strengthen their abilities to measure their child’s learning experiences and developmental progress.</li> <li>3. Curriculum Based or ELOF Domain Home to School connections are provided as an extension of the Head Start education program to provide opportunity for parents to work at home with their child as their primary teacher and engage parents in student learning.</li> <li>4. Parents are invited to integrally share information with the staff about personal cultural and life experiences to promote student outcomes.</li> <li>5. Fathers, father figures, male family members, and male role-models are encouraged to come into the classrooms to engage in daily classroom activities at all times. Activities such as classroom engagements are scheduled throughout the school year to specifically promote male engagement. Materials to promote father or male interaction will be handed out quarterly to support parent-child relationships.</li> </ol>

(2)	Develop relationships with parents and structure services to encourage trust and respectful, ongoing two-way communication between staff and parents to create welcoming program environments that incorporate the unique cultural, ethnic, and linguistic backgrounds of families in the program and community.	<ol style="list-style-type: none"> <li>1. Beginning with the initial contact, staff will approach families with respect, care, and lay aside personal opinions, feelings, and or differences. Staff will continue this contact throughout the year to build a positive mutual trusting relationship with families.</li> <li>2. Examine the growing need for diversity and cultural uniqueness with education and provide training to staff, parents, and students when applicable.</li> <li>3. Notify parents and implement an open-door policy where all parents are welcomed to participate or discuss an issue at any time.</li> </ol>
(3)	Collaborate with families in a family partnership process that identifies needs, interests, strengths, goals, and services and resources that support family well-being, including family safety, health, and economic stability;	<ol style="list-style-type: none"> <li>1. At Meet the Teacher/Open House, a letter is shared with families introducing their Family Service Worker and the importance of building a successful strong partnership.</li> <li>2. Families are offered the opportunity to participate in a Family Partnership process beginning in September that will identify family needs and strengths.</li> <li>3. Family goals and achievement step strategies will be developed and followed up on throughout the year. Services and resources that support the family well-being, including family safety, health, economic stability and other support systems applicable to their goal achievement and well-being is provided through referral.</li> </ol>
(4)	parents with opportunities to participate in the program as employees or volunteers;	<ol style="list-style-type: none"> <li>1. Parents/guardians are encouraged to visit the center during program hours, and have the opportunity to participate in and/or observe their children in program activities.</li> <li>2. Monthly newsletters, calendars, flyers, and curriculum information are developed by staff and shared with parents to inform them of upcoming events, engagements, volunteer opportunities, and employment opportunities.</li> <li>3. Parents/guardians are encouraged to complete a <b>Volunteer Interest Survey</b> In which their interests and skills, will be taken into consideration to ensure a positive successful experience as a volunteer.</li> <li>4. Parents/guardians that are interested in volunteering on a consistent basis will complete the <b>Volunteer Orientation and Training</b> packet.</li> <li>5. Job opening notifications will be posted monthly to the center board monthly at each center for parents to review current employment opportunities. Job opening notifications will be provided to the Policy Council and Executive Board monthly in the Director’s Report.</li> </ol>

<p>(5)</p>	<p>Conduct family engagement services in the family’s preferred language, or through an interpreter, to the extent possible, and ensure families have the opportunity to share personal information in an environment in which they feel safe; and,</p>	<p>6. Current and former Early Head Start/Head Start parents will receive preference for employment vacancies for which they are qualified.</p> <ol style="list-style-type: none"> <li>1. Every effort will be made to provide an interpreter for non-English speaking families and materials will be available in the families’ native language when applicable.</li> <li>2. A secure and private area will be provided for any or all communications with families if requested and required for the exchange of personal information.</li> <li>3. Administration staff, site supervisors, family service workers, and teachers will share information to ensure coordinated family engagement strategies for children and families. All information shared will be documented on a <b>Narrative</b> or in ChildPlus software and kept in the Family Partnership Folder.</li> </ol>
<p>(6)</p>	<p>Implement procedures for teachers, home visitors, and family support staff to share information with each other, as appropriate and consistent with the requirements in part 1303 subpart C, of this chapter, FERPA; or IDEA, to ensure coordinated family engagement strategies with children and families in the classroom, home, and community.</p>	<p>Follow Standards and Implementations of 1303 Subpart C- Protections for the Privacy of Child Records.</p>
<p><b>§1302.51</b></p> <p>(a)</p> <p>(1)</p>	<p><b>Parent activities to promote child learning and development.</b></p> <p>A program must promote shared responsibility with parents for children’s early learning and development and implement family engagement strategies that are designed to foster parental confidence and skills in promoting children’s learning and development. These strategies must include:</p> <p>Offering activities that support parent-child relationships and child development including language, dual language, literacy, and bi-literacy development as appropriate;</p>	<p><b>Parent Engagement Approach</b> and <b>Parent Curriculum Approach</b> are developed yearly to create engagement strategies, foster confidence in parenting skills, and promote child learning and development in CVCOG Head Start/Early Head Start Program.</p> <p>Activities to support parent-child relationships and child development of language, literacy, and bi-literacy will be achieved by the following: bi-literacy reading areas in the centers/classrooms, at home reading logs, and a dual language parent education program.</p>

<p>(2)</p>	<p>Providing parents with information about the importance of their child’s regular attendance, and partner with them, as necessary, to promote consistent attendance; and,</p>	<ol style="list-style-type: none"> <li>1. A handout is given in the <b>Welcome Packet</b> discussing the importance of regular attendance as well as it being discussed in the September parent meeting.</li> <li>2. Staff support parents in understanding the importance of regular attendance and resolve any barriers to promote regular attendance.</li> </ol>
<p>(3)</p>	<p>For dual language learners, information and resources for parents about the benefits of bilingualism and biliteracy.</p>	<p>Information and resources will be provided in the Welcome Packet, Parent Meetings, and or given by flyer/media to parents regarding bilingualism and biliteracy quarterly throughout the year.</p>
<p>(b)</p>	<p>A program must, at a minimum, offer opportunities for parents to participate in a research-based parenting curriculum that builds on parents’ knowledge and offers parents the opportunity to practice parenting skills to promote children’s learning and development. A program that chooses to make significant adaptations to the parenting curriculum to better meet the needs of one or more specific populations must work with an expert or experts to develop such adaptations.</p>	<p>The program will follow the <b>Parenting Curriculum Approach</b> offering opportunities for parents to participate in a research-based parenting curriculum.</p>
<p><b>§1302.52</b> (a)</p>	<p><b>Family partnership services.</b> <u>Family partnership process</u> A program must implement a family partnership process that includes a family partnership agreement and the activities described in this section to support family well-being, including family safety, health, and economic stability, to support child learning and development, to provide, if applicable, services and supports for children with disabilities, and to foster parental confidence and skills that promote the early learning and development of their children. The process must be initiated as early in the program year as possible and continue for as long as the family participates in the program, based on parent interest and need.</p>	<ol style="list-style-type: none"> <li>1. Staff will have initial contact with families at orientation/open house. The Family Service Worker will explain their role and attach a letter in the Welcome Packet that outlines the services Head Start/Early Head Start provides to each family and the importance of a good partnership.</li> <li>2. During the fall semester, in August/September staff will schedule meetings for the Family Partnership. For families who are returning or have previous partnership work the process will build upon any existing agreements or goals on previous record with family approval.</li> <li>3. All families who enter the program Head Start before April 1<sup>st</sup> will have a Family Partnership completed. Head Start Families that enter the program after April 1<sup>st</sup> will have a <b>Family Needs Assessment/Assistance Form Completed</b>. All EHS families will have a Family Partnership completed upon entrance into the program. Dates will be determined by FAMCO Manager.</li> </ol>

<p>(b)</p>	<p><u>Identification of family strengths and needs</u> A program must implement intake and family assessment procedures to identify family strengths and needs related to the family engagement outcomes as described in the Head Start Parent Family and Community Engagement Framework, including family well-being, parent-child relationships, families as lifelong educators, families as learners, family engagement in transitions, family connections to peers and the local community, and families as advocates and leaders.</p>	<p>4. The Family Partnership will include the following forms: <b>Family Development Plan, Family Needs Assessment/Assistance Form, Family Outcome Matrix</b> and <b>Family SMART Goal &amp; Step Development/Tracking Form</b>, and <b>Family Service Referral Form</b> (if applicable). 5. FAMCO Manger will access ChildPlus, review forms, and notebooks to confirm completion of all Family Partnership paperwork and analyze aggravated data.</p> <p>Staff will meet with individual families on their caseload to help identify family strengths and needs related to the family engagement outcomes as described in the Head Start Parent Family and Community Engagement Framework with the <b>Family Outcome Matrix</b> and the <b>Family Development Plan</b> forms. All completed forms will be filed in the Family Partnership Notebook and scanned into Childplus at the end of the year.</p>
<p>(c)</p>	<p><u>Individualized family partnership services</u> A program must offer individualized family partnership services that:</p>	<p>The Family Partnership will include the following forms: <b>Family Development Plan, Family Needs Assessment/Assistance Form, Family Outcome Matrix</b> and <b>Family SMART Goal &amp; Step Development/Tracking Form</b>, and <b>Family Service Referral Form</b> (if applicable).</p>
<p>(1)</p>	<p>Collaborate with families to identify interests, needs, and aspirations related to the family engagement outcomes described in paragraph (b) of this section;</p>	<p><b>Family Development Plan, Family Needs Assessment/Assistance Form, Family SMART Goal &amp; Step Development/Tracking Form and Family Outcome Matrix</b> will be completed in September which will evaluate strengths, needed changes, assistance, goals, and time frames to achieve them. All completed forms will be filed in the Family Partnership Notebook and scanned into ChildPlus at the end of the year.</p>
<p>(2)</p>	<p>Help families achieve identified individualized family engagement outcomes;</p>	<p>A <b>Family Service Referral Form</b> and the <b>Family SMART Goal &amp; Step Development/Tracking Form</b> will refer the family and associates them with community partners to achieve their individualized family engagement outcomes goals as well as formulate goals and steps. Progress on goals will be reviewed, evaluated, revised and adjusted for achievement and tracked on this</p>

<p>(3)</p> <p>(4)</p> <p>(d)</p>	<p>Establish and implement a family partnership agreement process that is jointly developed and shared with parents in which staff and families to review individual progress, revise goals, evaluate and track whether identified needs and goals are met, and adjust strategies on an ongoing basis, as necessary; and,</p> <p>Assign staff and resources based on the urgency and intensity of identified family needs and goals.</p> <p><u>Existing plans and community resources.</u> In Implementing this section, a program must take into consideration any existing plans for the family made with other community agencies and availability of other community resources to address family needs, strengths, and goals, in order to avoid duplication of effort.</p>	<p>form throughout the year. All forms are filed in the Family Partnership Notebook and then scanned into ChildPlus at the end of the year.</p> <p>A <b>Family SMART Goal &amp; Step Development/Tracking Form</b> formulates goals and steps. Progress on goals will be reviewed, evaluated, revised and adjusted for achievement and tracked on this form throughout the year. All completed forms will be filed in the Family Partnership Notebook and scanned into Childplus at the end of the year.</p> <p>The <b>Family Needs Assessment/Assistance Form</b> initiates the process of needs for each individual family. Resources will be assigned to MOU partners. This form will be completed at the Family Partnership process and at new goal setting meetings. Staff will fill out, track, revise, and document progress on the <b>Family Service Referral Form</b>. All completed forms will be placed in the Family Partnership Notebook and scanned into ChildPlus at the end of the year.</p> <p>The <b>Family Development Plan</b> will ask families if they have a pre-existing plans or goals with other agencies established. With consent, we will contact the previous agency if applicable, needed and or requested. FSW will become a member of the partnership team and work collaboratively with both the family and other agencies to support the accomplishments of the family goals.</p>
<p><b>§1302.53</b></p> <p>(a)</p> <p>(1)</p>	<p><b>Community partnerships and coordination with other early childhood and education programs.</b></p> <p><u>Community partnerships</u> A program must establish ongoing collaborative relationships and partnerships with community organizations such as establishing joint agreements, procedures, or contracts and arranging for onsite delivery of services as appropriate, to facilitate access to community services that are responsive to children’s families’ needs and family partnership goals,</p>	<p>Our program establishes a memorandum of understanding /partnership agreement with community agencies and organizations that provide services to meet the needs of children and families each grant term. Contact is made yearly to update new services from each community partner.</p>



	and community needs and resources, as determined by the community assessment.	
(2)	A program must establish necessary collaborative relationships and partnerships, with community organizations that may include:	
(i)	Health care providers, including child and adult mental health professionals, Medicaid management care networks, dentists, other health professionals, nutritional service providers, providers of prenatal and postnatal support, and substance abuse treatment providers;	MOU/collaborative partnerships are developed with health care provider, mental health providers, Medicaid managed care networks, dentists, other health professionals, nutritional service providers, and substance abuse treatment providers.
(ii)	Individuals and agencies that provide services to children with disabilities and their families, elementary schools, state preschool providers, and providers of child care services;	MOU/collaborative partnerships are developed with individuals and agencies that provide services to children with disabilities and their families, elementary schools, state preschool providers, and providers of child care services.
(iii)	Family preservation and support services and child protective services and any other agency to which child abuse must be reported under state or tribal law;	MOU/collaborative partnerships are developed with family preservation and support services, child protective services and other agencies to which child abuse must be reported.
(iv)	Educational and cultural institutions, such as libraries and museums, for both children and families;	MOU/collaborative partnerships are developed with educational and cultural intuitions and libraries for both children and families.
(v)	Temporary assistance for Needy Families, nutrition assistance agencies, workforce development and training programs, adult or family literacy, adult education, and post-secondary education institutions, and agencies or financial institutions that provide asset-building education, products and services to enhance family financial stability and savings;	MOU/collaborative partnerships are developed with TANF nutrition assistance agencies, workforce development and training programs, adult or family literacy, adult education and post-secondary education institutions, and agencies or financial institutions.
(vi)	Housing assistance agencies and providers of support for children and families experiencing homelessness, including the local educational agency liaison designated under section 722(g)(1)(J)(ii) of the	MOU/collaborative partnerships are developed with housing assistance agencies and providers.

