

# Report to Congress on Head Start Monitoring



## FISCAL YEAR 2018



ADMINISTRATION FOR  
**CHILDREN & FAMILIES**

Office of Head Start  
Administration for Children and Families  
U.S. Department of Health and Human Services

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**TABLE OF CONTENTS**

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<b>Executive Summary .....</b>	<b>3</b>
<i>FY 2018 Aligned Monitoring System (AMS) .....</i>	<i>3</i>
<i>Outcomes of FY 2018 Monitoring Reviews .....</i>	<i>6</i>
<i>New Directions in Monitoring for FY 2019 .....</i>	<i>8</i>
<b>Introduction .....</b>	<b>9</b>
<b>I. Head Start Program Services .....</b>	<b>10</b>
<b>II. Monitoring of Head Start Grantee Organizations .....</b>	<b>11</b>
<i>Monitoring Review Events .....</i>	<i>11</i>
<i>Basic Mechanics of the Monitoring Process .....</i>	<i>14</i>
<i>The Office of Head Start Monitoring Protocols .....</i>	<i>15</i>
<i>Standardized Methodology and Reviewer Reliability .....</i>	<i>16</i>
<i>Designation Renewal System .....</i>	<i>17</i>
<i>Centralized Quality Control and Finalization of Review Reports .....</i>	<i>18</i>
<b>III. Grantee Monitoring Review Outcomes .....</b>	<b>19</b>
<i>Types of Monitoring Reviews Conducted .....</i>	<i>19</i>
<i>Grantee Review Outcomes .....</i>	<i>20</i>
<i>Number and Types of Findings Identified .....</i>	<i>22</i>
<i>Most Frequently Cited Areas of Noncompliance and Areas of Deficiency .....</i>	<i>24</i>
<b>IV. CLASS® .....</b>	<b>31</b>
<b>V. Designation Renewal System Results .....</b>	<b>33</b>
<b>VI. Annual Review of the FY 2018 Fiscal Monitoring Procedures .....</b>	<b>34</b>
<i>FY 2018 Fiscal Infrastructure Protocol .....</i>	<i>34</i>
<b>VII. New Directions in Monitoring for FY 2019 .....</b>	<b>36</b>
<b>Appendix: Glossary .....</b>	<b>37</b>
<b>Appendix: Tables .....</b>	<b>46</b>

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**TABLE OF EXHIBITS**


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Exhibit 1: Types of FY 2018 Reviews .....	4
Exhibit 2: Types of FY 2018 Reviews .....	19
Exhibit 3: FY 2018 Review Outcomes for Grant by Review Type .....	21
Exhibit 4: FY 2018 Focus Area Two Outcomes by Grantee Size (N=547) .....	22
Exhibit 5: FY 2018 Distribution of Reviewed Grantees by Number of Findings in Focus Area Two (N=549) .....	23
Exhibit 6: FY 2018 Distribution of Reviewed Grantees With Focus Area Two Findings by Total Number of Findings .....	24
Exhibit 7: Performance Issues Most Frequently Cited Among Areas of Noncompliance in FY 2018 Focus Area Two Reviews (n = 280) .....	25
Exhibit 8: Performance Issues Most Frequently Cited Among Areas of Noncompliance in FY 2018 Special Reviews (n = 211) .....	26
Exhibit 9: Performance Issues Most Frequently Cited as Deficient in FY 2018 Focus Area Two (n = 19) .....	27
Exhibit 10: Performance Issues Most Frequently Cited as Deficient in FY 2018 Special Reviews (n = 172) .....	28
Exhibit 11: FY 2018 Follow-Up Review Outcomes (n = 164) .....	29
Exhibit 12: Performance Issues Most Frequently Elevated, FY 2018 (n = 40) .....	30
Exhibit 13: FY 2018 Average CLASS® Scores by Dimension (N = 462) .....	31
Exhibit 14: FY 2018 Average CLASS® Scores by Domain (N=462) .....	32
Exhibit 15: FY 2018 Number of Grants Subject to Recompensation Under the DRS and Reason for Inclusion (n = 160) .....	33

## **Executive Summary**

This report presents a summary of the findings of fiscal year (FY) 2018 Head Start monitoring reviews, fulfilling the reporting requirement in Section 641A(f) of the Head Start Act. It highlights the enhancements made to the FY 2018 monitoring review system, summarizes grantee review outcomes, and describes the types of findings most commonly identified in FY 2018.

### **FY 2018 Aligned Monitoring System (AMS)**

In September 2016, the Office of Head Start (OHS) issued the first holistic revision and complete reorganization of the Head Start Program Performance Standards (HSPPS) since their original publication in 1975. OHS significantly modified the FY 2017 review schedule to provide opportunities for the Head Start community to implement the new HSPPS and for OHS to refine its system to monitor the new HSPPS. OHS implemented the new aligned monitoring system in FY 2018.

The revised Aligned Monitoring System (AMS 2.0) was designed to monitor the newly implemented HSPPS, streamline the monitoring process, and reduce grantee burden of having multiple review events from multiple agencies. AMS 2.0 retained some components from its original design, including CLASS<sup>®</sup>, Special,<sup>1</sup> and Follow-up reviews, which were implemented with procedures identical to those implemented in the original AMS. AMS 2.0 also introduced two new review types: Focus Area One and Focus Area Two. **Exhibit 1** summarizes the types of reviews conducted in FY 2018.

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<sup>1</sup> Special reviews were termed “Other” or “Targeted” reviews in previous fiscal years.

**Exhibit 1: Types of FY 2018 Reviews**

Type of Review	Description
<b>Focus Area One</b>	<ul style="list-style-type: none"> <li>▶ An off-site review that entailed reviewing grantee documentation and engaging in discussions (via conference call) with the program’s director and management team focused on the grantee’s program design, management, and governance structure.</li> </ul>
<b>Focus Area Two</b>	<ul style="list-style-type: none"> <li>▶ An onsite review that—through classroom explorations, data tours, and discussions with program management, staff, parents, the governing body, the policy council, and teachers—assessed how grantees operate their programs and provide quality services that meet children’s and families’ needs and comply with HSPPS and other federal and state requirements.</li> </ul>
<b>CLASS®</b>	<ul style="list-style-type: none"> <li>▶ Evaluated the quality of teacher–child interactions that promote positive child outcomes.</li> </ul>
<b>Special</b>	<ul style="list-style-type: none"> <li>▶ Conducted for grantees if they are determined to be at risk.</li> </ul>
<b>Follow-up</b>	<ul style="list-style-type: none"> <li>▶ Conducted for grantees found to be out of compliance with Head Start requirements to ensure that all findings are corrected.</li> <li>▶ This report includes information on Follow-up reviews for all grantees with outstanding findings that were reviewed in FY 2018, including grantees with findings that originated in previous fiscal years.</li> </ul>

Notes: Focus Area One reviews were typically conducted by one Review Lead. Focus Area Two reviews were typically conducted with three reviewers led by a Review Lead. To assess grantee compliance, review teams used the Office of Head Start Monitoring Protocols, which employ a standardized approach to assess program services and quality.

The remainder of this section describes the Focus Area One and Focus Area Two review events.

***Focus Area One***

Focus Area One provided an opportunity for grantees to discuss how they selected their program options, developed their management structure, and designed their services to meet the needs of the children and families they serve. This review was exploratory in nature and designed to provide feedback to the grantee early in its grant cycle on its program design, planning, and processes for providing program services.

During this review, grantees described approaches to:

- ▶ Program design and management.
- ▶ Designing quality education and child development program services.
- ▶ Designing quality health program services.
- ▶ Designing quality family and community engagement program services.

- ▶ Developing effective eligibility, recruitment, selection, enrollment, and attendance (ERSEA) strategies and fiscal infrastructure.

The Focus Area One review was an off-site activity that entailed reviewing grantee documentation (e.g., grant application, community assessment, Program Information Report) and engaging in discussions (via conference call) with the program’s director and management team.

Prior to the discussions with the grantee, the reviewer talked with the grantee’s regional program and fiscal specialists to gain the regional office staff’s perspective on the grantee.

### ***Focus Area Two***

Focus Area Two provided an opportunity for grantees to demonstrate their effectiveness in implementing a high-quality program to promote positive outcomes and school readiness for children and their families. This focus area was designed to broaden OHS’s understanding of each grantee’s performance and to determine if programs are meeting the requirements of the HSPPS, the Office of Management and Budget’s (OMB) *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (commonly called “Uniform Guidance”), and Head Start Act. The Focus Area Two review focused on:

- ▶ Program design and management.
- ▶ Monitoring and implementing quality education and child development services.
- ▶ Monitoring and implementing quality health program services.
- ▶ Monitoring and implementing quality family and community engagement services.
- ▶ Monitoring and implementing fiscal infrastructure.
- ▶ Monitoring effective ERSEA: eligibility and attendance.

Focus Area Two was an onsite review event that provided an opportunity for grantees to demonstrate how they operate their programs and provide quality services that meet children’s and families’ needs and comply with HSPPS and other federal and state requirements. The reviewers learned about grantee performance prior to the onsite review by first reviewing documents such as the grant application, self-assessment summary results, annual reports to the public, reports on program goals, enrollment reports, progress and performance reports, and annual updates to the community assessment. In addition, similar to the approach in Focus Area One, reviewers talked with the grantee’s assigned program and fiscal specialists to learn additional information about the regional office’s experiences with the grantee and understanding of the grantee’s performance.

The onsite review included discussions, classroom explorations, and data tours. Discussions occurred with program management, staff, parents, the governing body, the policy council, and teachers (at the end of each classroom exploration). Data tours were a new feature of the onsite review. Conducted with management staff, center leaders, and directors, data tours provided an opportunity for the grantee staff to show the data they collect, analyze, use, and share to make informed program decisions.

After each review event, grantees received a report that summarized findings and/or concerns for that specific content area.

### **Outcomes of FY 2018 Monitoring Reviews**

OHS conducted reviews of 696 grantees in FY 2018. Of the 696 grantees that received monitoring reviews:<sup>2</sup>

- ▶ 55 received a Focus Area One review.
- ▶ 549 received an Focus Area Two review.
- ▶ 143 received at least one Special review.
- ▶ 146 received at least one Follow-up review.<sup>3</sup>
- ▶ 462 received a CLASS<sup>®</sup> review.

Monitoring reviews have three possible outcomes: compliant, one or more noncompliances with no deficiencies, or one or more deficiencies (with or without noncompliances). A “noncompliance” is issued if OHS determines sufficient evidence and documentation exist of a grantee’s failure to comply with a given HSPPS or regulation. A “deficiency,” as defined by the Head Start Act, as amended in 2007, is:

*(A) Systemic or substantial material failure of an agency in an area of performance that the Secretary determines involves:*

- (i) A threat to the health, safety, or civil rights of children or staff;*
- (ii) A denial to parents of the exercise of their full roles and responsibilities related to program operations;*
- (iii) A failure to comply with standards related to early childhood development and health services, family and community partnerships, or program design and management;*
- (iv) The misuse of funds received under this subchapter;*
- (v) Loss of legal status (as determined by the Secretary) or financial viability, loss of permits, debarment from receiving Federal grants or contracts, or the improper use of Federal funds; or*
- (vi) Failure to meet any other Federal or State requirement that the agency has shown an unwillingness or inability to correct, after notice from the Secretary, within the period specified;*

*(B) Systemic or material failure of the governing body of any agency to fully exercise its legal and fiduciary responsibilities; or*

*(C) An unresolved area of noncompliance.*

Observed areas of noncompliance or deficiencies are referred to as “findings.” The determination of a noncompliance or a deficiency is based on evidence collected by the review

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<sup>2</sup> The sum of the numbers of different review types is greater than the number of reviewed grantees because grantees can receive more than one review during the fiscal year.

<sup>3</sup> A total of 164 Follow-up reviews were conducted among the 146 grants. Of the 164 Follow-up reviews completed in FY 2018, 75 (45.7 percent) were follow-ups of reviews completed in previous fiscal years.



team during the monitoring review. If there is not sufficient evidence of a noncompliance or a deficiency, then the grantee is considered “compliant.”

Key outcomes of monitoring reviews included:

- ▶ **High percentages of grantees reviewed in Focus Area One and Focus Area Two were compliant with the monitored standards.** Of the 55 grantees that underwent a Focus Area One, review, all (100.0 percent) were found to be compliant with the monitored standards. Of the 549 grantees that underwent a Focus Area Two review, almost three-quarters (74.1 percent) were found to be compliant with the monitored standards.
- ▶ **The majority of grantees who received Special reviews were found to be deficient.** Of the 143 grantees that underwent a Special review in FY 2018, 66.4 percent were found to have 1 or more deficiencies and 33.6 percent were found to have 1 or more noncompliances (and no deficiencies).
- ▶ **Grantees corrected nearly all findings on Follow-up reviews.** Among grantees that received Follow-up reviews in FY 2018, 85.7 percent of findings were corrected, while 14.3 percent of findings were not corrected.
- ▶ **Head Start program CLASS® average domain scores in FY 2018 were similar to those found in FY 2017.<sup>4</sup>** Grantees had average CLASS® scores of 6.08 out of 7 for Emotional Support and 5.80 out of 7 for Classroom Organization domains. As in FY 2017, scores for Instructional Support were notably lower than those for the other domains, averaging 2.96 out of 7.

### ***Number and Types of Findings Identified in FY 2018***

Key trends with respect to the number and types of findings included:

- ▶ **In Focus Area Two reviews, most FY 2018 grantees with “noncompliant” findings had a small number of findings.** Among grantees with only Focus Area Two noncompliances, 74.6 percent had one or two findings. In contrast, of grantees with at least one Focus Area Two deficiency, 61.6 percent of those had six or more findings. However, these results should be interpreted with caution as only a small number of grantees (N = 13) had a Focus Area Two deficiency.
- ▶ **Grantees struggled with a range of issues in FY 2018.** “Staff Qualifications” was the most commonly cited noncompliance issue in FY 2018 Focus Area Two reviews, with 9.9 percent of “noncompliant” citations in this area. The next most commonly cited noncompliance issues were “Physical Arrangements Consistent with the Health, Safety, and Developmental Needs of Children” (7.5 percent), “Determining Child Health Status” (7.1 percent), “Financial Management Systems” (7.1 percent), and “Teaching Practices in Support of Child Development” (6.7 percent).

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<sup>4</sup> In FY 2017, grantees had average CLASS® scores of 6.07 out of 7 for Emotional Support, 5.83 out of 7 for Classroom Organization, and 3.00 out of 7 for the Instructional Support domains.



- ▶ **Overall, a small percentage of grantees had identified deficiencies in FY 2018 reviews.** Almost 15 percent (14.5 percent) of grantees who received a in Focus Area One, Focus Area Two, and/or Special reviews had an identified deficiency. A higher proportion of Special reviews resulted in an identified deficiency. Almost two-thirds (66.4 percent) of grantees who had a Special review had an identified deficiency. Among those, 70.5 percent of the “deficient” citations were related to Code of Conduct, which aligns with OHS’s concern for the safety of Head Start and Early Head Start children. Examples of Code of Conduct deficiencies include engaging in corporal punishment or leaving children alone or unsupervised.

### **New Directions in Monitoring for FY 2019**

In FY 2019, OHS will continue to implement enhancements to improve the consistency and quality of the monitoring process. Substantial changes were made prior to the FY 2018 reviews as a result of the reorganization of the HSPPS. As a result, OHS anticipates continued refinements between the FY 2018 and FY 2019 Monitoring Protocols that will focus on streamlining the protocols and reviewing methodology to continually improve efficiencies within the monitoring system. Examples of some enhancements include:

- ▶ **Streamline and remove redundancy in the protocols.** Redundant protocol questions and standards will be removed or combined with other questions to reduce overlap within each of the protocols. This enhancement will improve the efficiency and effectiveness of the monitoring review.
- ▶ **Increase review team staffing.** An additional reviewer will be added to each Focus Area Two review. The larger team will allow for:
  - Data tour discussions to have a separate note taker and a facilitator;
  - The Review Lead to focus on the production of the Head Start Review Report while onsite; and
  - Another reviewer to conduct the Eligibility Child File review, relieving the Fiscal reviewer of that responsibility and allowing him/her more time to focus on the review of the grantees’ fiscal management systems (see below).
- ▶ **Enhance the Fiscal Infrastructure protocol to focus on systemic issues related to fiscal risk.** In FY 2019, the Fiscal Infrastructure protocol will be enhanced to focus on the largest areas of fiscal risk for grantees—procurement and personnel and fringe benefits. The fiscal reviewer will have additional time to review the grantee’s fiscal management systems and transactions, as the reviewer will no longer be responsible for completing the Eligibility Child File review.

## **Introduction**

Head Start monitoring assesses grantee compliance with requirements governing Head Start programs, including those specified in the Head Start Act (original authorizing legislation in 1965 and its subsequent amendments, most recently in 2007); Head Start Program Performance Standards (HSPPS); and other applicable federal, state, and local regulations. The HSPPS include provisions surrounding education, health, mental health, disabilities, nutrition, family and community partnerships, management, governance, facilities, enrollment, recruitment and selection, and program design.

The Head Start Act mandates that each Head Start grantee receive a monitoring review at least once every 3 years; each newly designated grantee be reviewed after the completion of its first year (and then at least once every 3 years thereafter); and all grantees that “fail to meet the standards” receive Follow-up reviews. Reviewers knowledgeable about Head Start conducted fiscal year (FY) 2018 reviews, with Review Leads leading teams of reviewers, where appropriate. Each review was guided by the standardized methodology and the Monitoring Protocols, which guide reviewers’ onsite activities in assessing program performance and compliance.

Grantees with a finding (an area of noncompliance [ANC] or a deficiency) on any monitoring review receive a more targeted Follow-up review to ensure they have corrected any previously identified findings. If a grantee does not correct an ANC within the specified period of time, it becomes a deficiency. Deficiencies must be corrected (1) immediately, if the Secretary finds that the deficiency threatens the health or safety of staff or program participants or the integrity of federal funds, or (2) within a period not to exceed 1 year, under a Quality Improvement Plan (QIP). If the grantee does not correct the deficiency within 1 year, then the Office of Head Start (OHS) initiates the termination process or the grantee may relinquish the grant. If a review determines children or staff members are in imminent danger with no immediate solution, then OHS may suspend the program, assign an interim provider so services are not interrupted, and only permit the program to reopen when the grantee has resolved the problem satisfactorily.

This report fulfills the FY 2018 reporting requirement found in Section 641A(f) and 650(c)(2) of the Head Start Act, which requires a summary report to be published at the end of each federal fiscal year on the findings of monitoring reviews and outcomes of QIPs.

**I. Head Start Program Services**

Head Start, created in 1965 under the Head Start Act (42 U.S.C. 9801, et seq.), is a national program that provides comprehensive child development services primarily to low-income children (ages 0 to 5) and their families. Head Start promotes school readiness by enhancing the physical, social, and cognitive development of children through educational, health, nutritional, social, and other services. It recognizes the important role of parents, encouraging them to participate in a variety of activities and experiences that support and foster their children's development and learning and help them progress toward their educational, literacy, and employment goals. Head Start also requires programs to provide opportunities for parental involvement in the development, conduct, and governance of local programs through participation in policy groups (e.g., Policy Councils).

Head Start is administered by OHS of the Administration for Children and Families (ACF) within the U.S. Department of Health and Human Services (HHS). The ACF Regional Offices, OHS's American Indian and Alaska Native (AI/AN) Programs branch, and OHS's Migrant and Seasonal Programs branch award grants directly to local public agencies, private organizations, Indian tribes, and school systems for the purpose of operating Head Start programs at the community level.

### II. Monitoring of Head Start Grantee Organizations

The following sections describe the basic mechanics of the monitoring process, the reporting system, the steps OHS has taken to improve how the process works, and key monitoring changes OHS implemented in FY 2018.

#### Monitoring Review Events

In September 2016, the OHS issued the first holistic revision and complete reorganization of the HSPPS since their original publication in 1975. OHS significantly modified the FY 2017 review schedule to provide opportunities for the Head Start community to implement the new HSPPS and for OHS to refine its system to monitor the new HSPPS. OHS implemented the new monitoring system in FY 2018.

In FY 2018, OHS implemented a revised Aligned Monitoring System (AMS 2.0) to monitor the newly implemented HSPPS, streamline the monitoring process for grantees, and reduce grantee burden of receiving multiple review events from multiple agencies (e.g., Head Start, licensing, etc.). AMS 2.0 is comprised of five review events:

- ▶ Focus Area One
- ▶ Focus Area Two
- ▶ CLASS®
- ▶ Follow-up
- ▶ Special

The monitoring process used a rigorous, evidence-based approach to confirm that grantees comply with federal legislative, regulatory, and program requirements. CLASS®, Follow-up, and Special reviews were implemented with procedures identical to those implemented in the original AMS.

CLASS® and Focus Area Two reviews were scheduled beginning in October 2017. Focus Area One reviews were scheduled beginning in January 2018.

#### *Focus Area One*

Focus Area One provided an opportunity for grantees to discuss how they selected their program options, how they developed their management structure, and how they designed their services to meet the needs of the children and families they serve. This review was exploratory in nature and designed to provide feedback to the grantee early in its grant cycle on its program design, planning, and processes for providing program services. Focus Area One discussions focused on the grantees' program design, management, and governance structure. Grantees described approaches to:

- ▶ Program design and management.
- ▶ Designing quality education and child development program services.

- ▶ Designing quality health program services.
- ▶ Designing quality family and community engagement program services.
- ▶ Developing effective eligibility, recruitment, selection, enrollment, and attendance (ERSEA) strategies and fiscal infrastructure.

The Focus Area One review was an off-site activity that entailed reviewing grantee documentation (e.g., grant application, community assessment, Program Information Report) and engaging in discussions (via conference call) with the program’s director and management team.

Prior to the discussions with the grantee, the reviewer talked with the grantee’s regional program and fiscal specialists to get additional information on the grantee.

### **Focus Area Two**

Focus Area Two provided an opportunity for grantees to demonstrate their effectiveness in implementing a high-quality program to promote positive outcomes and school readiness for children and their families. This focus area was designed to broaden OHS’s understanding of each grantee’s performance and to determine if programs are meeting the requirements of the HSPPS, the Office of Management and Budget’s (OMB) *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Health and Human Services (HHS) Awards, 45 CFR Part 75* (commonly called “Uniform Guidance”), and Head Start Act. The Focus Area Two review focused on:

- ▶ Program design and management.
- ▶ Monitoring and implementing quality education and child development services.
- ▶ Monitoring and implementing quality health program services.
- ▶ Monitoring and implementing quality family and community engagement services.
- ▶ Monitoring and implementing fiscal infrastructure.
- ▶ Monitoring effective ERSEA: eligibility and attendance.

Focus Area Two was an onsite review event that provided an opportunity for grantees to demonstrate how they operate their programs and provide quality services that meet children’s and families’ needs and comply with HSPPS and other federal and state requirements. The reviewers learned about grantee performance prior to the onsite review by first reviewing documents such as the grant application, self-assessment summary results, annual reports to the public, reports on program goals, enrollment reports, progress and performance reports, and annual updates to the community assessment.