	<p>McKinney-Vento Homeless Assistance Act (42.U.S.C. 11431 <i>et seq.</i>);</p>	
(vii)	<p>Domestic violence prevention and support providers; and,</p>	<p>MOU/collaborative partnerships are developed with domestic violence prevention and support providers.</p>
(viii)	<p>Other organizations or businesses that may provide support and resources to families.</p>	<p>MOU/collaborative partnerships are developed with organizations or businesses that provide support and resources to families.</p>
(b)	<p><u>Coordination with other programs and systems</u>  A program must take an active role in promoting coordinated systems of comprehensive early childhood services to low-income children and families in their community through communication, cooperation, and the sharing of information among agencies and their community partners, while protecting the privacy of child records in accordance with subpart C of part 1303 of this chapter and applicable federal, state, local, and tribal laws.</p>	<p>Our program will take an active role in promoting coordinated systems of comprehensive services for low-income child and families in the communities. Information shared is kept confidential in accordance with subpart C of part 1303 and applicable federal, state, local laws.</p>
(1)	<p><u>Memorandum of understanding</u>  To support coordination between Head Start and publicly funded preschool programs, a program must enter into a memorandum of understanding with the appropriate local entity responsible for managing publicly funded preschool programs in the service area of the program, as described in section 642(e)(5) of the A</p>	<p>Our program enters into MOU/collaborative partnerships with publicly funded preschool programs in our funded areas.</p>
(2)	<p><u>Quality Rating and Improvement Systems</u>  A program, with the exception of American Indian and Alaska Native programs, must participate in its state or local Quality Rating and Improvement system (QRIS) if:</p>	<p>Follow Standard</p>
(i)	<p>Its state or local QRIS accepts Head Start monitoring data to document quality indicators included in the state’s tiered system;</p>	<p>Follow Standard</p>

(ii)	Participation would not impact a program’s ability to comply with the Head Start Program Performance Standards; and,	Follow Standard
(iii)	The program has not provided the Office of Head Start with a compelling reason not to comply with this requirement.	Follow Standard
(3)	<p><u>Data systems</u> A program, with the exception of American Indian and Alaska Native programs unless they would like to and to the extent practicable, should integrate and share relevant data with state education data systems, to the extent practicable, if the program can receive similar support and benefits as other participating early childhood programs.</p>	Our program data system and the State Agency are not compatible.
(4)	<p><u>American Indian and Alaska Native programs</u> An American Indian and Alaska Native program should determine whether or not it will participate in the systems described in paragraphs (b)(2) and (3) of this section.</p>	Follow Standard



## 1302 Services to Enrolled Pregnant Women

### **Subpart H –Services to Enrolled Pregnant Women**

1302.80 Enrolled pregnant women.

1302.81 Prenatal and postpartum information, education, and services.

1302.82 Family partnership services for enrolled pregnant women.

Standard	Performance Standard	Plan of Action
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Subpart H	Services to Enrolled Pregnant Women	
<p data-bbox="247 293 367 321"><b>§1302.80</b></p> <p data-bbox="289 367 325 394">(a)</p> <p data-bbox="289 651 325 678">(b)</p>	<p data-bbox="436 293 766 321"><b>Enrolled pregnant women.</b></p> <p data-bbox="436 367 1094 607">Within 30 days of enrollment, a program must determine whether each enrolled pregnant woman has an ongoing source of continuous, accessible health care – provided by a health care professional that maintains her ongoing health record and is not primarily a source of emergency or urgent care – and, as appropriate, health insurance coverage.</p> <p data-bbox="436 651 1094 857">If an enrolled pregnant woman does not have a source of ongoing care as described in paragraph (a) of this section and, as appropriate, health insurance coverage, a program must, as quickly as possible, facilitate her access to such a source of care that will meet her needs.</p>	<ol style="list-style-type: none"> <li data-bbox="1121 331 1864 464">1. Early Head Start Family Service Worker (EHS FSW) will determine whether each enrolled pregnant mom has ongoing source of health care and health insurance within 30 days of enrollment.</li> <li data-bbox="1121 472 1892 1352">2. If a pregnant woman does not have health care and/or health insurance the EHS FSW will work with her to obtain health care and/or health insurance. The following procedures will be followed: <ol style="list-style-type: none"> <li data-bbox="1167 613 1885 672">a. EHS FSW will refer pregnant mom to public health insurance programs, (Medicaid, SCHIP).</li> <li data-bbox="1167 680 1822 769">b. If family is denied for public health insurance, they must provide documentation showing the pregnant mom was denied.</li> <li data-bbox="1167 777 1879 899">c. If the pregnant woman does not have a medical or dental provider, EHS FSW will determine which provider to refer the child/pregnant mom to, based on established agreements with medical and dental providers.</li> <li data-bbox="1167 907 1860 966">d. EHS FSW will contact local community agencies to see if funds are available to help cover cost.</li> <li data-bbox="1167 974 1892 1190">e. Once the EHS FSW has determined no other funds are available and have appropriate documentation, EHS staff will complete a <b>Request for Payment of Services</b> that contains the following information: Pregnant woman’s name, Medical or Dental Provider, type of medical or dental care that is needed and cost of services. The <b>Request for Payment of Services</b> will be forwarded to Head Start Director for approval.</li> <li data-bbox="1167 1198 1871 1352">f. The <b>Request for Payment of Services</b> will be returned to the Health/ Mental Health Manager. Once approved the Health Manager/ Mental Health Manager will meet with pregnant woman and Health care provider to make arrangements for services.</li> </ol> </li> </ol>

Standard	Performance Standard	Plan of Action
<p>(c)</p> <p>(d)</p> <p><b>§1302.81</b></p> <p>(a)</p> <p>(b)</p>	<p>A program must facilitate the ability of all enrolled pregnant women to access comprehensive services through referrals that, at a minimum, include nutritional counseling, food assistance, oral health care, mental health services, substance abuse prevention and treatment, and emergency shelter or transitional housing in cases of domestic violence.</p>	<ol style="list-style-type: none"> <li>1. The Health/ Mental Health Manager and/or the EHS FSW will facilitate access to comprehensive services through referrals that include, but are not limited to:               <ol style="list-style-type: none"> <li>a. Nutritional counseling</li> <li>b. Food assistance</li> <li>c. Oral health care</li> <li>d. Mental health services</li> <li>e. Substance abuse prevention and treatment</li> <li>f. Emergency shelter or transitional housing in cases of domestic violence</li> </ol> </li> </ol>
	<p>A program must provide a newborn visit with each mother and baby to offer support and identify family needs. A program must schedule the newborn visit within two weeks after the infant’s birth.</p>	<ol style="list-style-type: none"> <li>1. The Health/ Mental Manager and/or the FSW will visit each mother and newborn to offer support and identify family needs within two weeks after the infant’s birth.</li> <li>2. The Health/ Mental Manager and/ or the FSW will complete the “Edinburgh Postnatal Depression Scale” and make appropriate referrals if applicable.</li> </ol>
	<p><b>Prenatal and postpartum information, education, and services.</b></p>	<ol style="list-style-type: none"> <li>1. EHS FSW will schedule an initial visit with pregnant woman, fathers, and partners or other relevant family members at enrollment, when applicable and each month throughout the pregnancy until delivery.</li> <li>2. The Health/ Mental Health Manager and/or the EHS FSW will use the Partners for a Healthy Baby curriculum, and Injoy curriculum which includes required information about the following:               <ol style="list-style-type: none"> <li>a. fetal development</li> <li>b. nutrition</li> <li>c. risks of alcohol, drugs and smoking</li> <li>d. labor and delivery</li> <li>e. postpartum recovery</li> <li>f. prenatal depression</li> <li>g. infant care</li> </ol> </li> </ol>
	<p>A program must provide enrolled pregnant women, fathers, and partners or other relevant family members the prenatal and postpartum information, education and services that address, appropriate, fetal development, the importance of nutrition, the risks of alcohol, drugs, and smoking, labor and delivery, postpartum recovery, prenatal depression, infant care and safe sleep practices, and the benefits of breastfeeding.</p>	
<p>A program must also address needs for appropriate supports for emotional well-being, nurturing and responsive caregiving, and father engagement during pregnancy and early childhood.</p>		

Standard	Performance Standard	Plan of Action
<p>§1302.82</p> <p>(a)</p>	<p><b>Family partnership services for enrolled pregnant women.</b></p> <p>A program must engage enrolled pregnant women and other relevant family members, such as fathers, in the family partnership services, as described in §1302.52 and include a specific focus on factors that influence prenatal and postpartum maternal and infant health.</p>	<ul style="list-style-type: none"> <li>h. safe sleep practices</li> <li>i. benefits of breastfeeding</li> <li>j. supports for emotional well-being</li> <li>k. nurturing and responsive care giving</li> <li>l. father engagement during pregnancy and early childhood</li> </ul> <ol style="list-style-type: none"> <li>3. When a pregnant woman enrolls in a later trimester all prior topics will be shared with the pregnant mom with an emphasis on required information.</li> <li>4. All visits will be documented on <b>Pregnant Moms Tracking</b>.</li> </ol> <ol style="list-style-type: none"> <li>1. The EHS FSW will complete a 1 time <b>Family Partnership Agreement</b> with the pregnant woman and other relevant family members at 1 month from entry date.</li> <li>2. The <b>Family Partnership Agreement</b> will include goals, strategies for meeting the goals, time tables for meeting the goals, progress notes and a signed and dated form showing when the “Family Partnership Agreement” was established. All the above forms will be filed in the Family file. Focus factors in this agreement will be prenatal and postpartum maternal and infant health.</li> <li>3. Every effort will be made to build a good relationship with each family in order to establish mutual trust between Early Head Start and the pregnant mom and relevant family members.</li> <li>4. The EHS FSW will follow-up with the pregnant woman monthly according to the time tables set by pregnant woman to update and document progress in meeting strategies – goals until no longer enrolled.</li> </ol>

<b>Standard</b>	<b>Performance Standard</b>	<b>Plan of Action</b>
(b)	A program must engage enrolled pregnant women and other relevant family members, such as fathers, in discussions about program options, plan for the infant's transition to program enrollment, and support the family during the transition process, where appropriate.	<ol style="list-style-type: none"> <li>1. The EHS FSW will complete a <b>Pregnant Mom's Transition</b> form with the enrolled pregnant woman and other relevant family members at the 8 months visit.</li> <li>2. Family will be supported during this transition process.</li> </ol>





# Part 1302 Human Resources Management

## **Subpart I – Human Resources Management**

- 1302.90 Personnel Policies.
- 1302.91 Staff qualifications and competency requirements.
- 1302.92 Training and professional development.
- 1302.93 Staff health and wellness.
- 1302.94 Volunteers.

Standard	Performance Standard	Plan of Action
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Subpart I	<b>Human Resources Management</b>	
<p><b>§1302.90</b></p> <p>(a)</p> <p>(b)</p> <p>(1)</p> <p>(i)</p> <p>(ii)</p>	<p><b>Personnel policies.</b></p> <p><u>Establishing personnel policies and procedures.</u> A program must 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.</p> <p><u>Background checks and selection procedures.</u></p> <p>Before a person is hired, directly or through contract, including transportation staff and contractors, a program must conduct an interview, verify references, conduct a sex offender registry check and obtain one of the following:</p> <p>State or tribal criminal history records, including fingerprint checks; or,</p> <p>Federal Bureau of Investigation criminal history records, including fingerprint checks.</p>	<p><b>Hiring Procedures:</b></p> <ol style="list-style-type: none"> <li>1. As soon as a position becomes available, we advertise on INDEED, CVCOG Website, Texas Workforce Website, and post flyers throughout the communities and Head Start Centers. Also advertise by word of mouth, newspaper, and other job boards as necessary.</li> <li>2. All applicants will be listed on the “<b>Employee Screening Tool</b>”.</li> <li>3. Before a person is hired, directly or through contract a program must verify a total of <b>2-3</b> personal or job-related references;</li> <li>4. Before a person is hired, directly or through contract a program must conduct an interview unless otherwise directed by Program Director; Policy Council screening committee members will be invited to participate in the screening and interview process.</li> <li>5. HR provides recommendation letter for hire to the CVCOG Executive Director and Finance Director for approval;</li> <li>6. HR provides applicant with offer letter contingent to meeting program requirements and policy council approval;</li> <li>7. Conduct the Central Registry Check, DFPS and FBI Check.</li> <li>8. Once applicant receives fingerprint notification (portion of the FBI check) applicant must set up an appointment and notify HR of appointment to pay for the fingerprints.</li> <li>9. Head Start Administration will receive eligible, ineligible, provisional status or risk evaluation (see Risk Evaluation Process on pg 2.) and forward to HR;</li> <li>10. Complete USDA Authentication</li> <li>11. Upon return of eligible status establish hire date and complete new hire paperwork.</li> </ol>

Standard	Performance Standard	Plan of Action
<p>(2)</p> <p>(i)</p> <p>(ii)</p> <p>(3)</p> <p>(4)</p> <p>(5)</p>	<p>A program has 90 days after an employee is hired to complete the background check process by obtaining:</p> <p>Whichever check listed in paragraph (b)(1) of this section was not obtained prior to the date of hire; and,</p> <p>Child abuse and neglect state registry check, if available.</p> <p>A program must review the information found in each employment application and complete background check to assess the relevancy of any issue uncovered by the complete background check including any arrest, pending criminal charge, or conviction and must use Child Care Development Fund (CCDF) disqualification factors described in 42 U.S.C. 9858f(c)(1)(d) and 42 U.S.C. 9858(h)(1) or tribal disqualifications factors to determine whether the prospective employee can be hired or the current employee must be terminated.</p> <p>A program must ensure a newly hired employee, consultant, or contractor does not have unsupervised access to children until the complete background check process described in paragraphs (b)(1) through (3) of this section is complete.</p> <p>A program must conduct the complete background check for each employee, consultant, or contractor at least once every five years which must include each of the four checks listed in paragraphs (b)(1) and (2) of this section, and review and make employment</p>	<p>12. If a risk evaluation is required see Risk Evaluation Procedure.</p> <p>13. Next available policy council meeting present change form including all new hires, and status changes for approval.</p> <p>14. For those not approved by Policy council, employment will terminate immediately.</p> <p>Not Applicable</p> <p><b>Background Requirements:</b></p> <p>1. We review the completed background checks to ensure there are no disqualifying factors before the prospective applicant is hired.</p> <p>Risk Evaluation Procedure</p> <p>1. Programs will ensure a newly hired employee, consultant, or contractor does not have unsupervised access to children until the complete background check process is complete. Upon notification of risk evaluation, programs will know if the employee, consultant, or contractor are allowed around or not allowed around children.</p> <p>2. Applicant has 5 business days to complete their portion of the risk evaluation process.</p> <p>3. Continuation of contingent employment will be decided on by the Head Start Director by the end of 15 business days.</p> <p>1. HR will monitor when initial background checks are submitted. Within 60 days of a background check reaching the 5 year mark, HR will submit a new check via the CVCOG Head Start Background check process. Upon return of eligible, ineligible, provisional, or notification of Risk</p>

Standard	Performance Standard	Plan of Action
	<p>decisions based on the information as described in paragraph (b)(3) of this section, unless the program can demonstrate to the responsible HHS official that it has a more stringent system in place that will ensure child safety.</p>	<p>Evaluation, Head Start Admin will notify HR for record retention and notification of continuation or termination of employment.</p> <p>*Per CVCOG Policy, Employees are required to report any arrest or incarceration as soon as possible, following an incident. Depending on the offense and potential negative impact on CVCOG’s position in the community, CVCOG reserves the right to apply the disciplinary process up to and including suspension or termination during the incarcerated time period or during an investigation. If a resulting guilty charge or verdict does not meet CVCOG or Head Start background requirements, CVCOG will process a termination.</p>
(6)	A program must consider current and former program parents for employment vacancies of which such parents apply and are qualified.	<ol style="list-style-type: none"> <li>1. We will consider current and former program parents for employment vacancies for which such parents apply and are qualified. Applicants will have the opportunity to voluntarily identify if they are a parent on the application.</li> </ol>
(c)	<u>Standards of conduct.</u>	
(1)	A program must ensure all staff, consultants, contractors, and volunteers abide by the program’s standards of conduct that:	
(i)	Ensure staff, consultants, contractors, and volunteers implement positive strategies to support children’s well-being and prevent and address challenging behavior	<ol style="list-style-type: none"> <li>1. We will have all staff, consultants, contractors, and volunteers sign and abide by the program’s <b>Standard of Conduct and Discipline and Guidance</b></li> </ol>
(ii)	Ensure staff, consultants, contractors, and volunteers do not maltreat or endanger the health or safety of children, including, at a minimum, that staff must not:	<ol style="list-style-type: none"> <li>2. There will be ongoing monitoring to ensure the standards of conduct are being met.</li> <li>3. There will be training on Conscious Discipline at pre-service and throughout the year by Site Supervisors, <b>as needed.</b></li> </ol>