The onsite review included discussions, classroom explorations, and data tours. Discussions occurred with program management, staff, parents, the governing body, the policy council, and teachers (at the end of each classroom exploration). Data tours were a new feature of the onsite review. Conducted with management staff, center leaders, and directors, data tours provided an opportunity for the grantee staff to show the data they collect, analyze, use, and share to make informed program decisions.

### *CLASS®*

To gain a better understanding of the quality of Head Start classrooms, grantees with center-based or combination-option classrooms serving preschool-age children receive the CLASS® review. Reviewers used CLASS® as a tool to evaluate the quality of teacher–child interactions that promote positive child outcomes. CLASS® scores ranged from one to seven, with one indicating the lowest quality interactions and seven indicating the highest quality interactions. One dimension, Negative Climate, was inverse scored, with seven indicating the lowest quality interactions and one indicating the highest quality interactions. In FY 2018, 462 CLASS® reviews were conducted.

CLASS® dimensions were grouped into three overall domains: Classroom Organization, Emotional Support, and Instructional Support. Reviewers used the dimensions in the Classroom Organization domain to evaluate the way teachers organize and manage students’ behavior, time, and attention in the classroom. Reviewers used the dimensions in the Emotional Support domain to evaluate the ways that teachers support children’s social and emotional functioning in the classroom. Finally, reviewers used the dimensions in the Instructional Support domain to form an index of the instructional value of the classroom. The dimensions were divided among the domains as follows:

Classroom Organization	Emotional Support	Instructional Support
<ul style="list-style-type: none"> <li>▶ Behavior management</li> <li>▶ Productivity</li> <li>▶ Instructional learning formats</li> </ul>	<ul style="list-style-type: none"> <li>▶ Positive climate</li> <li>▶ Negative climate</li> <li>▶ Teacher sensitivity</li> <li>▶ Regard for student perspective</li> </ul>	<ul style="list-style-type: none"> <li>▶ Concept development</li> <li>▶ Feedback quality</li> <li>▶ Language modeling</li> </ul>

Following updates made to the FY 2012 CLASS® Protocol, randomly selected, statistically driven sample sizes continued to be used to identify which grantees’ classes were observed in FY 2018. The monitoring software reflected the classes selected for the sample and provided replacement classrooms as needed. Two cycles were observed per classroom. Research done by the tool developer supported this number, indicating that for purposes of monitoring and attaining a valid score at the grantee level, maximizing the number of classrooms observed across the program should take priority over the number of cycles observed within an individual classroom. OHS continued to provide reviewers with rigorous training on implementing OHS’s defined CLASS® methodology (e.g., timing and settings for observations, and conditions under which observations should or should not occur).

### *Special and Follow-Up*

Grantees received Special reviews if OHS determined the grantee was at risk (e.g., OHS is alerted that a health and safety issue or that a potential financial oversight violation has occurred). Any grantee found to be out of compliance with Head Start requirements during any review received a Follow-up review to ensure that all findings were corrected.

### Basic Mechanics of the Monitoring Process

Prior to the start of the fiscal year, OHS sent a global letter to all 5-year grantees to advise them of the reviews they would receive during the fiscal year. Grantees scheduled for an announced review then received written notification of the specific date of the review 30 days prior to the onsite review. Soon after receipt of the official written notification of the review date, the Review Lead (RL) (a qualified senior non-federal consultant) contacted the grantee to begin scheduling onsite activities. Prior to the review, team members reviewed grantee documents posted on the OHS monitoring website. In FY 2018, nine review events<sup>5</sup> were unannounced, in which OHS's monitoring review team does not provide the grantee with advanced notification of the review's occurrence. This allows OHS to observe grantees without grantees preparing for the review in advance of the monitoring team's arrival. The information gathered from these reviews provides OHS with a more candid, less planned interaction with the grantee, providing a different perspective into the day-to-day struggles and successes that the grantees encounter.

In terms of the conduct of each type of review, each Focus Area One review event was conducted remotely by an RL, and generally took place over a 3- to 5-day period.

Managed by an RL, Focus Area Two review events are conducted onsite by three to four qualified non-federal consultants (who are supervised by the assigned RL) and generally occur over a 5-day period. Focus Area Two review team sizes vary depending on the size and complexity of the grantee. For example, larger grantees, including those with delegate agencies and those with complex program designs (e.g., grantees with both Head Start and Early Head Start programs) may require more reviewers. The largest grantees, considered "super grantees," require both substantially larger review teams and longer review periods.

Once onsite, the Focus Area Two review team initiates the information collection process, which is guided by the OHS Monitoring Protocols. Review teams rely on multiple modes of inquiry—interviews with concurrent documentation review, observations, and analysis—to assess grantee compliance with program requirements. Team members share information with their RL on a routine basis through the IT-AMS<sup>6</sup> software application, team meetings, email, and telephone communications. The RL also facilitates nightly team meetings to discuss and document preliminary findings and to identify areas requiring further exploration. The onsite review culminates in the development of a preliminary report of findings that is submitted to OHS. OHS makes final determinations on the grantee's compliance and notifies grantees of any areas that require correction.

Grantees received Special reviews that are not included in the original schedule of reviews if OHS determined the program to be at risk. These reviews occurred onsite or offsite (remotely, from the Regional Office), depending on the nature of the concern being investigated.

Monitoring reviews had three possible outcomes: compliant, one or more noncompliances with no deficiencies, or one or more deficiencies (with or without noncompliances). A "noncompliance" was issued if OHS determined sufficient evidence and documentation existed

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<sup>5</sup> The FY 2018 unannounced reviews were all Special review events.

<sup>6</sup> IT-AMS is the Office of Head Start's secure online data management system.



of a grantee's failure to comply with a given HSPPS or regulation. A "deficiency," as defined by the Head Start Act, as amended in 2007, is:

*(A) Systemic or substantial material failure of an agency in an area of performance that the Secretary determines involves:*

- (i) A threat to the health, safety, or civil rights of children or staff;*
- (ii) A denial to parents of the exercise of their full roles and responsibilities related to program operations;*
- (iii) A failure to comply with standards related to early childhood development and health services, family and community partnerships, or program design and management;*
- (iv) The misuse of funds received under this subchapter;*
- (v) Loss of legal status (as determined by the Secretary) or financial viability, loss of permits, debarment from receiving Federal grants or contracts, or the improper use of Federal funds; or*
- (vi) Failure to meet any other Federal or State requirement that the agency has shown an unwillingness or inability to correct, after notice from the Secretary, within the period specified;*

*(B) Systemic or material failure of the governing body of any agency to fully exercise its legal and fiduciary responsibilities; or*

*(C) An unresolved area of noncompliance.*

Observed areas of noncompliance or deficiencies were referred to as "findings." OHS determined, on the basis of the review, whether grantees were compliant, had areas of noncompliance that did not constitute deficiencies, or had deficiencies. Grantees found to have had an area of noncompliance (ANC) or a deficiency received a Follow-up review to ensure that the finding was corrected.

### **The Office of Head Start Monitoring Protocols**

The OHS Monitoring Protocols are designed to guide review teams in assessing grantee compliance with the HSPPS and the Head Start Act. The protocols reflect the department's continued commitment to ensuring that the national monitoring system assesses grantees in a uniform, thorough, and consistent manner. The Focus Area One and Focus Area Two review events each have their own protocols to guide the respective review events.

Each protocol was organized into Performance Measures (PMs), which grouped together related program requirements for that content area and highlighted key objectives that programs should have achieved in their service delivery and management system design and implementation (e.g., School Readiness). Each PM contained one or more criteria, which were linked to specific standards; together the criteria helped reviewers assess whether the grantee was meeting the higher level objectives outlined within the PM statement. Review teams gathered evidence to support the assessment of compliance for each criteria. Each protocol indicated the people to

interview, questions to ask, information to retrieve from documents, observations to conduct, and management systems to analyze and summarize.

A series of guides was developed to organize the evidence-gathering process. These guides, which organized the review questions by method of data collection and source, included:

- ▶ Interview Guides (including documents reviewed with the grantee during interviews)
- ▶ Observation Guides
- ▶ Child File Review Guides

The evidence collected through each guide was linked to PMs and used to assist review teams in making their assessments.

### **Standardized Methodology and Reviewer Reliability**

To ensure consistency, objectivity, and accuracy within the review process, OHS has established a standardized methodology that governs the conduct of each review type. The standardized methodology defines the process by which every team collects, documents, analyzes, and reports on data for each grantee participating in a review. The methodology standardizes various components of the review events, such as interacting and communicating with the grantee, sampling files and classrooms, determining acceptable times for conducting observations, facilitating discussions with grantee and Regional Office staff, and other review activities.

### ***Sampling***

The FY 2018 Monitoring Protocol continued to use random samples for staff files, child files, and class/group observations (such as CLASS<sup>®</sup>) to ensure the generalizability of information collected through the review process. The sample size and composition were determined by a probability-driven algorithm that selected a random sample to ensure that monitoring review observations were valid and generalizable to an entire grantee. The sampling algorithm was implemented in the OHS monitoring software to ensure consistency in its implementation.

### ***The Reviewer Pool***

OHS ensured that each review was staffed by individuals who were knowledgeable about Head Start programs and monitoring. With the objective of maintaining the integrity of the reviewer pool, OHS has a number of policies and procedures to guide the pre-review preparation, post-review learning, and improvement of reviewers. Review teams were created based on a governing framework that limited reviewers who were employed by a Head Start grantee or delegate agency to a certain number of reviews per year and prevented them from reviewing programs in their own states. OHS also maintains a process for providing review team members with a standard set of grantee documents for review in advance of the site visit as well as weekly pre- and post-review team briefings. Through post-review briefings, OHS identified the processes that needed to be strengthened and the areas in which additional support was required to facilitate reviewers' work. These efforts continued to maintain the efficiency and effectiveness of the review teams.

### **Reporting**

OHS utilized a system of exception-based reporting to comply with the federal mandate to inform grantees of findings that should be corrected (Section 641A[e] of the Head Start Act, as amended in 2007). Fundamental to the reporting process was the collection, verification, and substantiation of evidence from multiple sources to corroborate findings of noncompliance. As guided by the Monitoring Protocol, review teams conducted interviews with program staff, Policy Council and governing board members, parents, and others; observed children and teachers in classroom settings; and reviewed program documents and materials, as well as children's files, to assess compliance with Head Start requirements.

If, during an onsite review, the RL identified a deficiency that required immediate corrective action, an HHS responsible official provided written notice of the deficiency requiring immediate correction. The RL was authorized to direct the grantee to take immediate corrective action to ensure that staff and/or children were removed from imminent harm or immediate danger and that the cause of the imminent harm or immediate danger was corrected. The corrective action required of the grantee to correct the immediate deficiency was provided in the notice.

### **Designation Renewal System**

In FY 2009 and FY 2010, in response to mandates in the 2007 reauthorization of the Head Start Act, OHS developed regulations that created a Designation Renewal System (DRS). Under the DRS, grantees that are found to not be delivering high-quality and comprehensive Head Start programs are subject to recompetition for their grants. HHS issued proposed regulations articulating the details of the proposed DRS in September 2010. On November 9, 2011, the final DRS was published in the *Federal Register*; it became effective December 9, 2011.

- ▶ The first cohort of 132 grantees required to recompete under DRS was announced in December 2011.
- ▶ The second cohort of 122 grantees required to recompete under DRS was announced in February 2013.
- ▶ The third cohort of 103 grantees required to recompete under DRS was announced in February 2014.
- ▶ The fourth cohort of 90 grantees required to recompete under DRS was announced in December 2014.
- ▶ The fifth cohort of 12 grantees required to recompete under DRS was announced in March 2016.
- ▶ The FY 2017 DRS cohort of 58 grantees required to recompete under DRS was announced in April 2017.<sup>7</sup>

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<sup>7</sup> In FY 2017, OHS started referencing DRS cohorts by the fiscal year in which the grantees required to compete under DRS were announced.