Standard	Performance Standard	Plan of Action
(A)	Use corporal punishment;	
(B)	Use isolation to discipline a child;	
(C)	Bind or tie a child to restrict movement or tape a child's mouth;	
(D)	Use or withhold food as a punishment or reward;	
(E)	Use toilet learning/training methods that punish, demean, or humiliate a child;	
(F)	Use any form of emotional abuse, including public or private humiliation, rejecting, terrorizing, extended ignoring, or corrupting a child';	
(G)	Physically abuse a child;	
(H)	Use any form of verbal abuse, including profane, sarcastic language, threats, or derogatory remarks about the child or child's family; or,	
(I)	Use physical activity or outdoor time as a punishment or reward;	
(iii)	Ensure staff, consultants, contractors, and volunteers respect and promote the unique identity of each child and family and do not stereotype on any basis, including gender, race, ethnicity, culture, religion, disability, sexual orientation, or family composition;	
(iv)	Require staff, consultants, contractors, and volunteers to comply with program confidentiality policies concerning personally identifiable information about	1. We will have staff, consultants, contractors, and volunteers sign and abide by the program's <b>Confidentiality of Policies and Procedures.</b>

Standard	Performance Standard	Plan of Action
(v)	<p>children, families, and other staff members in accordance with subpart C of part 1303 of this chapter and applicable federal, state, local, and tribal laws; and,</p> <p>Ensure no child is left alone or unsupervised by staff, consultants, contractors, or volunteers wild under their care.</p>	
(2)	<p>Personnel policies and procedures must include appropriate penalties for staff, consultants, and volunteers who violate the standards of conduct.</p>	<p>1. The <b>Standard of Conduct, Code of Conduct and Professional Ethics, and Confidentiality of Policies and Procedures</b> all include a statement that if violated it may result disciplinary action including termination.</p>
(d)	<p><u>Communication with dual language learners and their families.</u></p>	
(1)	<p>A program must ensure staff and program consultants or contractors are familiar with the ethnic backgrounds and heritages of families in the program and we are able to serve and effectively communicate, either directly or through interpretation and translation, with children who are dual language learners and to the extend feasible, with families with limited English proficiency.</p>	<p>1. We ensure staff and program consultants or contractors are familiar with the ethnic backgrounds and heritages of families in our program.</p> <p>2. We ensure we are able to serve and effectively communicate, either directly or through interpretation and translation. If the majority of children in a class speak the same language, at least one class staff member will speak the same language, when available.</p>
(2)	<p>If a majority of children in a class or home-based program speak the same language, at least one class staff member or home visitor must speak such language.</p>	<p>1. Head Start Administration verifies initial required trainings with site supervisors within 5 business days of employment to ensure all staff, consultants, and contractors engaged in the delivery of program services have the knowledge, training, experience and competencies to fulfill the roles and responsibilities of their position to ensure high-quality service delivery in accordance with the program performance standards.</p>

Standard	Performance Standard	Plan of Action
<p><b>§1302.91</b></p> <p>(a)</p> <p>(b)</p> <p>(c)</p>	<p><b>Staff qualifications and competency requirements.</b></p> <p><u>Purpose.</u> A program must ensure all staff, consultants, and contractors engaged in the delivery of program services have sufficient knowledge, training and experience, and competencies to fulfill the roles and responsibilities of their position to ensure high-quality service delivery in accordance with the program performance standards. A program must provide ongoing training and professional development to support staff in fulfilling their roles and responsibilities.</p> <p><u>Early Head Start or Head Start director.</u> A program must ensure an Early Head Start or Head Start director hired after November 7, 2016, has, at a minimum, a baccalaureate degree and experience in supervision of staff, fiscal management, and administration.</p> <p><u>Fiscal officer.</u> A program must assess staffing needs in consideration of the fiscal complexity of the organization and applicable financial management requirements and secure the regularly scheduled or ongoing services of a fiscal officer with sufficient education and experience to meet their needs. A program must ensure a fiscal officer hired after November 7, 2016, is a certified public accountant or has, at a minimum, a baccalaureate degree in accounting, business, fiscal management, or a related field.</p>	<p>2. We will provide professional development and ongoing training to support staff in fulfilling their roles and responsibilities.</p> <p>1. The program ensures ensure all staff, consultants, and contractors meet the qualifications to fulfill their role.</p> <p>2. We verify by checking ids/ or badges.</p> <p>Follow standard</p> <p>Follow standard</p>

Standard	Performance Standard	Plan of Action
(d)	<u>Child and family services management staff qualification requirements.</u>	Follow standard
(1)	<u>Family, health, and disabilities management.</u> A program must ensure staff responsible for management and oversight of family services, health services, and services to children with disabilities hired after November 7, 2016 have, at a minimum, a baccalaureate degree, preferably related to one or more of the of the disciplines they oversee.	Follow standard
(2)	<u>Education management.</u> As prescribed in section 648A(A)(2)(B)(i) of the Act, a program must ensure staff and consultants that serve as education managers or coordinators, including those that serve as curriculum specialist, have a baccalaureate or advanced degree in childhood education or a baccalaureate or advanced degree and equivalent coursework in early childhood education with early education teaching experience.	Follow standard
(e)	<u>Child and family services staff.</u>	
(1)	<u>Early Head Start center-based teacher qualification requirements.</u> As prescribed in section 645A(h) of the Act, a program must ensure center-based teachers that provide direct services to infants and toddlers in Early Head Start centers have a minimum of a Child Development Associate (CDA) credential or comparable credential, and have been trained or have equivalent coursework in early childhood with a focus on infant and toddler development.	<ol style="list-style-type: none"> <li>1. Our objective is to hire Early Head Start teachers that provide direct services to infants and toddlers who have the qualifications outlined in 645A(h) of the Head Start Act.</li> <li>2. An Early Head Start teacher or applicant for teacher, may have a preschool CDA upon hiring, and must complete 3 college credit hours, 5 CEUs or 50 clocks of training specific to infant and toddler development within 45 days.</li> <li>3. If we have attempted unsuccessfully to recruit a classroom teacher without credentials, we may hire a classroom</li> </ol>



Standard	Performance Standard	Plan of Action
(2)	<p><u>Head Start center-based teacher qualification requirements.</u></p> <p>(i) The Secretary must ensure no less than fifty percent of all Head Start teachers, nationwide, have a baccalaureate degree in child development, early childhood education, or equivalent coursework.</p> <p>(ii) As prescribed in section 648A(a)(3)(B) of the Act, a program must ensure all center-based teachers have at least an associate's or bachelor's degree in child development or early childhood education, equivalent coursework, or otherwise meet the requirements of section 648A(a)(3)(B) of the Act.</p>	<p>teacher with the understanding that a CDA or a state-awarded certificate will be obtained within one year.</p> <ol style="list-style-type: none"> <li>1. Our objective is to hire Head Start teachers who have the qualifications outlined in 648A(a)(3)(B); an associate's or bachelor's degree in child development or early childhood education, <b>or related degree with</b> equivalent coursework.</li> <li>2. If an applicant for teacher does not have a degree in child development or early childhood education, they could have an associate's or bachelor's degree in a related field and coursework equivalent to a major relating to early childhood education with experience teaching preschool age children.</li> <li>3. Coursework equivalent to a major (18 college credit hours) related to early childhood education includes but is not limited to courses that focus on child development, early childhood education and curriculum, early childhood teaching and assessment, psychology, family development, health and physical development, mathematics, science and children's literature.</li> <li>4. Each applicant for teacher will be asked to provide a copy of their degree certification and/or if applicable, will provide copies of their college transcripts, course descriptions and/or syllabi to determine that their courses address early childhood education or child development with a focus on children ages 3 to 5.</li> <li>5. If we have attempted unsuccessfully to recruit a classroom teacher who has an associate's degree or a bachelor's degree, we will ensure each Head Start classroom has a teacher who has at minimum a CDA credential or a state-awarded certificate for preschool teachers that meet or exceed the requirements for a CDA credential and is enrolled in an associate's degree program. We will request a waiver from our regional office for these teachers.</li> </ol>

Standard	Performance Standard	Plan of Action
(3)	<p><u>Head Start teacher assistant qualification requirements.</u> As prescribed in section 648A(a)(2)(B)(ii) of the Act, a program must ensure Head Start teacher assistant, at a minimum, have a CDA credential or a state-awarded certificate that meets or exceeds the requirements for a CDA credential, are enrolled in a program that will lead to an associate or baccalaureate degree or, are enrolled in a CDA credential program to be completed within two years.</p>	<p>6. If we have attempted unsuccessfully to recruit a classroom teacher <b>with appropriate</b> credentials, we may hire a classroom teacher with the understanding that a CDA or a state-awarded certificate will be obtained within one year and they must enroll in an institution that offers an associate degree in Early Childhood Education. We will request a waiver from regional office for these teachers.</p> <p>1. Our objective is to hire Head Start teacher assistant who have the qualification outlined in 648A(2)(B)(ii) of the Head Start Act.</p> <p>2. If a teacher assistant does not have a Child Development Credential at the time they are hired, they must obtain their CDA no later than 2 years from their hire date.</p> <p><b>1. For teachers and teacher assistants that do meet qualifications for their position a Professional Development Plan will be initiated and up-dated no less than quarterly until they have obtained the appropriate credential.</b></p> <p><b>2. If teachers or teacher assistants fail to make progress toward their credential or do not meet deadlines outlined in their PDP, disciplinary actions will be taken; disciplinary action could include termination.</b></p>
(4)	<p><u>Family child care provider qualification requirements.</u></p>	Not Applicable
(i)	<p>A program must ensure family child care providers have previous early child care experience and, at a minimum, are enrolled in a Family Child Care CDA program or state equivalent, or an associate's or baccalaureate degree program in child development or early childhood education prior to beginning service</p>	

Standard	Performance Standard	Plan of Action
(ii)	<p>provision, and for the credential acquire it within eighteen months of beginning to provide services.</p> <p>By August 1, 2018, a child development specialist, as required for family child care in §1302.23(e), must have, at a minimum, a baccalaureate degree in child development, early childhood education, or a related field.</p>	Not Applicable
(5)	<p><u>Center-based teachers, teacher assistant, and family child care provider competencies.</u> A program must ensure center-based teachers, teacher assistant, and family child care providers demonstrate competency to provide effective and nurturing teacher-child interactions, plan and implement learning experiences that ensure effective curriculum implementation and use of assessment and promote children’s progress across the standards described in the <u>Head Start Early Learning Outcomes Framework: Ages Birth to Five</u> and applicable state early learning and development standards, including for children with disabilities and dual language learners, as appropriate.</p>	<ol style="list-style-type: none"> <li>1. Teachers and Teacher Assistants are provided training on effective and nurturing teacher-child interactions and they are observed at least 2 times a year using the Classroom Assessment Scoring System.</li> <li>2. Teachers and Teacher Assistants are provided training on planning and implementing lesson plans guided by our curriculum.</li> <li>3. Teachers and Teacher Assistants are provided training on the use of Teaching Strategies GOLD and CLI Engage for assessing children’s abilities and progress and on using assessment data to individualize for each child.</li> <li>4. Teachers and Teacher Assistants are provided training on our program school readiness goals and how they are aligned with the Head Start Early Learning Outcomes Framework: Ages Birth to Five and their relationship to the state early learning standards.</li> <li>5. When necessary, the coach will provide individual support.</li> </ol>
(6)	<p><u>Home visitors.</u> A program must ensure home visitors providing home-based education services:</p>	Not Applicable
(i)		

Standard	Performance Standard	Plan of Action
(ii)	<p>Have a minimum of a home-based CDA credential or comparable credential, or equivalent coursework as part of an associate’s or bachelor’s degree; and,</p> <p>Demonstrate competency to plan and implement home-based learning experiences that ensure effective implementation of the home visiting curriculum and promote children’s progress across the standards described in the <u>Head Start Early Learning Outcomes Framework: Ages Birth to Five</u>, including for children with disabilities and dual language learners, as appropriate, and to build respectful, culturally responsive, and trusting relationships with families.</p>	
(7)	<p><u>Family services staff qualification requirements.</u> A program must ensure staff who work directly with families on the family partnership process hired after November 7, 2016, have within eighteen months of hire, at a minimum, a credential or certification in social work, human services, family services, counseling or a related field.</p>	<p>1. Family Service workers will obtain their Family Service Credential Certification within 18 months of starting their position.</p> <p>2. The FSC will be taught by the certified FSC instructor on staff or they will attend a class to obtain their credential.</p>
(8)	<p><u>Health professional qualification requirements.</u></p>	
(i)	<p>A program must ensure health procedures are performed only by a licensed or certified health professional.</p>	<p>Follow Standard</p>
(ii)	<p>A program must ensure all mental health consultants are licensed or certified mental health professionals, A program must use mental health consultants with knowledge of and experience in serving young children and families, if available in the community.</p>	<p>Follow Standard</p>

Standard	Performance Standard	Plan of Action
(iii)	A program must use staff or consultants to support nutrition services who are registered dietitians or nutritionists with appropriate qualifications.	Follow Standard
(f)	<u>Coaches.</u> A program must ensure coaches providing the services described in 1302.92(c) have a minimum of a baccalaureate degree in early childhood education or a related field.	Follow Standard
<b>§1302.92</b>	<b>Training and professional development.</b>	
(a)	A program must provide to all new staff, consultants, and volunteers an orientation that focuses on, at a minimum, the goals and underlying philosophy of the program and on the way, they are implemented.	Follow Standard
(b)	A program must establish and implement a systematic approach to staff training and professional development designed to assist staff in acquiring or increasing the knowledge and skills needed to provide high-quality, comprehensive services within the scope of their job responsibilities, and attached to academic credit as appropriate. At a minimum, the system must include:	Follow Standard
(1)	Staff completing a minimum of 15 clock hours of professional development per year. For teaching staff, and professional development must meet the requirements described in section 648A(a)(5) of the Act.	Follow Standard