- ▶ The FY 2018 DRS cohort of 171 grantees required to recompetete under DRS was announced in January 2018.

Details about the FY 2019 DRS cohort based on monitoring reviews in FY 2018 are as follows:

- ▶ The total number of grants subject to recompetition = 160
- ▶ The number of grants subject to recompetition due to low CLASS® scores alone = 48
- ▶ The number of grants subject to recompetition due to deficiencies alone = 101
- ▶ The number of grants subject to recompetition due to low CLASS® scores and deficiencies = 10
- ▶ The number of grants subject to recompetition due to a non-monitoring reason = 1<sup>8</sup>

### **Centralized Quality Control and Finalization of Review Reports**

After each review event, grantees received a report that summarized findings and/or concerns for that specific content area. To ensure consistency in monitoring, OHS's central office is responsible for the form, content, and issuance of monitoring reports to grantees. OHS assumes responsibility for the quality assurance process to ensure that the Head Start review reports submitted by review teams following the onsite review meet rigorous standards for accuracy, clarity, and legal soundness. Centralization of quality control and the heavy emphasis on evidence-based findings increase consistency in the quality, detail, specificity, and utility of Head Start review reports. A centralized process also increases timeliness in issuing monitoring review reports to grantees.

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<sup>8</sup> One grant was determined to have a “going concern” which, in accordance with section 1304.11(g), qualifies that grant to recompetete for continued funding.

### III. Grantee Monitoring Review Outcomes

This section presents basic descriptive data on Head Start monitoring reviews conducted in FY 2018, specifically addressing the following:

- ▶ Types of monitoring reviews conducted
- ▶ Grantee review outcomes
- ▶ Number and types of findings identified
- ▶ Most frequently cited areas of noncompliance and areas of deficiency
- ▶ Correction of findings during Follow-up reviews

#### Types of Monitoring Reviews Conducted

This report to Congress on Head Start Monitoring for FY 2018 focuses on the cohort of grantees who underwent Focus Area One, Focus Area Two, CLASS®, Special, and Follow-up reviews and who received review reports in FY 2018. **Exhibit 2** summarizes the five types of reviews conducted in FY 2018.

#### Exhibit 2: Types of FY 2018 Reviews

Type of Review	Description
<b>Focus Area One</b>	▶ An off-site review that entailed reviewing grantee documentation and engaging in discussions (via conference call) with the program’s director and management team focused on the grantee’s program design, management, and governance structure.
<b>Focus Area Two</b>	▶ An onsite review that—through classroom explorations, data tours, and discussions with program management, staff, parents, the governing body, the policy council, and teachers—assessed how grantees operate their programs and provide quality services that meet children’s and families’ needs and comply with HSPPS and other federal and state requirements.
<b>CLASS®</b>	▶ Evaluated the quality of teacher–child interactions that promote positive child outcomes.
<b>Special</b>	▶ Conducted for grantees if they are determined to be at risk.
<b>Follow-up</b>	<ul style="list-style-type: none"> <li>▶ Conducted for grantees found to be out of compliance with Head Start requirements to ensure that all findings are corrected.</li> <li>▶ This report includes information on Follow-up reviews for all grantees with outstanding findings that were reviewed in FY 2018, including grantees with findings that originated in previous fiscal years.</li> </ul>

Notes: Focus Area One reviews were typically conducted by one Review Lead. Focus Area Two reviews were typically conducted with three reviewers led by a Review Lead. To assess grantee compliance, review teams used the Office of Head Start Monitoring Protocols, which employ a standardized approach to assess program services and quality.

This report also includes information on Follow-up reviews for all grantees with outstanding findings that were reviewed in FY 2018, including grantees with findings that originated in previous fiscal years.

#### Grantee Review Outcomes

After a review was completed, OHS issued a Head Start Review Report to each grantee. The report indicated the compliance outcome of the review and the Head Start program requirement(s) for which OHS found the grantee to be out of compliance. The compliance outcome was a function of the final determination made by OHS on each of the findings documented by the review team during the review. Each finding issued by OHS was one of two types: noncompliant or deficient.

Grantees with no findings received a review determination of “compliant.” If a grantee was found to only have areas of noncompliance, then it received a review determination of “noncompliant,” which is referred to throughout this report as “having one or more noncompliances.” If a grantee was found to have one or more deficiencies, regardless of whether it also had noncompliances, then it received a review determination of “deficient,” referred to throughout this report as “having one or more deficiencies.” Grantees also could be cited with an “immediate deficiency” finding on their reviews. These findings affected the grantee’s status in the same way as a “deficient” finding. However, unlike a “deficient” finding, if an “immediate deficiency” was found, the grantee received a separate report and was required to correct the issue immediately upon receipt.

Of the 696 grantees that received monitoring reviews in FY 2018:<sup>9</sup>

- ▶ 55 received a Focus Area One review.
- ▶ 549 received a Focus Area Two review.
- ▶ 143 received a Special review.
- ▶ 146 received a Follow-up review.<sup>10</sup>
- ▶ 462 received a CLASS<sup>®</sup> review.

**Exhibits 3, 4, and 5** present outcomes for grantees that received Focus Area One, Focus Area Two, and/or Special reviews. **Exhibit 6** presents outcomes for grantees receiving a Follow-up review. A glossary at the end of this report provides a full definition of each type of review.

**Exhibit 3** displays review types and outcomes for grantees receiving those reviews in FY 2018. All grantees (100.0 percent) that received a FY 2018 Focus Area One review had a compliant review outcome.<sup>11</sup> In FY 2018, 74.1 percent of grantees receiving a Focus Area Two review had compliant outcomes.

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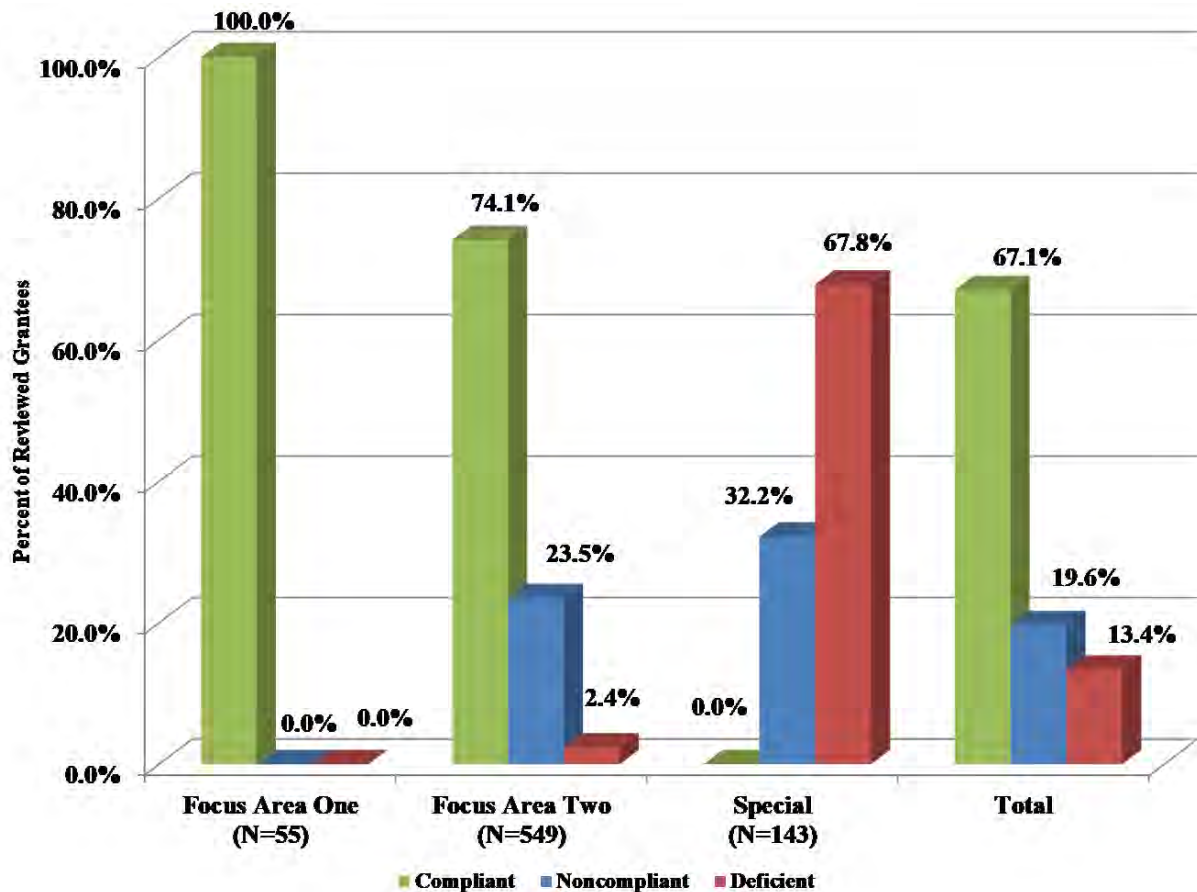
<sup>9</sup> The sum of the numbers of different review types is greater than the number of reviewed grantees because grantees can receive more than one review during the fiscal year. This report presents data that are current as of March 26, 2019.

<sup>10</sup> A total of 164 Follow-up reviews were conducted among the 146 grants. Of the 164 Follow-up reviews completed in FY 2018, 75 (45.7 percent) were follow-ups of reviews completed in previous fiscal years.

<sup>11</sup> Because all grantees that received a Focus Area One review in FY 2018 were compliant, charts presenting Focus Area One review outcome patterns (e.g., review outcomes by grantee size) are not presented in this report.

Across all reviews, a small proportion (13.4 percent) of grantees was found deficient. In FY 2018, deficiencies were found at the highest rate in Special reviews, which monitor grantee performance outside of the scheduled reviews. On a Special review, Regional Office staff or local community members request that OHS focus a review on known or suspected issues.