Standard	Performance Standard	Plan of Action
(2)	Training on methods to handle suspected or known child abuse and neglect cases, that comply with applicable federal, state, local, and tribal laws;	Follow Standard
(3)	Training for child and family services staff on best practices for implementing family engagement strategies in a systemic way, as described throughout this part;	
(4)	Training for child and family services staff, including staff that work on family services, health, and disabilities, that builds their knowledge, experience, and competencies to improve child family outcomes; and,	
(5)	Research-based approaches to professional development for education staff, that are focused on effective curricula implementation, knowledge of the content in <u>Head Start Family Learning Outcomes Framework: Ages Birth to Five</u> , partnering with families, supporting children with disabilities and their families, providing effective and nurturing adult-child interactions, supporting dual language learners as appropriate, addressing challenging behaviors, preparing children and families for transitions (as described in subpart G of this part), and use of data to individualize learning experiences to improve outcomes for all children.	
(c)	A program must implement a research-based, coordinated coaching strategies for education staff.	
		<ol style="list-style-type: none"> <li>1. We will provide practiced based coaching to education staff that needs individual, intensive support.</li> <li>2. All education staff receives ongoing professional development support throughout the year and opportunities to meet with peers and observe modeling in the classroom; management staff also provides onsite visits to provide instruction and modeling.</li> </ol> <ol style="list-style-type: none"> <li>1. We will provide practice-based coaching for education staff when appropriate.</li> </ol>

Standard	Performance Standard	Plan of Action
(1)	Assesses all education staff to identify strengths, areas of needed support, and which staff would benefit most from intensive coaching;	1. All education staff will complete a <b>Needs Assessment</b> at the beginning of the school year and again at the beginning of the spring semester.
(2)	At a minimum, provides opportunities for intensive coaching to those education staff identified through the process in paragraph (c)(1) of this section, including opportunities to be observed and receive feedback and modeling of effective teacher practices directly related to program performance goals;	1. We will implement Practiced Based Coaching; which is establishing collaborative partnerships, shared goals and action planning, focused observations, reflection and feedback, and review and practice, for those teaching staff with an identified need and if, applicable new teachers in our program.
(3)	At a minimum, provides opportunities for education staff not identified for intensive coaching through the process in paragraph (c)(1) of this section to receive other forms of research-based professional development aligned with program performance goals;	1. We will provide professional development opportunities for teaching staff not identified for intensive coaching. 2. All teaching staff will receive ongoing professional development, support throughout the year and opportunities to meet with peers and onsite visits from management staff to provide instruction and modeling.
(4)	Ensures intensive coaching opportunities for the staff identified through the process in paragraph (c)(1) of this section that:	Follow Standard
(i)	Align with the program’s school readiness goals, curricula, and other approaches to professional development;	Follow Standard
(ii)	Utilize a coach with adequate training and experience in adult learning and in using assessment data to drive coaching strategies aligned with program performance goals;	Follow Standard
(iii)	Provide ongoing communication between the coach, program director, education director, and any other relevant staff; and,	Follow Standard

Standard	Performance Standard	Plan of Action
<p>(iv)</p> <p>(5)</p> <p>(d)</p> <p><b>§1302.93</b></p> <p>(a)</p>	<p>Include clearly articulated goals informed by the program’s goals, as described in §1302.102, and a process for achieving those goals; and,</p> <p>Established policies that ensure assessment results are not used to solely determine punitive actions for staff identified as needing support, without providing time and resources for staff to improve.</p> <p>If a program needs to develop or significantly adapt their approach to research-based professional development to better meet the training needs of education staff, such that it does not include the requirements in paragraph (c) of this section, the program must partner with external early childhood education professional development experts. A program must assess whether the adaptation adequately supports staff professional development, consistent with the process laid out in subpart J of this part.</p> <p><b>Staff health and wellness.</b></p> <p>A program must ensure each staff member has an initial health examination and a periodic re-examination as recommended by their health care provider in accordance with state, tribal, or local requirements, that include screeners or tests for communicable diseases, as appropriate. The program must ensure staff do not, because of communicable diseases, pose a significant risk to the health or safety of others in the program that cannot be eliminated or reduced by reasonable accommodation, in accordance</p>	<p><b>Policy:</b></p> <ol style="list-style-type: none"> <li>We have an established agreement. <b>“See Coaching Agreement”</b>.</li> <li>Our Coaching Implementation Plan states that assessment results for staff identified as needing support are not used to solely determine punitive actions; staff are provided time and support for improvement.</li> </ol> <p>Follow Standard</p> <ol style="list-style-type: none"> <li>Staff must have an Initial Physical and TB test before entering the classroom.</li> <li>Physicals and <b>TB test</b> are renewed every 3 years.</li> </ol>



Standard	Performance Standard	Plan of Action
<p>(b)</p> <p><b>§1302.94</b></p> <p>(a)</p> <p>(b)</p>	<p>with the Americans with Disabilities Act and section 504 of the Rehabilitation Act.</p> <p>A program must make mental health and wellness information available to staff regarding health issues that may affect their job performance, and must provide regularly scheduled opportunities to learn about mental health, wellness, and health education.</p> <p><b>Volunteers.</b></p> <p>A program must ensure regular volunteers have been screened for appropriate communicable diseases in accordance with state, tribal or local laws. In the absence of state, tribal, and local law, the Health Services Advisory Committee must be consulted regarding the need for such screenings.</p> <p>A program must ensure children are never left alone with volunteers.</p>	<p>1. We have a Mental Health Professional on contract.</p> <p>1. Volunteers are required to get a TB test if they volunteer 8 hours a week or more.</p> <p>1. Regular volunteers will never be left alone with children unless they are trained as caregivers.</p>

# Memo

**To:** Executive Committee

**From:** Carolina Raymond – Director of Head Start

**Date:** 6/14/2023

**Re:** CONSIDER AND TAKE APPROPRIATE ACTION – ITEM 11

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## ITEM 11

Carolina Raymond, Director of Head Start, is seeking consideration and approval of the following Implementation Plans.

- a. 1301 Program Governance
- b. 1302 Subpart A ERSEA/ Program Operations
- c. 1302 Subpart C Education and Child Development
- d. 1302 Subpart D Health Program Services
- e. 1302 Subpart E Family and Community Engagement
- f. 1302 Subpart H Services to Enrolled Pregnant Women
- g. 1302 Subpart I Human Resources

*Approved at the Executive Committee Meeting on June 14, 2023.*



**CONCHO VALLEY**  
COUNCIL OF GOVERNMENTS



# Self-Assessment Report

## 2023-2024

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Head Start/Early Head Start Program Director Approval

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Date

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Head Start Policy Council Chairman Approval

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Date

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Executive Board Chairman Approval

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Date

*Approved at the Policy Council May 10, 2023, and Executive Committee Meeting on June 14, 2023.*

# Self -Assessment Report

## Concho Valley Council of Government Head Start/Early Head Start Program Self-Assessment Report Date: 2022-2023

Annually, Head Start/Early Head Start program must conduct a Self-Assessment of their effectiveness and progress in meeting program goals and objectives and implementing Federal Regulations. The Self-Assessment must measure the agency's strengths and areas for growth, allowing for continuous improvement of the program to increase impact for children, families, and communities.

### Section I: Introduction

#### Program Description

CVCOG Head Start / Early Head Start is a program of the Concho Valley Council of Governments. It is a long-standing program, operating since July 2004. Our funded program serves 411 Head Start Students, 112 Early Head Start Students, and 8 Pregnant Moms, and its demographics are as followed:

Head Start Early Head Start	City/County	Location	Duration -5 Day 1020 Annual Hours HS 1380 Annual Hours EHS	Enrollment
Blackshear HS	San Angelo Tom Green County	Center Based	7:45-1:45 HS	Head Start 102 Early Head Start 0 Pregnant Moms 0
Day HS/EHS	San Angelo Tom Green County	Center Based	7:45-1:45 HS 7:45-2:15 EHS	Head Start 102 Early Head Start 72 Pregnant Moms 0
Rio Vista HS/EHS	San Angelo Tom Green County	Center Based	7:45-1:45 HS 7:45-2:15 EHS	Head Start 119 Early Head Start 40 Pregnant Moms 8
Christoval HS	Christoval Tom Green County	School Based	7:45-1:45 HS	Head Start 20 Early Head Start 0 Pregnant Moms 0
Eden HS	Eden Concho County	Center Based	7:45-1:45 HS	Head Start 17 Early Head Start 0 Pregnant Moms 0
Eldorado HS	Eldorado Schleicher County	Center Based	7:45-1:45 HS	Head Start 17 Early Head Start 0 Pregnant Moms 0
Menard HS/EHS	Menard Menard County	Center Based	7:45-1:45 HS 7:45-2:15 EHS	Head Start 17 Early Head Start 8 Pregnant Moms 0
Ozona HS	Ozona Crocket County	Center Based	7:45-1:45 HS	Head Start 17 Early Head Start 0 Pregnant Moms 0

## Program Goals

The CVCOG Head Start/Early Head Start program has identified broad program and school readiness goals for its 4<sup>th</sup> grant year period. We have decided to focus on these three broad goals, which are the following:

### Goal 1

Provide education materials, training, and events to promote positive mental health for parents, students, and Head Start staff.

### Goal 2

Design improvements for monitoring through program content areas to ensure compliance with all federal and state guidelines.

### Goal 3

Promote an inclusive and diverse environment where students, families, and community partners feel welcome and engaged within the program.

## Context for Self-Assessment

CVCOG Head Start/Early Head Start is in the 4<sup>th</sup> year of a 5-year grant cycle beginning June 2022 and ending May 2023. The Self-Assessment is conducted in the same timeline as the Fiscal Year and the Grant Year. Prior to this year's self-assessment, the CVCOG Head Start Admin Team began by reviewing last year's self-assessment report. We determined three key recommendations for this year's process:

- Allow more time at the end of the process for the CVCOG Administrative team to consolidate and compare data. Examine insights from all content areas that can lead to common themes across the program.
- Combine and use data from all program monitoring, evaluations, and audits conducted to develop, explore, and expose strengths and weakness throughout the program.
- Use insight of the Policy Council for innovative data collection measures.

We have completed the following process in preparation of our programs self-assessment:

1. Updated our community assessment for the 2022-2023 program year. Results were approved by both the Policy Council and Executive Board.
2. Discussed data collection in the December 2022 Policy Council Meeting and got approval of schedule in January 2023.
3. Review and updated content area evaluations per content area manager.
4. Administration meetings to setup schedule and implementation as well as Site Supervisor training on Self-Assessment application.

## Administrative Team

Each Administrative team member played part in the planning and evaluation of all materials. We have had no changes to administrative staff in the 2022-2023 school year and currently carry seven administrative positions which are as follows:

Carolina Raymond	Program Director
Stephanie Hernandez	Program Assistant Director Early Head Start Education Manager
Mary Husted	Compliance/Nutrition Manager
Ofelia Barron	ERESA Manager
Stacy Walker	Family Education/Community Engagement Manager
Melissa Miranda	Health/Mental Health Manager
Cheryl Mayberry	Education/Disability Manager

## Section II: Methodology

### Design and Team Members

The self-assessment results serve as a driving force in setting program goals that will advance the program's services and acknowledge program successes. In conducting the self-assessment, program staff worked collaboratively with policy council members, and community representatives on the self-assessment team to improve services for enrolled children and families.

#### 1. Design Process

- a. Designed and discussed among our Administration Staff and Policy Council.
- b. The team included: Program Director, Head Start Administrative team, Policy Council, Executive Committee Members, Community Partners, and Staff Members.

#### 2. Engage the Team

- a. Training took place in-person, zoom, and by email among the team that outlined our new self-assessment procedures led by Stacy Walker, FAMCO Manager. Training included a definition of the self-assessment, a review of the Head Start Performance Standards and Acts, Google survey entry, and Self-Assessment schedule.
- b. Self-Assessment data was gathered by paper documents, google forms, and CATScan booklets.

#### 3. Analyze/Dialogue

- a. Data was compiled and prepared for review. The administrative team verified the completion of all documents and tools provided for authenticity.
- b. The self-assessment team met to analyze, discuss, and prioritize information provided from the collection tools.

#### 4. Recommendations

- a. Administrative team determined priorities for strengthening the program based on recommendations provided by the tools listed below.
- b. Goals will be identified and action steps and timelines developed. Program goals will be monitored quarterly and recorded

## Time Frame

A timeline was developed to complete the self-assessment, including dates, times, and staff completing specific forms. FAMCO Manager used this timeline to ensure the self-assessment process was completed. See below for the chart listing events associated with the self-assessment process and timelines:

Date	Timeline Item
December 2022	Discussion of Collection Methods with Policy Council
January 2023	Planning Meeting Administrative Staff
January 2023	Administrative Review of Content Material
February 16 <sup>th</sup> 2023	Presentation of Self-Assessment Plan and Training to Staff
February/March 2022	Assessment Completion Date
February/March 2023	Gather/Analyze Data
March 27 <sup>th</sup> 2023	Administration Development of Self-Assessment Goals
April 12 <sup>th</sup> 20223	Preliminary Goals presented to Policy Council and Executive Committee
April 13 <sup>th</sup> -28 <sup>th</sup> 2023	Completion of the Self-Assessment Report
May 10 <sup>th</sup> 2023	Submit Report to Policy Council/Executive Committee for Approval
23-24 Calendar Year	Triannual Goal Review
February 2024	Submit Report with Grant Application

## Data Collection Tools

Data collection tools used in the Self-Assessment process include the following:

1. Community Assessment
  - Describes the context in which Head Start and Early Head Start programs operate and is useful for ensuring correct services are provided to the appropriate population.
2. CatScan Comprehensive Approach and Tool
  - It is designed to help programs with the process of building and implementing a compliant self-assessment.
3. Google Content Surveys
  - Content area-based questions received by google survey that reflect compliance and comprehension of Head Start Standards and Implementations.
4. Teaching Strategies
  - An authentic, ongoing observational system for assessing children from birth through kindergarten. It observes children in the context of every day experiences.
5. Federal File Audits
  - Content area audits conducted on Federal files and Family Service Files to make sure the program is in compliance with program standards.
6. CLASS Scores
  - It is a tool for observing and assessing the effectiveness of interactions among teachers and students in the classrooms. Measuring the following: emotional, organizational, and instructional support that contribute to a child's development.
7. CLI Engage
  - Comprehensive professional development, assessment, and quality improvement platform for early care and education programs in Texas.

8. Paper Surveys

- Paper survey that requires written responses by participants.

9. CACFP Monitoring Review

- Nutritional report that evaluates record-keeping, training, meal analysis, civil rights, and meal service.

10. ChildPlus

- A data collecting software program that allows data entry, applications, and reports across all content areas.

11. Family Partnership

- Meetings with families that analyzes family outcomes, needs, referrals, and goal development strategies.

### Section III: Key Insights

**ADMINISTRATION** -Results from this area will include data from the following fields: 1302 B Program Structure, 1302 I Human Resources, 1302 J Program Management and Quality Improvement, 1303 A Financial Administration Requirements, 1303 B Administrative Requirements, 1303 C Protection for the Privacy of Child Records, 1303 D Delegation of Program Operations, 1303 E Facilities, Program Compliance Monitoring, Federal File Audits

**Program Strengths**

1. Maintaining classroom ratios within the 3- and 4-year-old classrooms.
2. Communication of program goals with Executive Committee and Policy Council.
3. Succession plan to provide training for new Finance Manager.
4. Implementation of annual EEO training for all staff and semi-annual training for supervisors and managers for EEO to create a more equitable workplace.