**Exhibit 3: FY 2018 Review Outcomes for Grant by Review Type**

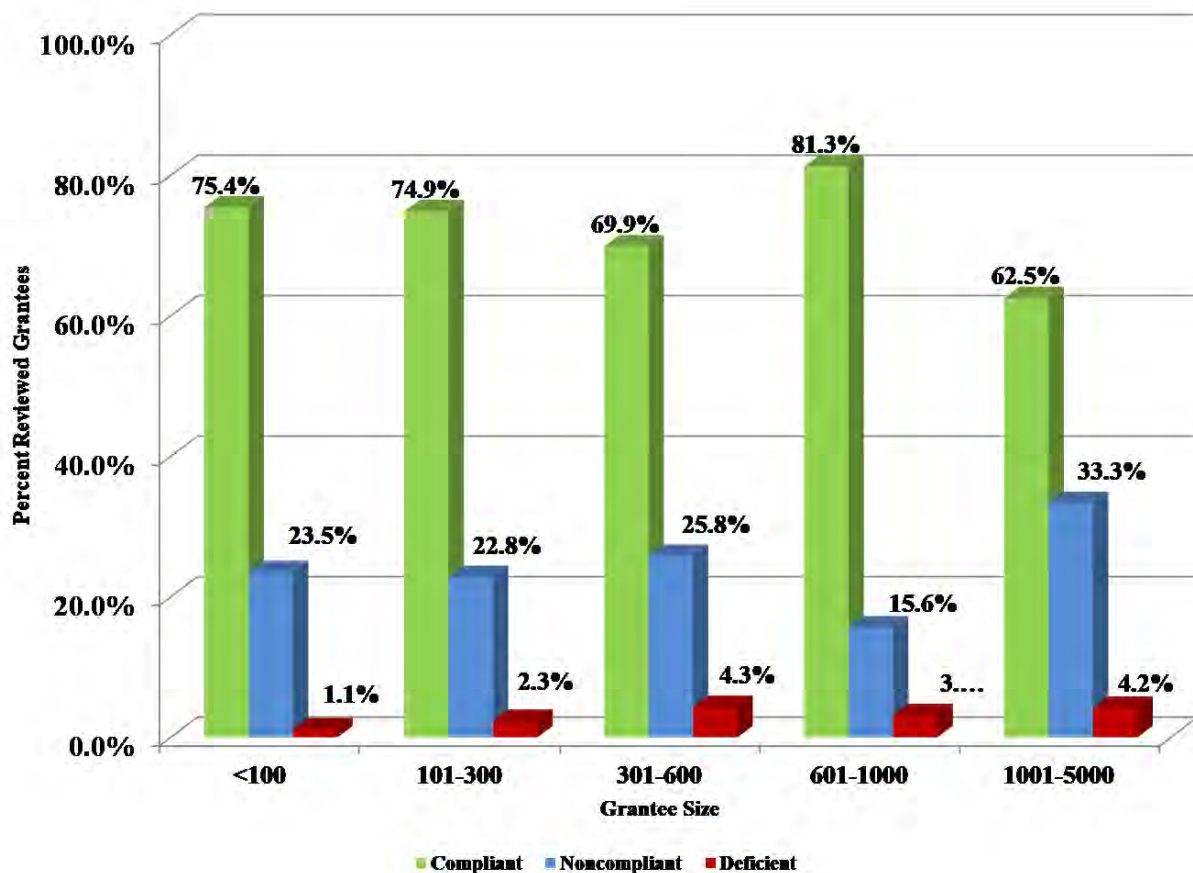


**Note:** Due to rounding, percentages may not always appear to add up to 100%.

**Exhibit 4** shows how review outcomes in Focus Area Two vary by grantee size. In FY 2018, larger grantees were cited for slightly more deficiencies than smaller grantees. For grantees with 300 or fewer students enrolled, approximately 1 to 2 percent were cited for at least 1 deficiency. Comparatively, approximately 4 percent of grantees with 1,001 to 5,000 students were cited with at least 1 deficiency. Similarly, smaller grantees were slightly less likely to be noncompliant compared to larger grantees. Less than 26 percent of grantees with 1,000 students or fewer had “noncompliant” reviews, while approximately one-third of grantees with 1,001 to 5,000 students were cited for 1 or more areas of noncompliance.



**Exhibit 4: FY 2018 Focus Area Two Outcomes by Grantee Size (N = 547)<sup>12</sup>**



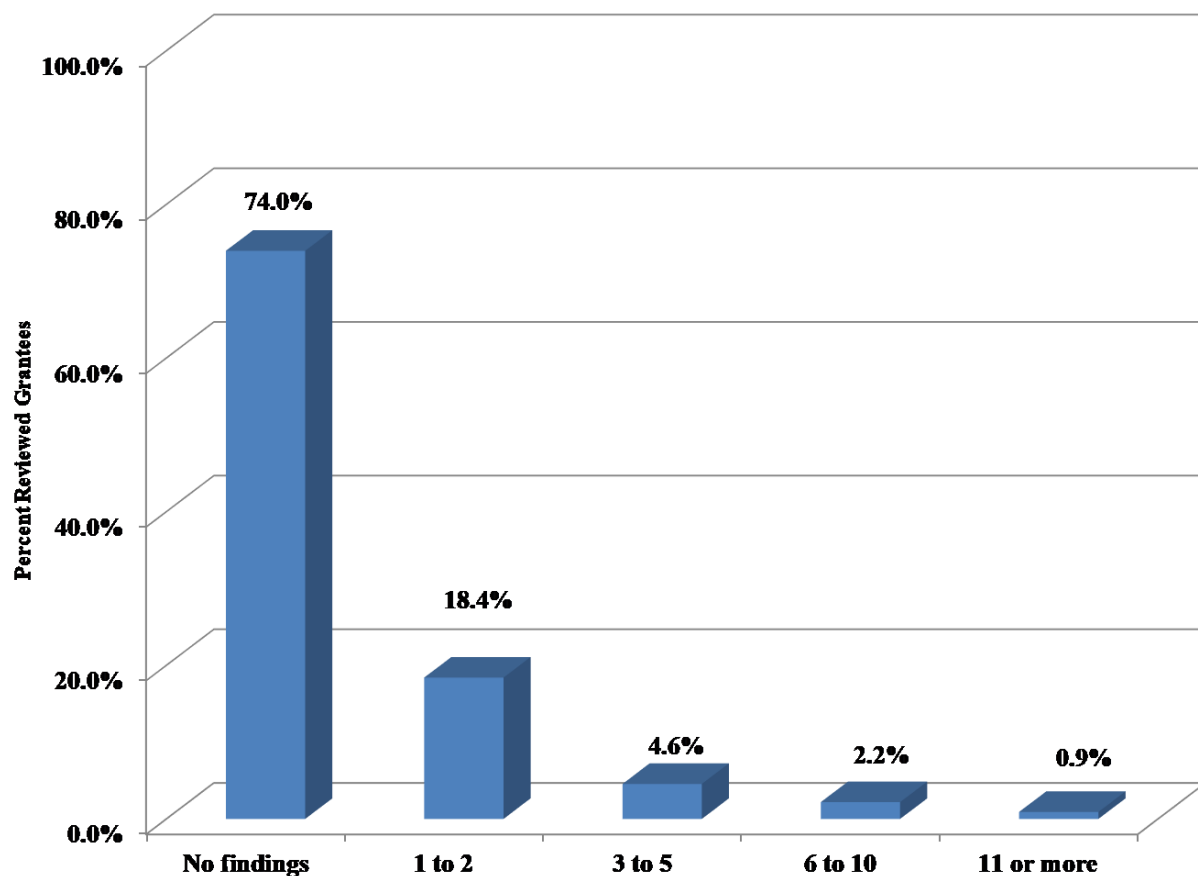
**Note:** Due to rounding, percentages may not always appear to add up to 100%.

### Number and Types of Findings Identified

**Exhibit 5** focuses on FY 2018 Focus Area Two reviews alone, showing the number of findings, either noncompliances or deficiencies, per grantee. In Focus Area Two reviews, approximately three-quarters of grantees (74.0 percent) had no findings. Approximately one-fifth of grantees (18.4 percent) had only one or two findings total in their Focus Area Two review. At the other end of the spectrum, less than 1 percent of grantees reviewed had 11 or more total findings in their Focus Area Two review.

<sup>12</sup> Grantee size was not available for two grantees.

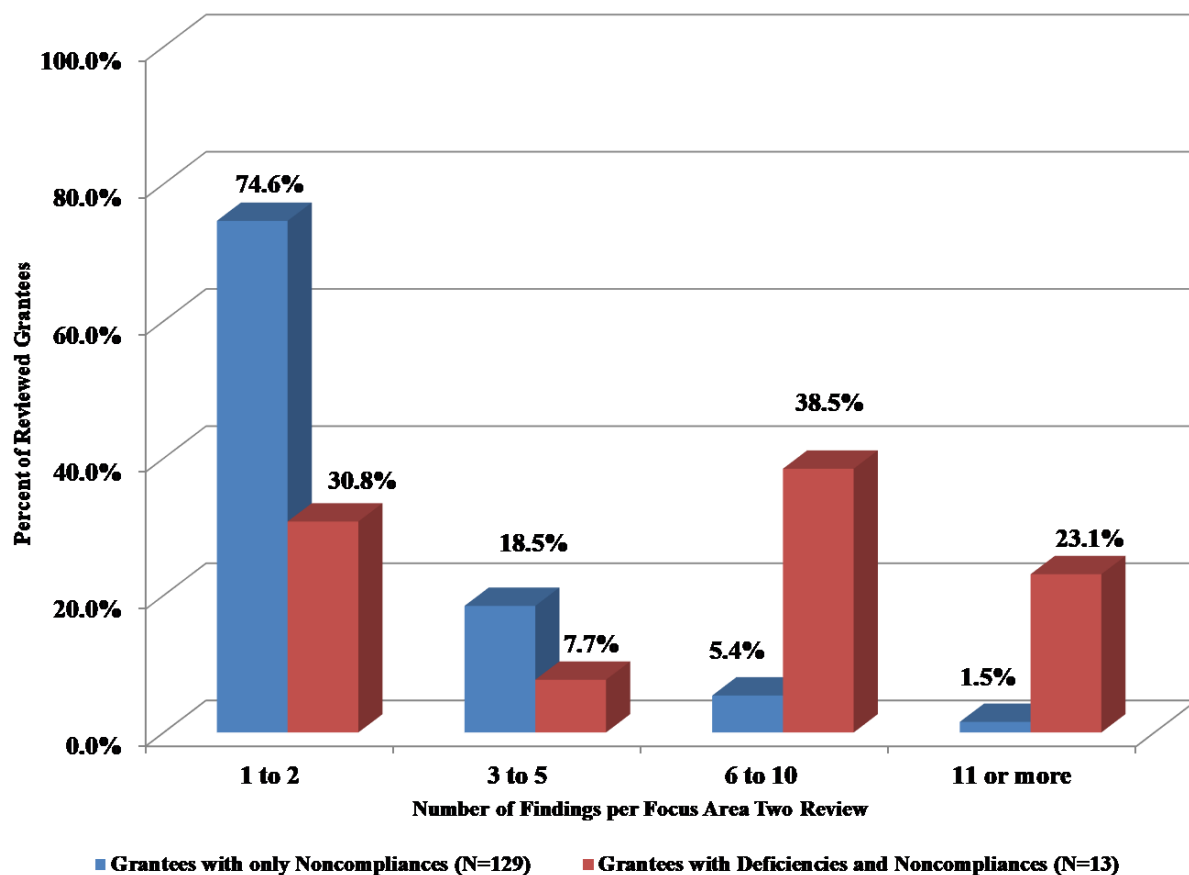
**Exhibit 5: FY 2018 Distribution of Reviewed Grantees by Number of Findings in Focus Area Two (N = 549)**



**Note:** Due to rounding, percentages may not always appear to add up to 100%.

**Exhibit 6** focuses on the subset of grantees that had findings on FY 2018 Focus Area Two Reviews. Grantees with deficient review outcomes tended to have more compliance issues to address. The majority of grantees (74.6 percent) with a Focus Area Two noncompliant review outcome had only one or two findings, while the majority of grantees with a deficient outcome (61.6 percent) had 6 or more findings. However, it should be noted that only 13 grantees had a deficiency in FY 2018.

Among noncompliant grantees, there was an average of 2.4 “noncompliant” findings per grantee. Among grantees cited for at least one deficiency, grantees had, on average, 8.1 “noncompliant” findings and 2.3 “deficient” findings.

**Exhibit 6: FY 2018 Distribution of Reviewed Grantees with Focus Area Two Findings by Total Number of Findings**

**Note:** Due to rounding, percentages may not always appear to add up to 100%.

### Most Frequently Cited Areas of Noncompliance and Areas of Deficiency

#### *Most Frequently Cited Areas of Noncompliance*

This section presents the most frequently cited areas of noncompliance in the FY 2018 reviews. Regarding the Focus Area One reviews, no grantee (of the 55 grantees that received a Focus Area One review) had a Focus Area One finding in FY 2018.

**Exhibit 7** displays the 10 most frequently cited issues among grantees who received a finding in FY 2018 Focus Area Two reviews. In FY 2018, “Staff Qualifications” was the issue most frequently cited during Focus Area Two reviews; approximately one-tenth (9.9 percent) of all grantees who had findings on Focus Area Two reviews were cited in this area. “Physical Arrangements Consistent with the Health, Safety, and Developmental Needs of Children” was the second most frequently cited issue, with 7.5 percent of areas of noncompliance focusing on issues such as whether the facilities are free from pollutants, hazards, and toxins. The third most frequently cited issues in Focus Area Two reviews were “Determining Child Health Status” and

“Financial Management Systems.” Grantees cited for these issues did not consistently complete activities such as determining within 90 days of the child first attending the program whether the child is up to date on age appropriate preventative and primary medical and oral health care or did not have a financial management system that met certain requirements, such as providing effective control over, and accountability for, all funds, property, and other assets.

**Exhibit 7: Performance Issues Most Frequently Cited Among Areas of Noncompliance in FY 2018 Focus Area Two Reviews (n = 280)**

Rank	Issue	Grantees Reviewed With Noncompliant Focus Area Two Citations	
		n	%
1	Staff Qualifications	28	9.9%
2	Physical Arrangements Consistent with the Health, Safety, and Developmental Needs of Children	21	7.5%
3	Determining Child Health Status	20	7.1%
3	Financial Management Systems	20	7.1%
5	Teaching Practices in Support of Child Development	18	6.4%
5	Allowable and Allocable Costs	18	6.4%
7	Assessment of Children	13	4.6%
8	Reporting Systems	11	3.9%
8	Ongoing Monitoring of Grantee Operations and Delegates	11	3.9%
10	Code of Conduct	10	3.6%

Note: The number of grantees with at least one cited area of noncompliance in a Focus Area Two Review = 129. Since grantees may be cited for multiple citations, there can be overlap in the categories and sum of all “noncompliant” citations on Focus Area Two Reviews is greater than the number of grantees with at least one cited area of noncompliance in a Focus Area Two Review.

**Exhibit 8** displays the most frequently cited areas of noncompliance among grantees who received a finding in FY 2018 Special reviews. In FY 2018, “Code of Conduct,” which aligns with OHS’s concern for the safety of Head Start and Early Head Start children. was the issue most frequently cited during Special reviews; almost one-quarter (24.6 percent) of citations on Special reviews were in this area. Examples of Code of Conduct deficiencies include engaging in corporal punishment or leaving children alone or unsupervised. “Reporting Systems” was the

second most frequently cited issue, with 13.3 percent of citations on Special reviews. The third most frequently cited issue in Special reviews was “Allowable and Allocable Costs.”

**Exhibit 8: Performance Issues Most Frequently Cited Among Areas of Noncompliance in FY 2018 Special Reviews (n = 211)**

Rank	Issue	Noncompliant Citations on Special Reviews	
		n	%
1	Code of Conduct	52	24.6%
2	Reporting Systems	28	13.3%
3	Allowable and Allocable Costs	17	8.1%
4	Physical Arrangements Consistent with the Health, Safety, and Developmental Needs of Children	15	7.1%
5	Governing Body Responsibility	10	4.7%
5	Governing Body Composition	10	4.7%
7	Financial Management Systems	8	3.8%
8	Staff Qualifications	7	3.3%
9	Ongoing Monitoring of Grantee Operations and Delegates	6	2.8%
9	Comparability of Wages	6	2.8%
11	Criminal Record Check	5	2.4%
11	Reporting to the Governing Body and Policy Council	5	2.4%
11	Record-Keeping Systems	5	2.4%

Note: The number of grantees with at least one cited area of noncompliance in a Special review = 91. Since grantees may be cited for multiple citations, there can be overlap in the categories and sum of all “noncompliant” citations on Special reviews is greater than the number of grantees with at least one cited ANC in a Special review.

### ***Most Frequently Cited Areas of Deficiency***

According to the Head Start Act, a deficiency can fall into one of six categories:

- ▶ A threat to the health, safety, or civil rights of children or staff
- ▶ A denial to parents of the exercise of their full roles and responsibilities related to program governance

- ▶ A failure to perform substantially the requirements related to Early Childhood Development and Health Services, Family and Community Partnerships, or Program Design and Management
- ▶ The misuse of Head Start grant funds; the loss of legal status or financial viability
- ▶ Any other violation of federal or state requirements that the agency has failed to correct

In FY 2018, deficiencies were identified in Focus Area Two and Special reviews. There were no deficiencies identified from Focus Area One reviews in FY 2018. **Exhibits 9** and **10** display the most frequently cited areas of deficiency for FY 2018 Focus Area Two and Special reviews, respectively. As seen in **Exhibit 9**, over one-quarter (5 out of 19, 26.3 percent) of Focus Area Two deficiencies pertained to “Code of Conduct,” which primarily reflects an issue with grantees leaving children unattended or unsupervised for longer durations of time (compared to those incidents that resulted in a noncompliance). Issues pertaining to “Ongoing Monitoring of Grantee Operations and Delegates” were the second most common deficiency with 15.8 percent (3 out of 19) of “deficient” findings cited for this reason. Issues pertaining to “Governing Body Responsibilities,” “Program Planning,” and “Criminal Record Checks” were the third most common deficiencies (2 out of 19 citations, 10.5 percent for each of these issues).

**Exhibit 9: Performance Issues Most Frequently Cited as Deficient in FY 2018 Focus Area Two (n = 19)**

Rank	Issue	Deficient Citations on Focus Area Two Reviews	
		n	%
1	Code of Conduct	5	26.3%
2	Ongoing Monitoring of Grantee Operations and Delegates	3	15.8%
3	Governing Body Responsibilities	2	10.5%
3	Program Planning	2	10.5%
3	Criminal Record Checks	2	10.5%
6	Record-Keeping Systems	1	5.3%
6	Assessment of Children	1	5.3%
6	Staff Qualifications	1	5.3%
6	Professional Development Plans	1	5.3%
6	Organizational Structure/Staffing	1	5.3%

Note: The number of grantees with at least one cited deficiency in a Focus Area Two review = 13. Since grantees may be cited for multiple citations, there can be overlap in the

categories and the sum of all “deficient” citations on Focus Area Two reviews is greater than the number of grantees with at least one cited deficiency in a Focus Area Two review.

**Exhibit 10** focuses on deficiencies identified during Special reviews. Over 70 percent (79 out of 172, 71.5 percent) of deficiencies from Special reviews were for a “Code of Conduct” deficiency. These code of conduct issues pertained to grantees leaving children unattended or unsupervised for significant durations of time or engaging in inappropriate punishment. Issues pertaining to “Governing Body Responsibilities” was the third most common deficiency with more than 5 percent (14 out of 172, 8.1 percent) of deficiency citations.

#### **Exhibit 10: Performance Issues Most Frequently Cited as Deficient in FY 2018 Special Reviews (n = 172)**

Rank	Issue	Deficient Citations on Special Reviews	
		n	%
1	Code of Conduct	79	71.5%
2	Physical Arrangements Consistent with the Health, Safety and Developmental Needs of Children	18	10.5%
3	Governing Body Responsibilities	14	8.1%
4	Financial Management Systems	5	2.9%
5	Determining Child Health Status	3	1.7%
6	Record Keeping Systems	2	1.2%
6	Governing Body Composition	2	1.2%
7	Criminal Record Checks	1	0.6%
7	Maintenance, Repair, Safety, and Security of all Facilities, Materials, and Equipment	1	0.6%
7	Reporting Systems	1	0.6%
7	Organizational Structure/Staffing	1	0.6%
7	Allowable and Allocable Costs	1	0.6%

Note: The number of grantees with at least one cited deficiency in a Special review = 95. Since grantees may be cited for multiple citations, there can be overlap in the categories and sum of all “deficient” citations on Special reviews is greater than the number of grantees with at least one cited deficiency in a Special review.

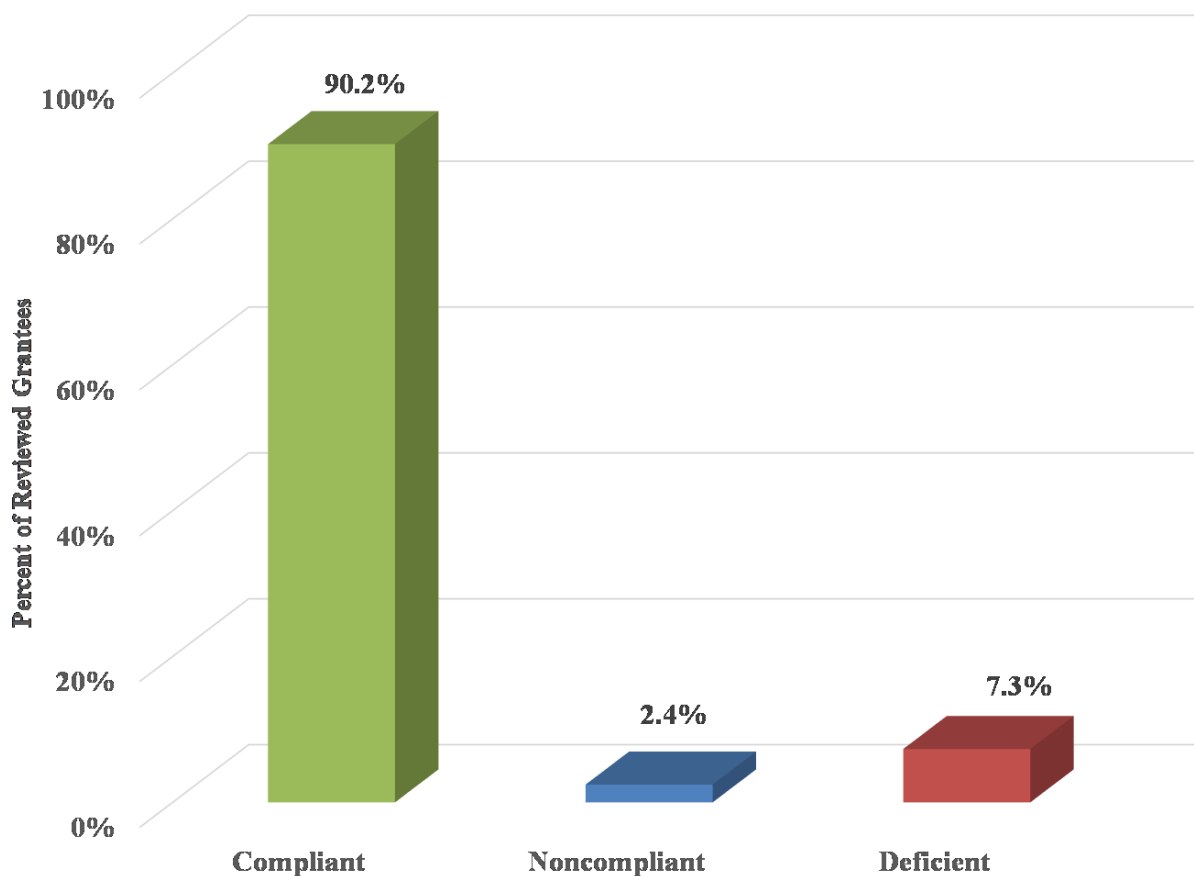


#### *Review Outcomes for Follow-up Reviews (Correction of Findings)*

Overall, most grantees were successful in correcting their findings on follow-up. **Exhibit 11** displays the outcomes of the 164 FY 2018 Follow-up reviews. In FY 2018, 90.2 percent of Follow-up reviews had a compliant outcome, reflecting that grantees had corrected the issues identified previously.

Of the 279 citations reviewed on FY 2018 Follow-up reviews, 239 (85.7 percent) were corrected on their Follow-up review; 40 (14.3 percent) were not corrected.