**Systemic Issues**

1. Development of Dual Language Learner tracking system.
2. Review Monitoring Protocols for the program.
3. Produce Procedures for consultants, contractors and volunteers to comply with program, children, and family confidentiality.
4. Write Implementation 1303 C Protection for the Privacy of Child Records Implementations.

**Non-Compliance**

**ERSEA (Program Enrollment)/Transitions** - Results from this area will include data from the following fields: 1302 A Eligibility Recruitment Selection Enrollment, 1302 G Transitions, Google Surveys, ChildPlus Attendance Data

**Program Strengths**

1. Community Assessment has been reviewed annual and unplanted yearly.
2. Use of the McKinney-Veto description to determine homelessness.
3. ERSEA training implementation

**Systemic Issues**

1. Implement, evaluate, and streamline strategies for transitions for EHS to HS, and HS to Kindergarten.



**Education & Disability** - Results from this area will include data from the following: 1302 Subpart C Education and Child Development Program Services and 1302 F Additional Services for Children with Disabilities, Google Surveys CLASS Scores, CLI Engage, and ITERS Scores.

**Program Strengths Head Start**

1. Teacher and teacher assistants are knowledgeable of our School Readiness Goals.
2. Teaching staff changes materials and equipment to meet the needs of children with disabilities.

**Systemic Issues Head Start**

1. Professional Development training provided in the following areas: Supporting children with disabilities, Supporting Dual Language Learners, and Transitions.

**Program Strengths Early Head Start**

1. Continuity of Care
2. Continuous Training for Conscious Discipline (Start Strong-SEL Foundations and Resiliency in Infants and Toddlers)

**Systemic Issues Early Head Start**

1. Providing meaningful outdoor play.
2. Increase and modify number of materials within the classrooms for exploration.

**Family Community Engagement/Governance** - Results from this area will include data from the following: 1301 Program Governance, 1302 Subpart E Family and Community Engagement Program Services, and Family Partnership Data.

**Program Strengths**

1. Policy Council loves program, embraces it and loves the voice they have.
2. Diverse qualifications and experience on the Executive Committee.
3. Improvements to Family Partnership Process/Goal Development and collection of program data.
4. Vast MOU/Community partner base of resources.

**Potential Improvements**

1. Promote, increase, and inform parents within parent education programs
2. Educate and promote parents of benefits of Policy Council and modify center election processes.

**Health/Nutrition/Pregnant Moms** - Results from this area will include data from the following: 1302 D Health Program Services, 1302 H Services to Enrolled Pregnant Women, and The Childhood Center Program Monitoring Review

**Program Strengths**

1. Staff understands foods counted as food component and paperwork and reporting processes.
2. Communication with families requiring screening procedures and results.
3. Materials, education, and information distributed for oral health, and assistance in health insurance retrieval.

**Systemic Issues**

1. Understanding and providing correct foods for children under 12 months that consists of table food.
2. Learn food delivery check in processes and receiving.
3. Provide information and education on mental health services for staff.
4. More follow-ups with staff on mental health and wellness
5. Increased training on behavior concerns for staff and families.

# Memo

**To:** Executive Committee

**From:** Carolina Raymond – Director of Head Start

**Date:** 6/14/2023

**Re:** CONSIDER AND TAKE APPROPRIATE ACTION – ITEM 12

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## ITEM 12

Carolina Raymond, Director of Head Start, is seeking consideration and approval of the following Head Start Self-Assessment for 2022-2023.

*Approved at the Executive Committee Meeting on June 14, 2023.*

# Memo

**To:** Executive Committee

**From:** Erin Hernandez – Assistant Executive Director

**Date:** 6/14/2023

**Re:** CONSIDER AND TAKE APPROPRIATE ACTION – ITEM 13

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## ITEM 13

Erin Hernandez, Assistant Executive Director, is seeking consideration and approval of the following Head Start Network Upgrades and Relocation Project not to exceed \$40,000.

*Approved at the Executive Committee Meeting on June 14, 2023.*

# Memo

**To:** Executive Committee

**From:** Erin Hernandez – Assistant Executive Director

**Date:** 6/14/2023

**Re:** CONSIDER AND TAKE APPROPRIATE ACTION – ITEM 14

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## ITEM 14

Erin Hernandez, Assistant Executive Director, is seeking consideration and approval of the Executive Director's request to enter into a contract with Cobb, Fendley & Associates for regional broadband consultant services in an amount not to exceed \$388,690.

*Approved at the Executive Committee Meeting on June 14, 2023.*

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Chairman – Judge Jim O'Bryan

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Vice-chairman – Judge Brandon Corbin

# Memo

**To:** Executive Committee

**From:** Erin Hernandez – Assistant Executive Director

**Date:** 6/14/2023

**Re:** CONSIDER AND TAKE APPROPRIATE ACTION – ITEM 15

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## ITEM 15

Erin Hernandez, Assistant Executive Director, is seeking consideration and approval of the Executive Director’s request to enter into a contract with Snider Technology for Head Start Network upgrades and ongoing IT Managed Service Provider support in an amount not to exceed the following amounts listed.

- a. Monthly Recurring Fee: \$130
- b. Support Labor: \$125/hr.
- c. After hours Labor: \$165/hr.
- d. Travel: \$115/hr.

*Approved at the Executive Committee Meeting on June 14, 2023.*

**CVCOG**  
Balance Sheet  
As of 4/30/2023

	Current Period Balance	
<b>Assets</b>		
First Financial General Bank Acct	1,196,694.72	1112000
CNCS Petty Cash	300.00	1197000
CitiBank Credit Card	2,326.40	1198000
First Financial Credit Card	(43.99)	1199000
Grant Receivable, CJ VAWA	1,970.99	1203000
State Contract, HSGD	1,458.33	1204000
Grant Receivable, 2-1-1	27,156.49	1205000
Grant Receivable, 9-1-1	52,510.10	1211000
Grant Receivable, AAA	312,945.00	1212000
Grant Receivable CNCS VISTA	3,965.61	1213000
State Contract, CJ Planning	3,541.81	1214000
Grant Receivable, CJ Training	14,062.32	1215000
Grant Receivable, RSVP	18,376.58	1216000
Grant Receivable, Juvenile Justice Services	4,248.37	1217000
Grant Receivable, Foster Grandparent	34,351.85	1219000
Grant Receivable, Senior Companion	17,388.37	1220000
Grant Receivable, ADRC	21,880.87	1221000
OOG CV Communications Upgrade	8,255.05	1225000
Grant Receivable, Homeland Security SHSP	19,696.30	1232000
Grant Receivable, CACFP Head Start	60,142.89	1243000
Grant Receivable, Head Start HHS	269,319.90	1249000
Economic Development District	63,193.85	1290000
CV Transit District AR	292,966.79	1329000
Accounts Receivable-General	(9.01)	1391000
Prpd Workers Comp	21,531.83	1591000
Prpd Health Insurance	800.28	1592000
Prepaid COBRA-Health Services	114.16	1594000
First Financial 911 Investment	600.75	1614000
CVCOG Investment Account	264,725.25	1618000
Leasehold Improvements	85,951.58	1730000
Facility Improvements	170,941.59	1732000
Other Assets - Project Equipment	1,241,306.87	1811000
<b>Total Assets</b>	<b>4,212,671.90</b>	
<b>Liabilities</b>		
AP	362,166.16	2111000
AP Clearing	29,375.01	2112000
AP First Financial Credit Card	7,254.02	2114000
AP CitiBank Credit Card	143,212.42	2117000
Payroll Payable - Administration	271,354.19	2151000
Federal Withholding Tax	21,447.48	2311000
Medicare Payable	9,608.40	2321000
SUTA Payable	63.09	2323000
Employee Wellness Benefits Payable	40,144.22	2412000
Health Savings Account	5,100.32	2413000
Life Insurance Payable	76.84	2418000
Employer Pension Plan Payable	115,149.45	2422000
Employee Contr to Pension Plan	74,358.67	2423000
Deferred Income Plan Withheld	3,835.00	2431000
State Comptroller Unclaimed	2.36	2434000
United Way Payable	1,424.61	2441000
Child Support Payable	1,828.21	2442000
Other Payroll Garnishments	166.94	2444000
Accrued Vacation Leave	179,324.13	2521000
Inter-Fund Payable CVTD	669,206.85	2600000

**CVCOG**  
Balance Sheet  
As of 4/30/2023

	Current Period Balance	
Liabilities continued .....		
Unearned Revenue General Fund	47.45	2911000
Unearned Revenue- 911 Program	194,215.04	2917000
Unearned Revenue-VISTA	112,805.88	2918000
Unearned Revenue-Head Start	12,825.63	2919000
Unearned Revenue - Regional Law Academy Tuition	4,037.50	2926000
Unearned Revenue-Solid Waste	119,680.33	2938000
Total Liabilities	2,378,710.20	
Fund Balance		
General Unrestricted Fund Balance	475,065.30	3000000
Long Term Debt - Annual Leave	(179,324.13)	3105000
Long Term Debt - Inter-Fund CVTD	(669,206.85)	3107000
Investment - Capital Assets	1,498,200.04	3110000
Restricted - USDA Note Available	23,850.00	3202000
Restrict - Regional Assistance Corp 501c3	35,286.51	3204000
Restricted - CV Medical Reserve Corp	3,765.02	3205000
Assigned - Area Agency on Aging	3,696.26	3401000
Assigned - SCP Visiting Program	9,867.64	3402000
Assigned - Caregiver	2,213.65	3403000
Assigned - Housing Finance	94,001.34	3404000
Assigned - Homeland Security	23,235.05	3405000
Assigned - CJ Planning	110,053.74	3406000
Assigned - CJ Law Enf Academy	187,620.09	3407000
Assigned - 211 Information Referral	42,300.72	3408000
Assigned - CEDAF	35,449.54	3409000
Total Fund Balance	1,696,073.92	
Excess Revenue Over Expenditures FY 22-23	137,887.78	
Total Liabilities and Fund Balance	4,212,671.90	



**CVCOG**  
Statement of Revenues and Expenditures  
From 10/1/2022 Through 4/30/2023

	Current Period Actual	
<b>Revenue</b>		
CNCS Senior Companion CFDA 94.016	90,998.28	4164000
CNCS Foster Grandparent CFDA 94.011	188,074.23	4165000
CNCS RSVP CFDA 94.002	66,241.82	4167000
HHS-ACF Head Start ARP 06HE001000 C6	315,540.40	4170000
HHS-ACF Head Start CFDA 93.600	3,650,968.59	4173000
VISTA CNCS FY 22-23 CFDA 94.013	27,687.42	4174000
AAA - Title IIIB CFDA 93.044	92,769.27	4201000
CACFP Prior Year CFDA 10.558	18,773.45	4203000
AAA - Title IIIC1 CFDA 93.045	129,612.58	4205000
Off Gov-CJ Juvenile Justice Service CFDA 16.523	20,452.92	4206000
AAA - Title IIIC-2 CFDA 93.045	156,367.02	4207000
AAA - Title IIIE CFDA 93.052	35,924.10	4215000
AAA - Title VII EAP CFDA 93.041	352.00	4216000
AAA - Title VI OM CFDA 93.042	8,557.00	4218000
AAA - NSIP CFDA 93.053	14,582.00	4219000
CACFP Nutrition CFDA 10.558	369,870.76	4221000
Off Gov-Violence Against Women Act CFDA 16.588	3,765.49	4222000
211 TANF OPS FED CFDA 93.558	433.91	4231000
211 Food Stamps CFDA 10.561	18,200.60	4233000
211 Child Health Ins CFDA 93.767	2,869.10	4245000
211 Child Care CFDA 93.575	1,062.98	4258000
211 CHIPS OPS Fed CFDA 93.778	18,960.31	4265000
CF - HICAP Basic CFDA 93.324	58,024.00	4267000
211 COVID TANF OPS CFDA 93.558	2.00	4269000
211 COVID Food Stamps CFDA 10.561	71.92	4271000
ADRC Housing Navigator Sept to Dec CFDA 93.791	5,762.39	4274000
ARP Title III-B	143,566.67	4276000
ARP Title III C1	97,002.82	4277000
ARP Title III C2	94,485.74	4278000
ADRC MIPPA CFDA 93.071	3,505.05	4279000
211 COVID Child Health Ins CFDA 93.767	11.34	4289000
ARP Title III E	23,914.71	4290000
ARP Title VI OM CFDA 93.042	4,350.00	4291000
211 COVID CHIPS CFDA 93.778	74.92	4292000
Off Gov-Homeland Security SHSP CFDA 97.067	68,300.66	4294000
PY AAA - MIPPA CFDA 93.071	2,423.00	4297000
ADRC Housing Navigator Jan to Aug CFDA 93.791	6,560.86	4298000
ADRC Local Contact Agency Jan to Aug CFDA 93.791	1,625.54	4299000
AAA State General	29,511.00	4301000
TCEQ Solid Waste State	39,835.46	4302000
2-1-1 COVID SGR	159.16	4305000
Off Gov - CJ Academy State	49,373.39	4307000
AAA - State OMB ALF	4,630.09	4308000
TxHHS-RSVP State	48,542.48	4309000
Off Gov - HSGD Contract State	9,591.67	4311000
TxHHS - 211 State Funds	40,355.85	4312000
Grant Z02, NG911 Project SB8	191,960.40	4314000
Off Gov, CJ Planning Services	24,171.88	4315000
CSEC 911 ER Communications State	1,217,578.51	4316000
ADRC State General Revenue	30,997.11	4325000
Grant X07, OOG CV Communications Upgrade 4467201	11,823.10	4327000
ADRC State Promoting Independence	6,898.82	4331000
TXHHS-FGP State	5,316.48	4335000
TXHHS-SCP State	6,791.48	4336000
AAA - State General ARP	59,530.00	4341000