**Exhibit 11: FY 2018 Follow-Up Review Outcomes (n = 164)**



**Note:** Due to rounding, percentages may not always appear to add up to 100%.

**Exhibit 12** displays the 10 most frequently cited elevated findings in FY 2018 reviews. Among FY 2018 reviews, the most commonly cited issues on elevated findings were related to “Code of Conduct” (42.5 percent of grantees with elevated findings).

**Exhibit 12: Performance Issues Most Frequently Elevated, FY 2018 (n = 40)**

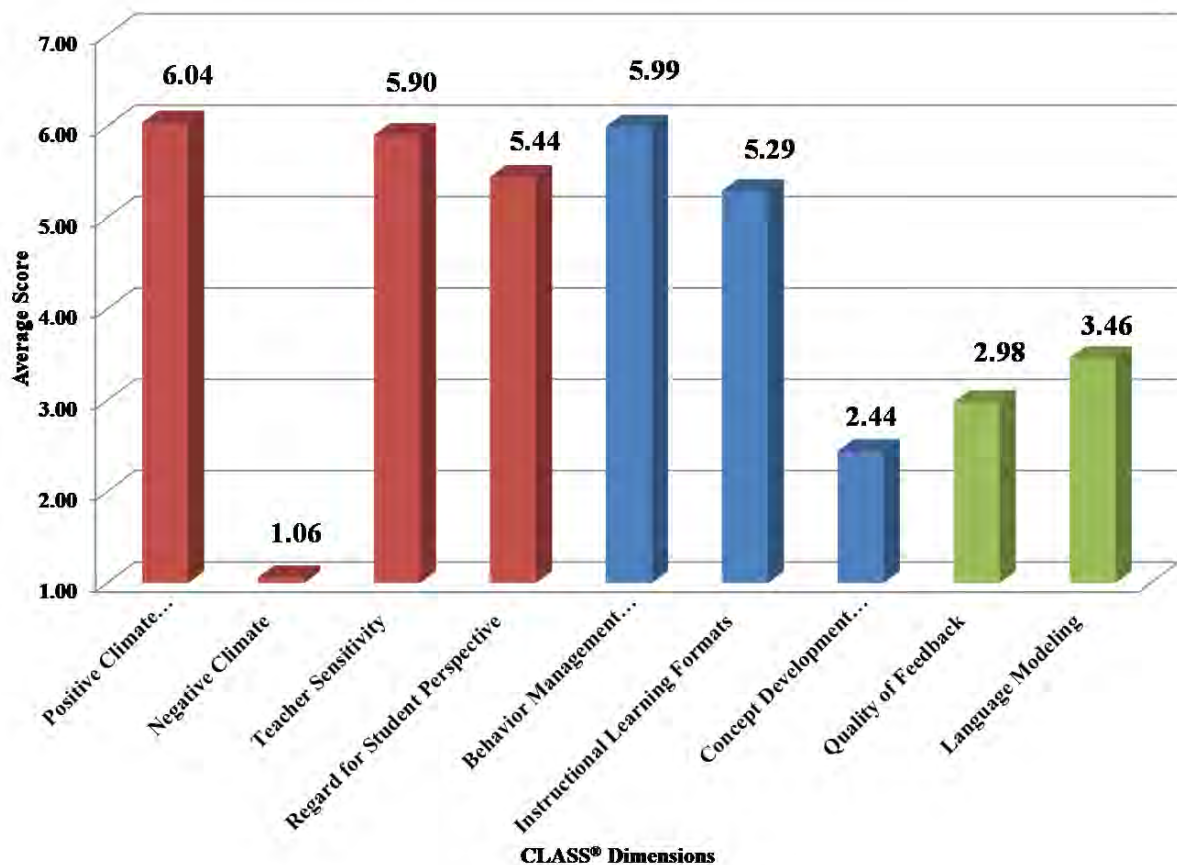
Rank	Issue	Grantees Reviewed with Elevated Findings	
		N	%
1	Code of Conduct	17	42.5%
2	Financial Management Systems	8	20.0%
2	Allowable and Allocable Costs	8	20.0%
4	Organizational Structure/Staffing	1	2.5%
4	Reporting Systems	1	2.5%
4	Record Keeping Systems	1	2.5%
4	Vehicular Safety	1	2.5%
4	Determining Child Health Status	1	2.5%
4	Depreciation and Use Allowance	1	2.5%
4	Facilities Purchase, Major Renovations, and Construction	1	2.5%

Note: The number of grantees with at least one elevated finding in a Follow-up review = 11. Since grantees may be cited for multiple citations, there can be overlap in the categories and sum of all “deficient” citations on Follow-up reviews is greater than the number of grantees with at least one cited deficiency in a Follow-up review.

## IV. CLASS®

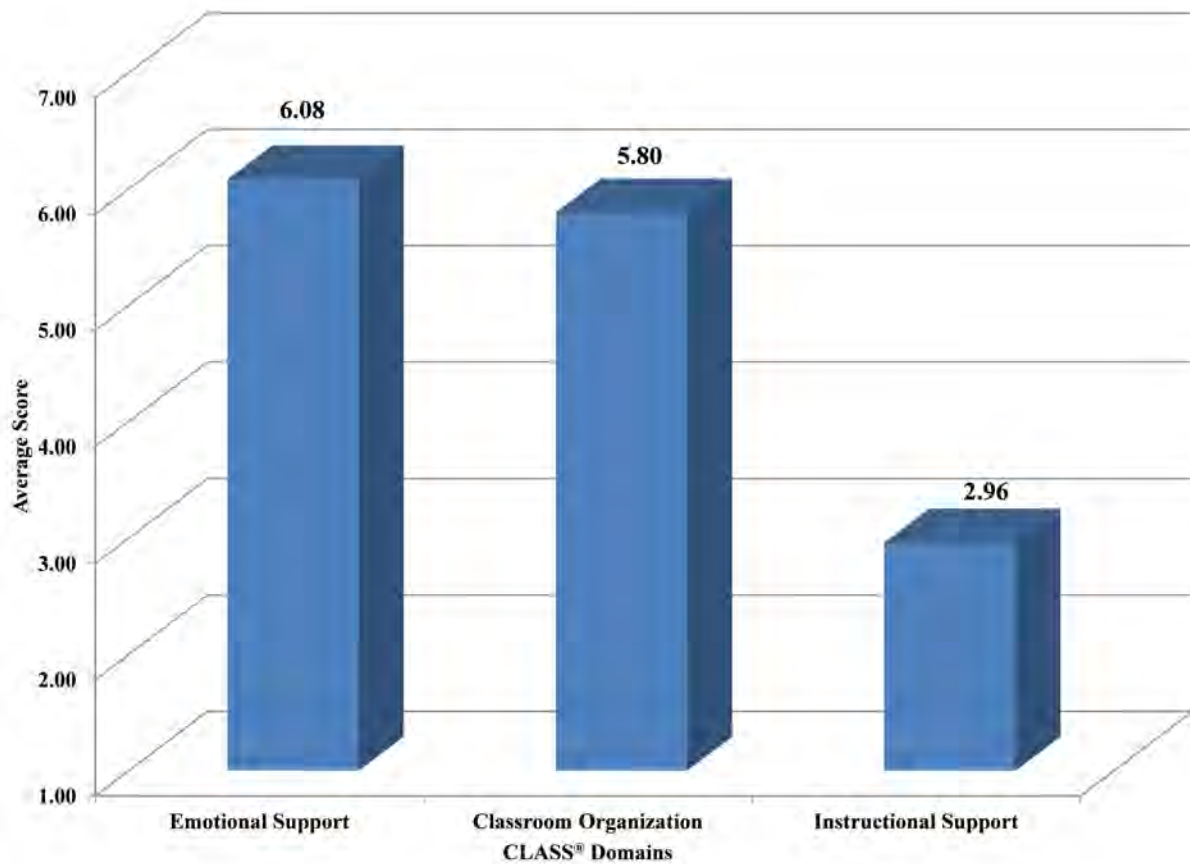
As noted in Section II of this report, CLASS® dimensions are grouped into three main domains—Classroom Organization, Emotional Support, and Instructional Support—that assess the various ways teachers and students interact. In FY 2018, grantees generally scored in the high-quality range in the Emotional Support and Classroom Organization dimensions (see **Exhibit 13**). Average scores for negative climate also fell in the high-quality range, approaching the highest possible score of 1, meaning negative climates were not observed frequently (Negative Climate is coded in the opposite direction of all the other dimensions). For the dimensions within Instructional Support, however, grantees scored in the low- to middle-quality range.

**Exhibit 13: FY 2018 Average CLASS® Scores by Dimension (N = 462)**



Dimensions are grouped together and averaged to create an average domain score. Across domains, scores were notably higher in the Emotional Support and Classroom Organization domains than in the Instructional Support dimensions (see **Exhibit 14**), a similar pattern to FY 2017. As it relates to DRS, grantees in the bottom 10 percent of grantees in any of the three domains are required to re compete for continued funding.

**Exhibit 14: FY 2018 Average CLASS® Scores by Domain (N = 462)**

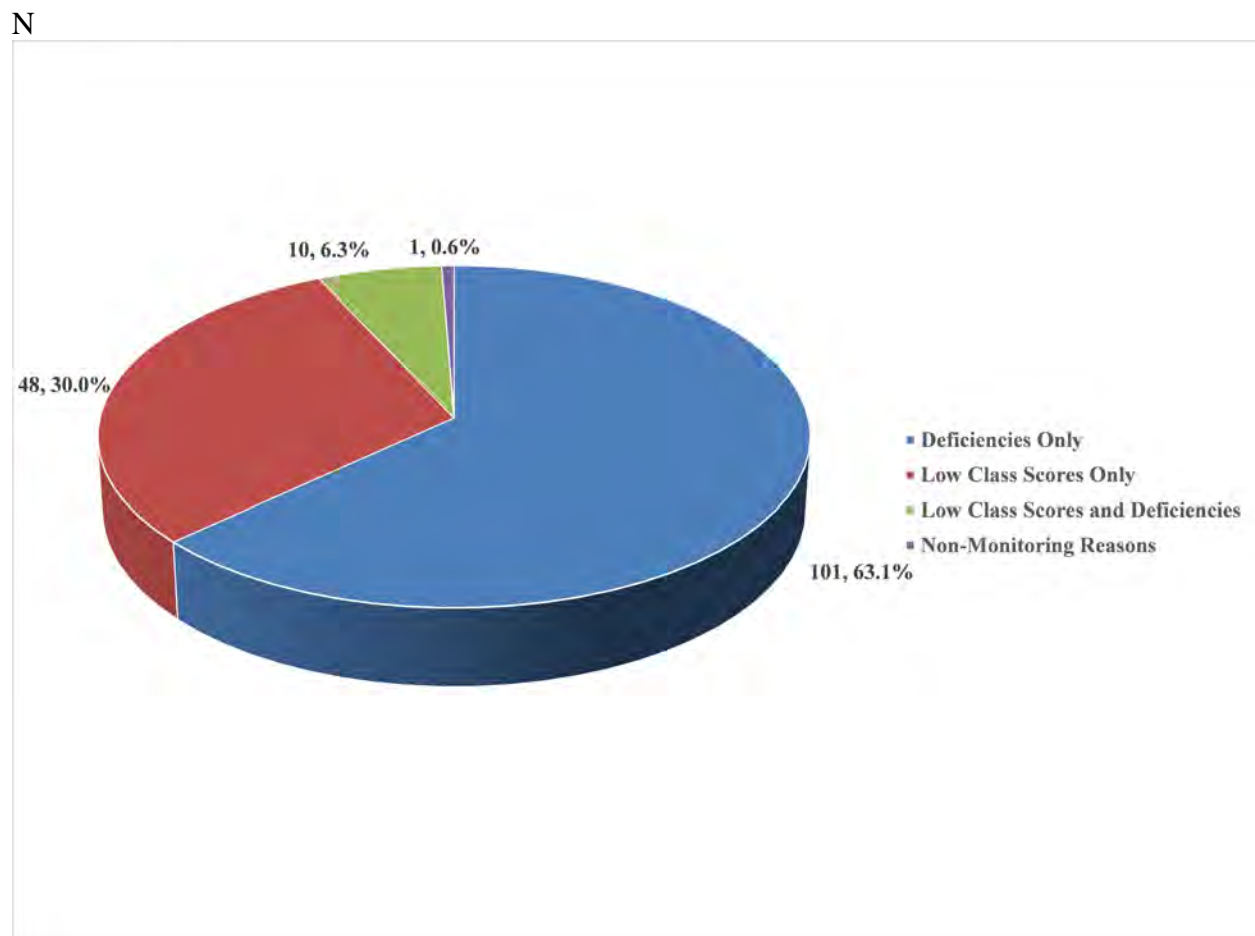


NOTE: The score for Negative Climate was inverted to calculate the average Emotional Support score (i.e., a score of one became a score of seven).