**CVCOG**  
Statement of Revenues and Expenditures  
From 10/1/2022 Through 4/30/2023

	Current Period Actual	
<i>Revenue continued .....</i>		
IK Contributions	1,651,851.02	4411000
Senior Center Program Income-Tracking Only	48,237.08	4416000
CVCOG Membership Dues	15,553.80	4511000
CJ Membership Dues	66,460.00	4513000
Program Income	22,188.00	4522000
Local Revenue	42,313.92	4523000
Interest Income General	5,495.08	4731000
Credit Card Cash Rewards Redemption	1,825.00	4737000
Economic Development District Pass-Thru	328,888.33	4760000
Concho Valley Transit District Pass-Thru	2,385,045.09	4761000
Prior Year Cost Pool Contribution	121,289.00	4762000
Vacation Accrual Allocation	214,511.97	4911000
Indirect Cost Allocations	403,576.69	4912000
Information Technology Services	188,128.48	4913000
Human Resources Allocation	208,438.11	4914000
Procurement Dept Allocation	204,881.32	4915000
Total Revenue	13,427,495.62	
 Expenditures		
General Wages	4,006,286.60	5110000
Management Salaries	10,835.99	5111000
General Overtime Hours	4,041.33	5118000
Holiday Work Time	182.80	5119000
Vacation Time Allocation	214,511.97	5150000
Medicare Tax	68,996.73	5151000
Workers Comp Insurance	60,466.32	5172000
SUTA	2,175.46	5173000
Health Insurance Benefit	1,120,850.47	5174000
Dental Insurance Benefit	41,811.52	5175000
Life Insurance Benefit	34,116.26	5176000
HSA Insurance Benefit	46,583.40	5177000
Retirement	555,743.03	5181000
Indirect Allocation	403,596.90	5199000
Employee Health and Welfare	250.00	5200000
Stipend - FGP Volunteers	104,203.73	5201000
Stipend - SCP Volunteers	45,168.03	5202000
Recognition	16,488.83	5205000
HR Service Center	208,573.82	5206000
Procurement Service Center	204,881.32	5207000
Information Technology Service Center	187,992.77	5208000
Driver Wages	806,587.37	5210000
Dispatch/Customer Service Wages	44,340.29	5217000
Driver Overtime Hours	57,400.60	5218000
Dispatch/Customer Service Overtime Wages	7,519.15	5219000
Audit & Legal	38,243.32	5231000
Counseling Services	14,298.79	5251000
Contract Services	455,078.67	5291000
HS Health & Disab Svc	227.25	5293000
HS Policy Council	97.11	5294000
HS Nutrition Service	278,775.35	5295000
HS Parent Service	917.66	5296000
AAA Congregate Meals	227,696.94	5301000
AAA Home Delivered Meals	244,042.71	5302000
Head Start T & T A	29,882.60	5308000
Travel-In Region	15,069.92	5309000

**CVCOG**  
Statement of Revenues and Expenditures  
From 10/1/2022 Through 4/30/2023

	Current Period Actual	
<i>Expenditures continued .....</i>		
Travel-Out of Region	23,142.53	5310000
Meals	6,873.05	5312000
Travel-Volunteer	32,177.92	5313000
Executive Director Allowance	493.22	5314000
Fuel	1,037.05	5351000
Lubricant	12.00	5352000
Vehicle Maintenance	223.44	5361000
Tires	41.20	5363000
Non-Vehicle Maintenance	818.59	5366000
Other Facility Rent	5,770.00	5412000
HS Site Rent	10,910.00	5413000
Utilities	27,957.11	5431000
HS Site Center Utilities	71,986.51	5433000
Facility Allocation	238,919.24	5451000
HS Site Center Bldg Maint	144,125.69	5453000
Supplies	94,980.57	5510000
HS Class Room Supplies	145,893.96	5512000
HS Food Serv Sup	69,656.89	5513000
HS Medical Supplies	4,652.39	5514000
HS Disability Supplies	12.54	5515000
Supplies - Bus/Service Vehicles	3,055.67	5516000
HS Diapers and Wipes	9,588.02	5518000
Parts Supply	2,510.46	5520000
Internal Project Equipment	674.93	5621000
Internal Computer/Software	36,640.41	5622000
County Project Equipment	11,454.18	5627000
Tools	1,066.91	5629000
Copier	13,776.42	5632000
Copier Lease	9,147.81	5633000
Copier Paper	2,295.00	5634000
Insurance	19,518.01	5711000
Cell Phones	3,046.47	5713000
Internet	1,194.18	5714000
Printing	665.29	5721000
Ads & Promotions	1,138.95	5722000
Publications	360.00	5723000
HS Capital Playground	12,142.35	5734000
Training	4,112.33	5751000
Dues and fees	38,668.00	5753000
Vehicle Registration	307.50	5754000
HS Site Center Communications	12,030.67	5760000
Communications	14,748.58	5761000
Postage/freight	7,443.96	5762000
911 PSAP Services	1,025.20	5766000
911 Equipment Maintenance	501.99	5767000
911 PSAP Training	3,890.50	5768000
911 PUB ED	4,069.60	5771000
911 PSAP Room Prep	26,980.62	5773000
911 Network Reliability	3,291.75	5774000
911 Network	85,205.67	5775000
911 PSAP Network	632,868.05	5777000
911 Geographic Information Systems	8,010.56	5780000
911 Core Functions	191,960.40	5781000
911 Info Sec	397.75	5783000
Other	54.34	5791000

**CVCOG**  
Statement of Revenues and Expenditures  
From 10/1/2022 Through 4/30/2023

	Current Period Actual	
<i>Expenditures continued .....</i>		
Coffee Expense	1,075.38	5792000
Physicals	135.00	5793000
General Assembly Costs	4,603.38	5794000
Safety	2,080.04	5796000
Multi-Modal Supplies	2,299.23	5810000
Multi-Modal Internet	7,279.08	5814000
Multi-Modal Utilities	4,349.42	5831000
Multi-Modal Building Maintenance	567.80	5851000
Multi-Modal Communications	3,060.52	5861000
Shop Christoval Rd Supplies	4,663.50	5870000
Shop Christoval Rd Tools	4,565.08	5871000
Shop Christoval Rd Utilities	1,616.95	5876000
InKind Travel	108,525.00	6310000
InKind Other	1,543,326.02	6791000
Total Expenditures	13,289,607.84	
 Excess Revenue over Expenditures	 137,887.78	

CVCOG

Expenditure Journal - All Grant Exp Recap YTD  
From 10/1/2022 Through 4/30/2023

Grant Code	Grant Title	General Ledger Expenditures	Account Payable Expenditures	Total Expenditures
010	CVTD Pass-thru ICB Program	13,544.36	181.39	13,725.75
018	Pass-Thru CVTD Medicaid	57,445.15	0.00	57,445.15
025	Grant 025, VISTA 22VS247722	23,633.20	122.16	23,755.36
027	Grant 027, VISTA 23VS252124	22,055.53	571.99	22,627.52
040	Pass-Thru CV Economic Development Dist	94,587.56	2,267.52	96,855.08
043	CVEDD Pass-Thru Revolving Loan	2,119.25	0.00	2,119.25
092	Procurement	200,504.56	4,376.76	204,881.32
093	Human Resources	207,069.52	2,169.84	209,239.36
094	Information Technology	165,584.07	22,569.42	188,153.49
095	Engagement Committee Funds	(134.87)	4,968.94	4,834.07
097	Non-Project Expenses	(122.12)	7,265.00	7,142.88
098	Vacation Program Costs	168,118.48	613.50	168,731.98
099	INDIRECT COSTS	412,338.56	86,859.94	499,198.50
825	Pass Thru CVTD Rural CARES	233,256.31	9,972.58	243,228.89
829	HHS-ACF Grant 829, Head Start FY 21-22 06CH010970	160,744.78	155,051.62	315,796.40
A01	HHSC-OAAA Grant A01, Area Agency on Aging FY 21-22	(6,994.76)	7,203.09	208.33
A02	HHSC-OAAA Grant A02, Area Agency on Aging FY 22-23	512,530.67	578,388.97	1,090,919.64
C01	OOG State Grant C01, CJ Academy FY 21-23 1480417	84,655.28	18,899.67	103,554.95
C04	OOG Contract C04, CJD Planning FY 22-23	21,336.89	134.16	21,471.05
D02	Grant D02, HHSC ADRC FY 22-23 HHS000270200007	53,139.78	2,209.99	55,349.77
F03	Grant F03, CNCS Foster Grandparent 22-23 Y1 22FGTX003	189,653.87	13,728.36	203,382.23
F04	Grant F04, FGP HHSC State HHS000871100029 Year 3	5,316.48	0.00	5,316.48
G02	Grant G02, CNCS RSVP FY 22-23 20SRWTX024 Y3	49,573.07	16,668.75	66,241.82
G03	Grant G03, RSVP HHSC State HHS0008711000009 Year 3	48,542.48	0.00	48,542.48
H02	Grant H02, CACFP Head Start Nutrition FY 21-22 Q2022	(7,421.50)	7,421.50	0.00
H03	HHS-ACF Grant H03, Head Start FY 22-23 06CH010970-04	4,749,689.27	440,263.46	5,189,952.73
H04	Grant H04, CACFP Head Start Nutrition FY 22-23	35,764.22	354,756.72	390,520.94
I01	Pass Thru Grant I01, CVEDD TXDOT	0.00	2.00	2.00
I02	Grant I02, CVEDD Pass-Thru TXDOT Rural	0.00	17,168.00	17,168.00
I03	Grant I03, CVEDD Pass-Thru TXDOT Urban	0.00	212,744.00	212,744.00
J02	OOG Grant J02, Juvenile Justice Service FY 22-23 1484323	6,154.13	14,298.79	20,452.92
K01	CVTD Pass-Thru Head Start Maintenance FY 22-23	8,479.73	219.15	8,698.88
L01	CVTD Pass-Thru Link Road Facility	(1,517.50)	3,416.27	1,898.77
L02	CVTD Pass-Thru Link Road Facility FY 22-23	55,229.52	30,839.53	86,069.05
M03	Pass-thru Grant M03, Mobility Management Urban FY 22-23	31,573.11	0.00	31,573.11
M04	Pass-thru Grant M04, Mobility Management Rural FY 22-23	28,232.91	0.00	28,232.91
P02	CVTD Pass-Thru, RPTCP FY 22-23	20,859.04	118.30	20,977.34
Q01	Grant Q01, CEDAF FY 22-23	2,571.78	0.00	2,571.78
R01	Pass-thru Grant R01, CVTD Rural FY 21-22	0.00	3,955.99	3,955.99
R03	Pass-thru CVTD Grant R03 Rural FY 22-23	482,276.57	10,715.89	492,992.46
S03	Grant S03, CNCS Senior Companion 22-23 Y1 22SCGTX003	93,397.09	8,039.19	101,436.28
S04	Grant S04, SCP HHSC State HHS000871100039 Year 3	6,791.48	0.00	6,791.48
S05	SCP Prior Year Funds Acct 3402	0.00	1,667.80	1,667.80
T02	Grant T02, TIRN 211 Information & Referral FY 22-23	77,213.75	4,988.34	82,202.09
U01	Pass-thru Grant U01, CVTD Urban FY 21-22	0.00	5,312.33	5,312.33
U02	Grant U02, CVTD Pass-Thru	558.13	26.32	584.45
U03	Pass-thru Grant U03, CVTD Urban FY 22-23	1,372,172.76	18,177.25	1,390,350.01
V02	OOG Grant V02, Violence Against Women Act 3973003	6,650.51	928.00	7,578.51
W01	Grant W01, TCEQ State Solid Waste FY 21-23	25,266.72	13,202.49	38,469.21
X01	OOG Grant X01, Homeland Security (HSGP) FY 21-22 29529007	(255.70)	255.70	0.00
X04	OOG State Contract X04, HSGD FY 22-23	4,337.67	932.11	5,269.78
X05	OOG Grant X05, Homeland Security (HSGP) FY 22-23 2952908	64,371.80	3,928.86	68,300.66
X07	OOG Grant X07 CV Communications Upgrade 4467201	11,823.10	0.00	11,823.10
Z01	Grant Z01, 911 CSEC State FY 22 Funding, 1st Biennium	250.01	0.00	250.01
Z02	Grant Z02, NG911 Project SB8	1,127.98	190,832.42	191,960.40
Z03	Grant Z03, 911 CSEC State FY23 Funding, 2nd Biennium	428,393.36	788,685.74	1,217,079.10
Report Total		10,222,488.04	3,067,119.80	13,289,607.84

SCHEDULE OF REVENUE BY SOURCE  
October 1, 2022 - April 30, 2023

CVCOG Grant No	Grant Name	Federal	ARP COVID-19 CARES Act	State Administered Federal	State	Program Income	Local Revenue	In-kind	Membership	Pass Thru Sr. Centers & CVEDD & CVTD	Fringe Benefit & Indirect	Total Revenue	Total Expenditures	Excess Revenue over Expenditures	Notes
025	VISTA Program	13,179.46	-	-	-	-	10,575.90	-	-	-	-	23,755.36	23,755.36	-	
027	VISTA Program	14,507.96	-	-	-	-	8,119.56	-	-	-	-	22,627.52	22,627.52	-	
033	TDHCA Housing	-	-	-	-	-	136.03	-	-	-	-	136.03	-	136.03	Housing Bond interest received, will use through year
040	Economic Development District	-	-	-	-	-	-	-	-	96,855.08	-	96,855.08	96,855.08	-	
043	CVEDD Pass-Thru Revolving Loan	-	-	-	-	-	-	-	2,119.25	-	-	2,119.25	2,119.25	-	
805	911 CSEC FY 21, 2nd Yr Biennium	-	-	-	(0.61)	-	-	-	-	-	-	(0.61)	-	(0.61)	correction on EFR-0001003
829	Head Start FY 21-22	-	315,540.40	-	-	-	256.00	-	-	-	-	315,796.40	315,796.40	-	
Multi	CVTD AR Expenses	-	-	-	-	-	-	-	-	2,385,045.09	-	2,385,045.09	2,385,045.09	-	
A01	Area Agency on Aging FY 21-22	-	-	-	-	-	208.33	-	-	-	-	208.33	208.33	-	
A02	Area Agency on Aging FY 22-23	-	422,849.94	498,610.97	34,141.09	50.00	3,168.10	87,120.88	-	48,237.08	-	1,094,178.06	1,090,919.64	3,258.42	HICAP waiting budget approval
C01	CJ Academy FY 21-23	-	-	-	49,373.39	22,138.00	18,500.00	-	56,569.00	-	-	146,580.39	103,554.95	43,025.44	Excess funding, will use through academy year
C04	CJD Planning FY 22-23	-	-	-	24,171.88	-	-	-	-	-	-	24,171.88	21,471.05	2,700.83	Excess revenue, will use through year
D02	ADRC FY 22-23	-	-	17,453.84	37,895.93	-	-	-	-	-	-	55,349.77	55,349.77	-	
F03	Foster Grandparent FY 22-23	188,074.23	-	-	-	-	-	15,308.00	-	-	-	203,382.23	203,382.23	-	
F04	FGP HHSC State Year 3	-	-	-	5,316.48	-	-	-	-	-	-	5,316.48	5,316.48	-	
G02	RSVP Federal FY 22-23	66,241.82	-	-	-	-	-	-	-	-	-	66,241.82	66,241.82	-	
G03	RSVP HHSC State Year 3	-	-	-	48,542.48	-	53.98	-	-	-	-	48,596.46	48,542.48	53.98	Interest Earned
H03	Head Start FY 22-23	3,650,968.59	-	-	-	-	-	1,538,984.14	-	-	-	5,189,952.73	5,189,952.73	-	
H04	CACFP Head Start Nutrition FY 22-23	-	-	388,644.21	-	-	-	-	-	-	-	388,644.21	390,520.94	(1,876.73)	excess expenses for month of April
I01	Economic Development District-TXDOT	-	-	-	-	-	-	-	-	2.00	-	2.00	2.00	-	
I02	CVEDD Pass-Thru TXDOT Rural	-	-	-	-	-	-	-	-	17,168.00	-	17,168.00	17,168.00	-	
I03	CVEDD Pass-Thru TXDOT Urban	-	-	-	-	-	-	-	-	212,744.00	-	212,744.00	212,744.00	-	
J02	Juvenile Justice Services FY 22-23	-	-	20,452.92	-	-	-	-	-	-	-	20,452.92	20,452.92	-	
Q01	CEDAF FY 22-23	-	-	-	-	-	-	-	-	-	-	-	2,571.78	(2,571.78)	Contract will bill annually in August
S03	Senior Companion Federal FY 22-23	90,998.28	-	-	-	-	-	10,438.00	-	-	-	101,436.28	101,436.28	-	
S04	SCP HHSC State Year 3	-	-	-	6,791.48	-	1.94	-	-	-	-	6,793.42	6,791.48	1.94	Interest Earned
S05	SCP Prior Year Funds Acct 3402	-	-	-	-	-	-	-	-	-	-	-	1,667.80	(1,667.80)	spending prior year local funds, will clear when closing fiscal year
T02	211 Information & Referral FY 22-23	-	319.34	41,526.90	40,355.85	-	48.30	-	-	-	-	82,250.39	82,202.09	48.30	Interest Earned
V02	Violence Against Women FY 22-23	-	-	3,765.49	-	-	-	-	9,891.00	-	-	13,656.49	7,578.51	6,077.98	Match funding to be used through year to draw State funds
W01	TCEQ Solid Waste FY 21-23	-	-	-	39,835.46	-	-	-	-	-	-	39,835.46	38,469.21	1,366.25	Excess funding, will use through year
X04	HSGD FY 22-23	-	-	-	9,591.67	-	-	-	-	-	-	9,591.67	5,269.78	4,321.89	Excess funding, will use through year
X05	Homeland Security HSGP FY 22-23	-	-	68,300.66	-	-	-	-	-	-	-	68,300.66	68,300.66	-	
X07	CV Communications Upgrade	-	-	-	11,823.10	-	-	-	-	-	-	11,823.10	11,823.10	-	
Z01	911 CSEC FY 22, 1st Yr Biennium	-	-	-	500.02	-	-	-	-	-	-	500.02	250.01	250.01	\$250.01 interest earned
Z02	Next Generation 911 Fund, ARP	-	-	-	191,960.40	-	-	-	-	-	-	191,960.40	191,960.40	-	
Z03	911 CSEC FY 23, 2nd Yr Biennium	-	-	-	1,217,079.10	-	-	-	-	-	-	1,217,079.10	1,217,079.10	-	
092	Procurement Services	-	-	-	-	-	-	-	-	-	204,881.32	204,881.32	204,881.32	-	
093	Human Resources Services	-	-	-	-	-	-	-	-	-	208,438.11	208,438.11	209,239.36	(801.25)	expense adjustment, will clear in May
094	Information Technology Services	-	-	-	-	-	25.00	-	-	-	188,128.48	188,153.48	188,153.49	(0.01)	rounding from allocation percentages
095	Engagement Committee	-	-	-	-	-	-	-	5,055.12	-	-	5,055.12	4,834.07	221.05	Excess local funds, use through year
097	Non Project Expenses	-	-	-	-	-	8,528.62	-	9,214.88	-	-	17,743.50	7,142.88	10,600.62	Excess local funds, use through year
098	Vacation Accrual	-	-	-	-	-	12.24	-	-	-	214,511.97	214,524.21	168,731.98	45,792.23	Excess funds, use through year
099	Indirect	-	-	-	-	-	-	-	1,283.80	-	524,865.69	526,149.49	499,198.50	26,950.99	Excess funds, use through year
		<u>4,023,970.34</u>	<u>738,709.68</u>	<u>1,038,754.99</u>	<u>1,717,377.72</u>	<u>22,188.00</u>	<u>49,634.00</u>	<u>1,651,851.02</u>	<u>82,013.80</u>	<u>2,762,170.50</u>	<u>1,340,825.57</u>	<u>13,427,495.62</u>	<u>13,289,607.84</u>	<u>137,887.78</u>	
		0.54	0.10	0.14	0.23										

Total Government Grants Spent	7,518,812.73	General	82,763.63	60%
Total Program	22,188.00	Dedicated	55,124.15	40%
Total Local	131,647.80		137,887.78	
Total In-Kind	1,651,851.02			
Total Pass-Thru	2,762,170.50			
Total Cost Allocation	<u>1,340,825.57</u>			
	<u>13,427,495.62</u>			

**Concho Valley Council of Governments Cash Flow**

Beginning Balance:	First Financial CVCOG General Fund (000's)			First Financial 9-1-1 Trust Account (000's)				First Financial General Investment Savings				CVCOG Balance	First Financial CVTD (000's)			First Financial CVTD-ICB (000's)			First Financial CVEDD (000's)			Total Balance
	Inflows	Outflows	Balance	Inflows	Interest	Outflows	Balance	Inflows	Interest	Outflows	Balance		Inflows	Outflows	Balance	Inflows	Outflows	Balance	Inflows	Outflows	Balance	
\$ 638,852							\$ 559,508				\$ 257,453				\$ 678,239			\$ 19,205			\$ 511,460	
<b>FY 22-23</b>	<b>Inflows</b>	<b>Outflows</b>	<b>Balance</b>	<b>Inflows</b>	<b>Interest</b>	<b>Outflows</b>	<b>Balance</b>	<b>Inflows</b>	<b>Interest</b>	<b>Outflows</b>	<b>Balance</b>	<b>Balance</b>	<b>Inflows</b>	<b>Outflows</b>	<b>Balance</b>	<b>Inflows</b>	<b>Outflows</b>	<b>Balance</b>	<b>Inflows</b>	<b>Outflows</b>	<b>Balance</b>	<b>Balance</b>
October	1,311,609	(1,540,522)	409,940	-	1,098	(100,783)	459,822	1,550	550	-	259,554	1,129,315	387,282	(462,883)	602,638	6,239	(6,527)	18,918	142,658	(13,014)	641,103	2,391,975
November	1,729,481	(1,701,221)	438,200	-	1,039	(146,355)	314,507	-	681	-	260,234	1,012,941	720,765	(628,066)	695,337	6,448	(6,772)	18,594	3,085	(153,223)	490,966	2,217,838
December	1,577,879	(1,395,790)	620,289	-	801	(136,962)	178,346	-	797	-	261,031	1,059,666	390,613	(665,982)	419,968	3,840	(3,076)	19,358	16,511	(43,143)	464,334	1,963,327
January	2,041,899	(1,421,878)	1,240,310	-	464	(75,687)	103,124	-	827	-	261,859	1,605,292	1,151,281	(666,264)	904,985	2,630	(2,875)	19,114	47,003	(86,097)	425,240	2,954,631
February	1,435,188	(1,945,856)	729,642	348,245	824	(243,902)	208,290	-	793	-	262,651	1,200,583	334,884	(450,291)	789,578	3,352	(2,572)	19,894	66,726	(11,538)	480,427	2,490,482
March	1,477,271	(1,555,200)	651,713	-	264	(207,955)	599	275	963	-	263,889	916,201	534,326	(512,429)	811,475	2,236	(179)	21,951	33,689	(84,002)	430,115	2,179,741
April	2,083,317	(1,471,600)	1,263,430	-	2	-	601	-	836	-	264,725	1,528,756	733,884	(611,307)	934,053	2,686	(1)	24,636	92,370	(13,649)	508,836	2,996,281
May	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
June	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
July	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
August	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
September	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-

Interest Rate at 2.685700% as of 10/03/22  
 Interest Rate at 3.190500% as of 11/01/22  
 Interest Rate at 3.606300% as of 12/01/22  
 Interest Rate at 3.740300% as of 1/3/23  
 Interest Rate at 3.945900% as of 2/1/23  
 Interest Rate at 4.051700% as of 3/1/23  
 Interest Rate at 4.130800% as of 4/3/23

Account opened to segregate Greyhound Funds  
 \$19,571.34 belongs to CVTD deposited to maintain account

Beginning Balance:	First Financial CVCOG General Fund (000's)			First Financial 9-1-1 Trust Account (000's)				First Financial General Investment Savings				CVCOG Balance	First Financial CVTD (000's)			First Financial CVTD-ICB (000's)			First Financial CVEDD (000's)			Total Balance
	Inflows	Outflows	Balance	Inflows	Interest	Outflows	Balance	Inflows	Interest	Outflows	Balance		Inflows	Outflows	Balance	Inflows	Outflows	Balance	Inflows	Outflows	Balance	
\$ 1,125,860							\$ 254				\$ 217,955				\$ 627,043			\$ 9,391			\$ 255,421	
<b>FY 21-22</b>	<b>Inflows</b>	<b>Outflows</b>	<b>Balance</b>	<b>Inflows</b>	<b>Interest</b>	<b>Outflows</b>	<b>Balance</b>	<b>Inflows</b>	<b>Interest</b>	<b>Outflows</b>	<b>Balance</b>	<b>Balance</b>	<b>Inflows</b>	<b>Outflows</b>	<b>Balance</b>	<b>Inflows</b>	<b>Outflows</b>	<b>Balance</b>	<b>Inflows</b>	<b>Outflows</b>	<b>Balance</b>	<b>Balance</b>
October	1,831,397	(2,351,835)	605,422	497,988	11	(65,252)	433,001	34,731	7	-	252,692	1,291,116	295,515	(129,602)	792,956	4,507	(3,752)	10,146	40,434	(92,963)	202,893	2,297,110
November	1,223,321	(1,441,853)	386,890	-	12	(124,881)	308,132	-	9	-	252,701	947,723	341,246	(619,654)	514,549	3,888	(3,587)	10,447	60,561	(40,302)	223,152	1,695,871
December	1,400,883	(1,580,398)	207,375	-	9	(80,228)	227,914	-	9	-	252,710	687,999	844,674	(488,407)	870,816	5,646	(4,603)	11,491	84,060	(65,000)	242,212	1,812,518
January	2,094,100	(1,477,340)	824,135	-	7	(213,753)	14,167	-	12	-	252,722	1,091,024	930,683	(768,227)	1,033,273	5,043	(4,510)	12,024	17,567	(80,318)	179,461	2,315,782
February	1,369,212	(1,558,245)	635,102	265,904	12	(21,042)	259,042	-	24	-	252,746	1,146,890	279,483	(602,194)	710,562	4,784	(4,847)	11,961	3,959	(12,095)	171,325	2,040,737
March	1,426,261	(1,464,307)	597,056	-	57	(90,417)	168,682	3,025	63	-	255,834	1,021,572	578,397	(502,085)	786,873	6,629	(5,231)	13,359	199,768	(41,566)	329,528	2,151,331
April	1,722,799	(1,712,298)	607,556	313,881	97	-	482,660	-	85	-	255,919	1,346,135	278,721	(437,195)	628,399	7,273	(7,110)	13,522	156,069	(107,117)	378,480	2,366,537
May	1,779,201	(1,636,003)	750,754	-	236	(144,620)	338,276	-	146	-	256,065	1,345,095	786,189	(472,045)	942,544	7,448	(6,310)	14,660	112,528	(22,677)	468,330	2,770,629
June	1,200,924	(1,316,649)	635,029	-	173	(172,103)	166,345	-	178	-	256,243	1,057,617	253,386	(431,870)	764,060	7,240	(6,221)	15,679	7,802	(11,644)	464,489	2,301,845
July	1,446,069	(1,670,275)	410,823	136,179	151	(104,000)	198,675	-	279	-	256,522	866,020	660,096	(573,616)	850,541	9,206	(8,194)	16,692	18,445	(9,026)	473,908	2,207,160
August	1,539,412	(1,408,299)	541,936	-	80	(179,916)	18,839	-	423	-	256,944	817,720	641,176	(528,168)	963,548	10,044	(6,646)	20,089	43,051	(8,108)	508,851	2,310,208
September	1,891,171	(1,794,254)	638,852	559,035	138	(18,504)	559,508	-	509	-	257,453	1,455,814	243,033	(528,342)	678,239	6,967	(7,851)	19,205	13,851	(11,242)	511,460	2,664,718

Interest Rate at 0.034500% as of 10/01/21  
 Interest Rate at 0.043400% as of 11/01/21  
 Interest Rate at 0.041200% as of 12/01/21  
 Interest Rate at 0.055300% as of 1/03/22  
 Interest Rate at 0.122800% as of 2/01/22  
 Interest Rate at 0.2911% as of 3/01/22  
 Interest Rate at 0.3925% as of 4/01/22  
 Interest Rate at 0.6917% as of 5/02/22  
 Interest Rate at 0.8468% as of 6/01/2022  
 Interest Rate at 1.282100% as of 7/01/2022  
 Interest Rate at 1.939500% as of 8/01/2022  
 Interest Rate at 2.260200% as of 9/01/2022

Account opened to segregate Greyhound Funds  
 \$15,681.07 belongs to CVTD deposited to maintain account

In compliance with PFIA 2256.023 and CVCOG Investment Policy section XI

signature on hard copy  
 CVCOG Executive Director/Investment Officer

signature on hard copy  
 CVCOG Director of Finance

signed 5/3/2023  
 Date

	First Financial CVCOG General Fund (000's)			First Financial 9-1-1 Trust Account (000's)				First Financial General Investment Savings				CVCOG Balance	First Financial CVTD (000's)			First Financial CVTD-ICB (000's)			First Financial CVEDD (000's)			CVTD - CD (000's)			Total Balance
	Inflows	Outflows	Balance	Inflows	Interest	Outflows	Balance	Inflows	Interest	Outflows	Balance		Inflows	Outflows	Balance	Inflows	Outflows	Balance	Inflows	Outflows	Balance	Inflows	Outflows	Balance	
Beginning Balance:	\$ 852,791			\$ 78,321				\$ 57,863					\$ 442,847			\$ 7,936			\$ 154,893			\$ 550,000			
<b>FY 20-21</b>	<b>Inflows</b>	<b>Outflows</b>	<b>Balance</b>	<b>Inflows</b>	<b>Interest</b>	<b>Outflows</b>	<b>Balance</b>	<b>Inflows</b>	<b>Interest</b>	<b>Outflows</b>	<b>Balance</b>	<b>Balance</b>	<b>Inflows</b>	<b>Outflows</b>	<b>Balance</b>	<b>Inflows</b>	<b>Outflows</b>	<b>Balance</b>	<b>Inflows</b>	<b>Outflows</b>	<b>Balance</b>	<b>Inflows</b>	<b>Outflows</b>	<b>Balance</b>	<b>Balance</b>
October	1,550,872	(1,885,639)	518,024	378,789	23	(21,625)	435,509	59,701	7	-	117,571	1,071,104	412,720	(246,639)	608,928	-	-	7,936	22,452	(50,021)	127,324	-	-	550,000	2,365,292
November	1,659,369	(1,228,094)	949,299	-	27	(111,134)	324,401	-	8	-	117,579	1,391,280	355,744	(579,201)	385,470	-	-	7,936	36,132	(65,612)	97,845	-	-	550,000	2,432,531
December	1,194,051	(1,452,857)	690,493	-	12	(202,777)	121,637	-	6	(37,349)	80,237	892,367	596,392	(647,429)	334,433	-	-	7,936	2,864	(48,894)	51,815	-	-	550,000	1,836,552
January	1,643,830	(1,484,818)	849,505	210,830	11	-	332,477	-	5	-	80,242	1,262,224	1,385,224	(628,973)	1,090,684	-	-	7,936	220,188	(163,086)	108,918	-	-	550,000	3,019,762
February	1,148,521	(959,963)	1,038,063	-	18	(104,431)	228,063	4,850	5	-	85,097	1,351,223	109,922	(506,821)	693,786	-	-	7,936	107,496	(29,764)	186,649	-	-	550,000	2,789,594
March	1,333,497	(1,519,529)	852,031	-	5	(94,991)	133,078	-	3	-	85,100	1,070,208	820,390	(506,461)	1,007,714	-	-	7,936	113,869	(130,000)	170,518	-	550,000	-	2,256,376
April	1,437,841	(1,577,915)	711,957	-	3	-	133,081	-	2	-	85,102	930,139	546,601	(411,645)	1,142,670	-	-	7,936	74,332	(100,282)	144,568	-	-	-	2,225,314
May	1,573,197	(1,190,608)	1,094,546	-	2	-	133,083	-	1	-	85,103	1,312,732	482,059	(685,677)	939,053	-	-	7,936	34,310	(41,137)	137,741	-	-	-	2,397,462
June	1,266,906	(1,569,129)	792,323	-	1	-	133,084	-	1	-	85,104	1,010,511	597,653	(238,484)	1,298,221	3,408	(2,228)	9,116	101,576	(39,645)	199,673	-	-	-	2,517,521
July	1,968,484	(1,885,819)	874,988	-	3	-	133,087	-	2	-	85,106	1,093,180	436,381	(591,857)	1,142,746	4,022	(4,463)	8,675	58,901	(34,567)	224,006	-	-	-	2,468,608
August	1,085,360	(1,221,427)	738,921	-	5	-	133,092	-	3	-	85,109	957,121	382,412	(473,866)	1,051,292	4,301	(2,547)	10,429	157,213	(25,980)	355,240	-	-	-	2,374,082
September	1,851,412	(1,464,472)	1,125,860	-	3	(132,841)	254	132,841	6	-	217,955	1,344,070	337,817	(762,066)	627,043	3,805	(4,843)	9,391	5,788	(105,606)	255,421	-	-	-	2,235,925
				Interest Rate at 0.088000% as of 09/30/20				Interest Rate at 0.088000% as of 09/30/20					Account opened to segregate Greyhound Funds						CD setup March 6, 2020						
				Interest Rate at 0.092700% as of 10/01/20				Interest Rate at 0.092700% as of 10/01/20					\$7,935.77 belongs to CVTD deposited to maintain account						Interest Rate is 1%, term is 1 Year						
				Interest Rate at 0.085900% as of 11/02/20				Interest Rate at 0.085900% as of 11/02/20											Maturity date March 5, 2021						
				Interest Rate at 0.079500% as of 12/01/20				Interest Rate at 0.079500% as of 12/01/20											CD funds applied to Note Payable						
				Interest Rate at 0.073100% as of 01/04/21				Interest Rate at 0.073100% as of 01/04/21											Account Closed						
				Interest Rate at 0.072000% as of 02/01/21				Interest Rate at 0.072000% as of 02/01/21																	
				Interest Rate at 0.036600% as of 03/01/21				Interest Rate at 0.036600% as of 03/01/21																	
				Interest Rate at 0.028100% as of 04/01/21				Interest Rate at 0.028100% as of 04/01/21																	
				Interest Rate at 0.017900% as of 05/03/21				Interest Rate at 0.017900% as of 05/03/21																	
				Interest Rate at 0.012800% as of 06/01/21				Interest Rate at 0.012800% as of 06/01/21																	
				Interest Rate at 0.024700% as of 07/01/21				Interest Rate at 0.024700% as of 07/01/21																	
				Interest Rate at 0.043400% as of 08/02/21				Interest Rate at 0.043400% as of 08/02/21																	
				Interest Rate at 0.048700% as of 09/01/21				Interest Rate at 0.048700% as of 09/01/21																	

	First Financial CVCOG General Fund (000's)			First Financial 9-1-1 Trust Account (000's)				First Financial General Investment Savings				CVCOG Balance	First Financial CVTD (000's)			First Financial CVTD-ICB (000's)			First Financial CVEDD (000's)			CVTD - CD (000's)			Total Balance
	Inflows	Outflows	Balance	Inflows	Interest	Outflows	Balance	Inflows	Interest	Outflows	Balance		Inflows	Outflows	Balance	Inflows	Outflows	Balance	Inflows	Outflows	Balance	Inflows	Outflows	Balance	
Beginning Balance:	\$ 512,440			\$ 52,098				\$ 54,172					\$ 866,843			\$ 10,080			\$ 159,908			\$ -			
<b>FY 19-20</b>	<b>Inflows</b>	<b>Outflows</b>	<b>Balance</b>	<b>Inflows</b>	<b>Interest</b>	<b>Outflows</b>	<b>Balance</b>	<b>Inflows</b>	<b>Interest</b>	<b>Outflows</b>	<b>Balance</b>	<b>Balance</b>	<b>Inflows</b>	<b>Outflows</b>	<b>Balance</b>	<b>Inflows</b>	<b>Outflows</b>	<b>Balance</b>	<b>Inflows</b>	<b>Outflows</b>	<b>Balance</b>	<b>Inflows</b>	<b>Outflows</b>	<b>Balance</b>	<b>Balance</b>
October	2,034,109	(2,092,445)	454,104	490,901	687	(94,545)	449,140	-	77	-	54,249	957,493	266,167	(480,776)	652,233	7,028	(6,252)	10,856	153,239	(44,332)	268,815	-	-	-	1,889,397
November	1,825,827	(1,578,866)	701,066	-	463	(125,834)	323,769	-	67	-	54,316	1,079,151	248,049	(424,344)	475,939	4,746	(5,655)	9,947	8,192	(44,269)	232,738	-	-	-	1,797,774
December	1,160,586	(1,377,824)	483,828	-	279	(132,828)	191,221	-	59	-	54,376	729,424	752,241	(381,046)	847,134	8,299	(6,397)	11,849	39,835	(13,852)	258,721	-	-	-	1,847,128
January	1,622,248	(1,330,300)	775,776	-	115	(126,621)	64,715	3,250	69	-	57,695	898,185	1,157,462	(437,528)	1,567,068	5,664	(8,183)	9,330	12,823	(65,500)	206,044	-	-	-	2,680,628
February	1,484,162	(1,656,997)	602,941	344,808	324	(114,591)	295,255	-	58	-	57,753	955,949	399,105	(527,493)	1,438,680	7,575	(8,032)	8,873	51,024	(112,061)	145,008	-	-	-	2,548,510
March	1,212,074	(1,232,261)	582,754	-	201	(139,967)	155,489	-	63	-	57,816	796,060	364,412	(1,148,213)	654,879	4,586	(5,164)	8,295	36,760	(30,270)	151,498	550,000	-	550,000	2,160,732
April	2,029,840	(2,211,983)	400,611	719,031	179	-	874,700	-	19	-	57,835	1,333,145	365,247	(420,910)	599,216	-	(360)	7,936	64,302	(10,524)	205,275	-	-	550,000	2,695,572
May	1,547,259	(1,202,357)	745,513	-	87	(127,314)	747,473	-	6	-	57,841	1,550,827	292,843	(412,858)	479,201	-	-	7,936	1,760	(21,146)	185,889	-	-	550,000	2,773,853
June	997,548	(1,162,320)	580,741	-	60	(134,801)	612,732	-	5	-	57,846	1,251,320	700,808	(387,286)	792,723	-	-	7,936	4,023	(21,774)	168,138	-	-	550,000	2,770,116
July	1,552,898	(1,464,054)	669,585	-	65	(155,137)	457,660	-	7	-	57,853	1,185,099	454,161	(779,524)	467,360	-	-	7,936	36,926	(32,658)	172,406	-	-	550,000	2,382,801
August	1,362,160	(1,299,161)	732,584	-	33	(168,059)	289,634	-	5	-	57,859	1,080,077	409,455	(381,205)	495,609	-	-	7,936	29,720	(15,102)	187,024	-	-	550,000	2,320,646
September	2,781,918	(2,661,712)	852,791	-	15	(211,328)	78,321	-	4	-	57,863	988,975	447,076	(499,838)	442,847	-	-	7,936	67,868	(100,000)	154,893	-	-	-	2,144,650
				Interest Rate at 1.671700% as of 10/01/19				Interest Rate at 1.671700% as of 10/01/19					Account opened to segregate Greyhound Funds						CD setup March 6, 2020						
				Interest Rate at 1.459600% as of 11/01/19				Interest Rate at 1.459600% as of 11/01/19					\$7,935.77 belongs to CVTD deposited to maintain account						Interest Rate is 1%, term is 1 Year						
				Interest Rate at 1.341300% as of 12/30/19				Interest Rate at 1.341300% as of 12/30/19																	
				Interest Rate at 1.339200% as of 01/02/2020				Interest Rate at 1.339200% as of 01/02/2020																	
				Interest Rate at 1.324000% as of 02/03/2020				Interest Rate at 1.324000% as of 02/03/2020																	
				Interest Rate at 1.333900% as of 03/02/2020				Interest Rate at 1.333900% as of 03/02/2020																	
				Interest Rate at 0.396100% as of 04/01/2020				Interest Rate at 0.396100% as of 04/01/2020																	
				Interest Rate at 0.106900% as of 06/01/2020				Interest Rate at 0.106900% as of 06/01/2020																	
				Interest Rate at 0.140000% as of 07/01/2020				Interest Rate at 0.140000% as of 07/01/2020																	
				Interest Rate at 0.115400% as of 08/03/2020				Interest Rate at 0.115400% as of 08/03/2020																	
				Interest Rate at 0.088000% as of 09/01/2020				Interest Rate at 0.088000% as of 09/01/2020																	





June 2023



The Head Start office requires our program to report enrollment statistics to determine if programs have achieved and maintained enrollment levels. Enrollment data will be collected every month. This information will be combined enrollment for Head Start and Early Head Start and the Pregnant Mom's Program. – *Ofelia Baron*

### Enrollment – April

	Funded Enrollment	Reported Enrollment	Percent Enrollment
Head Start Funded	407	411	99%
Early Head Start Funded	120	120	100%
Pregnant Moms Funded	8	8	100%

### Disability – April

	Current	Actual Enrollment
HS # of Children with IEP	34	406
Percentage this month	8%	
EHS Children with IFSP	11	119
Percentage this month	9%	
<b>Total # of children with IEP/IFSP</b>	<b>45</b>	<b>525</b>
Program wide % this month	9%	

### HEAD START STAFF

Administrative Office  
5430 Link Road  
Phone (325)944-9666

**Carolina Raymond**  
Director

**Stephanie Hernandez**  
Assistant Director / Early Head Start  
Education Manager

**Cheryl Mayberry**  
Education & Disability Manager

**Ofelia Barron**  
ERSEA & Facility Manager

**Mary Husted**  
Compliance & Nutrition Specialist

**Stacy Walker**  
Family & Community, Parent  
Engagement Manager

**Melissa Miranda**  
Health & Mental Health Manager



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COUNCIL OF GOVERNMENTS



**Head Start**

## HEAD START & EARLY HEAD START

**HEAD START (HS)** promotes school readiness of children under 5 from low-income families through education, health, social and other services.

**Early Head Start (EHS)** provides intensive comprehensive child development and family support services to low-income infants and toddlers under the age of 3 and their families, and to pregnant women and their families.



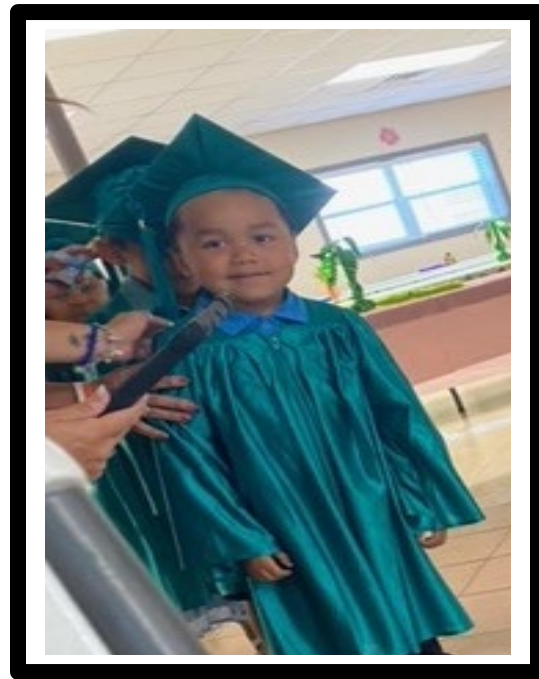
**To complete an online please contact the following sites below:**

School	Director	Family Service Workers	Hours Operation	Phone
Christoval Head Start	Antionette Day	Antionette Day	7:45 am - 3:30 pm	325-896-7281
Day Head Start Early Head Start	Comoshontai Hollis	Cynthia Sosa Nelda Garza Lori Palacios Maida Rojas	7:45 am - 4:00 pm	325-481-3395
Eden Head Start	Mary Torres	Mary Torres	7:45 am - 3:30 pm	325-869-8703
Eldorado Head Start	Abigail Ussery	Abigail Ussery	7:45 am - 3:30 pm	325-853-3366
Menard Head Start Early Head Start	Bertha DeAnda	Bertha DeAnda	7:45 am - 3:30 pm	325-396-2885
Ozona Head Start	Tracy Ybarra	Tracy Ybarra	7:45 am - 3:30 pm	325-392-3429
Rio Vista Head Start Early Head Start	Michelle Aguirre	Kristy Geary Rebecca Salinas Maria Vasquez Emily Ceballos	7:45 am - 4:00 pm	325-659-3670



## Program News

- Selection Criteria will remain the same for the 2023-2024 School Year.
- The relocation of classrooms from Blackshear Head Start to Rio Vista and Day Head Start are going well and should be completed by the end of next week.



Above you will see a couple of sweet graduates of CVCOG Head Start. On the right is Abby Ussery our Head Start Director whom was a graduate of Eldorado Head Start in 1998. On the left is her son Vincent who is a 2023 graduate from Eldorado Head Start. Children who enrolled in Head Start programs are more likely to graduate from high school and attend college, have improved social, emotional, and behavioral development, and are better prepared to be parents themselves than similar children who did not attend the program. Children enrolled in Early Head Start programs have significantly fewer child welfare encounters related to sexual or physical abuse between the ages of 5 and 9 than those who don't attend.



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# Head Start

**CVCOG Head Start/Early Head Start  
Job Postings**

**June 23**



## Job Positions Available

Early Head Start Teacher @ Day

Head Start Teacher Assistant @ Day and Rio Vista

Head Start Teacher @ Day

Substitutes @ San Angelo, Christoval, Eldorado, Menard, Eden, Ozona

Cook @ Ozona

Part-Time Cook/Custodian @ Rio Vista and Day

Cook/Custodian Substitute @ San Angelo

EHS Teacher Floater @ Rio Vista

**CVCOG Head Start/Early Head Start**

**325-944-9666 / <https://www.cvcog.org/cvcog/>**

**5430 Link Rd. San Angelo, TX 76903**