## V. Designation Renewal System Results

OHS has identified 160 grants that are required to compete for renewed grant funding based on low CLASS<sup>®</sup> scores or “deficient” findings. Of those 160 grants, 101 (63.1 percent) qualified based solely on having a deficiency during their 5-year grant cycle.<sup>13</sup> An additional 48 grants (30.0 percent) qualified based on low CLASS<sup>®</sup> scores alone, and 10 grants (6.3 percent) qualified for DRS based on having both low CLASS<sup>®</sup> scores and deficiencies identified during FY 2018 reviews. Grantees can also be required to re compete for their grants for reasons beyond issues identified by OHS’s grantee monitoring system. To date, one grantee (0.6 percent) has been required to re compete for continued funding for a reason identified outside of the monitoring system in FY 2018.<sup>14</sup> **Exhibit 15** presents the number of grantees in the DRS cohort and the reasons for their inclusion in the cohort.

**Exhibit 15: FY 2018 Number of Grants Subject to Recompensation Under the DRS and Reason for Inclusion (n = 160)**



<sup>13</sup> Note that these deficiencies were due to immediate deficiencies, deficiencies, or uncorrected areas of noncompliance that were elevated to deficiencies during FY 2018 reviews.

<sup>14</sup> One grant was determined to have a “Going Concern,” which, in accordance with section 1304.11(g), qualifies that grant to re compete for continued funding.

## **VI. Annual Review of the FY 2018 Fiscal Monitoring Procedures**

Section 650(c) of the Head Start Act requires that OHS complete an annual review of fiscal monitoring procedures to “assess whether the design and implementation of the triennial reviews described in Section 641A(c) include compliance procedures that provide reasonable assurances that Head Start agencies are complying with applicable fiscal laws and regulations.” This Fiscal Monitoring Assessment demonstrates that the OHS fiscal monitoring process provides a complete and accurate picture of grantee fiscal infrastructure and required compliance with laws and regulations.

The Fiscal Infrastructure Protocol was developed by OHS and individuals with expertise in grantee fiscal operations (i.e., Head Start Regional Office staff and fiscal subject matter experts, including certified public accountants and attorneys). It supports consistency in evidence collection and examination and ensures even-handed treatment with regard to the overall assessment of grantee fiscal operations. The Head Start Act specifically requires that OHS include as part of the monitoring review a protocol for fiscal management to assess compliance with program requirements for:

- ▶ Using federal funds appropriately.
- ▶ Using federal funds specifically to purchase property (consistent with Section 644(f) of the Head Start Act) and to compensate personnel.
- ▶ Securing and using qualified financial officer support.
- ▶ Reporting financial information and implementing appropriate internal controls to safeguard federal funds.

The Fiscal Infrastructure Protocol organizes elements of HSPPS and other regulations into a tool to monitor grantees in a standardized way. The key areas of the Fiscal Infrastructure Protocol take into account the requirements of the Head Start Act as well as additional fiscal compliance requirements found in other fiscal laws and regulations, including the HSPPS and other regulations implemented at 45 CFR 1301 to 1311. The Fiscal Infrastructure Protocol frameworks include financial management systems, reporting, procurement, compensation, indirect costs and cost allocation, non-federal share, cost principles, facilities, and property. Fiscal compliance is assessed through review of designated pre-site documents submitted by the grantee, Regional Office fiscal information, onsite observations, interviews (including governing body and Policy Council members and key fiscal personnel), and review of documents, transactions, and agreements as needed.

### **FY 2018 Fiscal Infrastructure Protocol**

In September 2016, OHS issued the first holistic revision and complete reorganization of the HSPPS since their original publication in 1975. The OHS reviewed the new HSPPS and implemented enhancements to reflect changes in policy and procedure and to ensure compliance with the Head Start Act.

The FY 2018 Fiscal Infrastructure Protocol was designed to highlight the program’s intentionality in its fiscal capacity and management; how the program shares information with

the director, managers, governing body, and policy council; and how the program uses data to make sound fiscal decisions and ensure fiscal and legal accountability.

The FY 2018 Fiscal Infrastructure Protocol focused on how the grantee develops its annual operating budget and strategies for the budget's implementation, adjustments, and accountability, rather than duplicating the annual audit process. As part of the pre-site document review, the fiscal reviewer reviewed information from the annual audit to guide the onsite monitoring data collection process. Other documents that informed the review included self-assessment summary results, annual reports to the public, reports on program goals, enrollment reports, progress and performance reports, and annual update to the community needs assessment.

The onsite review included discussions, observations, and data tours. Discussions occurred with program management, staff, parents, the governing body, and the policy council. Data tours are a new feature in the onsite review. Conducted with management staff (including the fiscal officer), center leaders, and directors, data tours were used to review the data the grantee staff shared, used, and evaluated to make informed program decisions.

The fiscal reviewer also visited a sample of facilities that were new, renovated, or had an unusual maintenance cost. The reviewer reviewed the condition of those sampled facilities, the preventative facility maintenance schedule, and equipment inventory to understand the physical condition of the facilities, the resources budgeted to support quality safe and healthy learning environments, and any plans the grantee has for addressing concerns.



## **VII. New Directions in Monitoring for FY 2019**

In FY 2019, OHS will continue to implement enhancements to improve the consistency and quality of the monitoring process. Substantial changes were made prior to the FY 2018 reviews as a result of the reorganization of the HSPPS. As a result, OHS anticipates continued refinements between the FY 2018 and FY 2019 Monitoring Protocols that will focus on streamlining the protocols and reviewing methodology to continually improve efficiencies within the monitoring system. Examples of some enhancements include:

- ▶ **Streamline and remove redundancy in the protocols.** Redundant protocol questions and standards will be removed or combined with other questions to reduce overlap within each of the protocols. This enhancement will improve the efficiency and effectiveness of the monitoring review.
- ▶ **Increase review team staffing.** An additional reviewer will be added to each review. The larger team will allow for:
  - Data tour discussions to have a separate note taker and a facilitator;
  - The RL to focus on the production of the Head Start Review Report while onsite; and
  - Another reviewer to conduct the Eligibility Child File review, relieving the fiscal reviewer of that responsibility and allowing him/her more time to focus on the review of the grantees' fiscal management systems (see below).
- ▶ **Enhance the Fiscal Infrastructure Protocol to focus on systemic issues related to fiscal risk.** In FY 2019, the Fiscal Infrastructure Protocol will be enhanced to focus on the largest areas of fiscal risk for grantees—procurement and personnel and fringe benefits. The fiscal reviewer will have additional time to review the grantee's fiscal management systems and transactions, as the reviewer will no longer be responsible for completing the Eligibility Child File review.

## Appendix: Glossary

Term	Definition
<i>Administration for Children and Families (ACF)</i>	Division of the U.S. Department of Health and Human Services (includes the Regional Offices).
<i>Aligned Monitoring System (AMS) 2.0</i>	In FY 2018, OHS implemented a revised AMS (AMS 2.0) to monitor the newly implemented Head Start Program Performance Standards and to streamline the monitoring process and reduce grantee burden of multiple review events from multiple agencies. In addition to Follow-up and Special reviews, AMS 2.0 was comprised of three review events: <ul style="list-style-type: none"> <li>▶ CLASS®</li> <li>▶ Focus Area One</li> <li>▶ Focus Area Two</li> </ul>
	Related Terms: CLASS®, Focus Area One, Focus Area Two, Follow-up review, Special review
<i>Area of Noncompliance (ANC)</i>	An ANC is a type of review decision recorded in a final Head Start Review Report that documents a grantee's lack of compliance with one or more Head Start program requirements. Depending on the documented severity of the grantee's lack of compliance and the degree to which the situation poses a threat to the safety and well-being of enrolled children, an ANC may become partial or sole justification for a deficiency determination or for a noncompliance determination. An ANC begins as a preliminary ANC (PANC), identified by the review team in the field. A PANC becomes an ANC when OHS decides the PANC has sufficient evidentiary support to justify a noncompliance or deficiency determination.
	Related Terms: Citation, Deficiency, Determination, Noncompliance, Preliminary Area of Noncompliance, Head Start Program Performance Standards, Head Start Program Requirements, Noncompliance, Review Decision
<i>Citation</i>	A citation is a performance standard referenced on a Preliminary Area of Noncompliance or an Area of Noncompliance.
	Related Terms: Area of Noncompliance, Head Start Program Performance Standards, Preliminary Area of Noncompliance

Term	Definition
<i>CLASS® Review</i>	The CLASS® review event evaluates the quality of teacher–child interactions in three overall domains that promote positive child outcomes: Classroom Organization, Emotional Support, and Instructional Support. Evaluations are based on observations of teacher–child interactions in a randomly selected, statistically driven sample of eligible center-based classrooms.
	Related Terms: Monitoring Reviews

Term	Definition
<b>Deficiency</b>	<p>The Head Start Act, as amended in 2007, defines a deficiency (Section 637 [42 U.S.C. 9832]) as follows:</p> <p>(A) <i>Systemic or substantial material failure of an agency in an area of performance that the Secretary determines involves:</i></p> <p>(i) <i>A threat to the health, safety, or civil rights of children or staff;</i></p> <p>(ii) <i>A denial to parents of the exercise of their full roles and responsibilities related to program operations;</i></p> <p>(iii) <i>A failure to comply with standards related to early childhood development and health services, family and community partnerships, or program design and management;</i></p> <p>(iv) <i>The misuse of funds received under this subchapter;</i></p> <p>(v) <i>Loss of legal status (as determined by the Secretary) or financial viability, loss of permits, debarment from receiving Federal grants or contracts, or the improper use of Federal funds; or</i></p> <p>(vi) <i>Failure to meet any other Federal or State requirement that the agency has shown an unwillingness or inability to correct, after notice from the Secretary, within the period specified;</i></p> <p>(B) <i>Systemic or material failure of the governing body of any agency to fully exercise its legal and fiduciary responsibilities; or</i></p> <p>(C) <i>An unresolved area of noncompliance.</i></p> <p>“Deficiency” is an OHS determination that a grantee has failed to substantially to provide the required services or to substantially implement required procedures.</p> <p>A deficiency (determination) is documented in a final Review Report and includes one or more Areas of Noncompliance. In a report, a statement of a deficiency determination includes a corrective action timeframe (of 30 days or 180 days depending on the severity), a finding category or deficiency type, and required corrective actions (Follow-up review and/or Quality Improvement Plan).</p> <p>Related Terms: Area of Noncompliance, Determination, Grantee, Head Start Review Report, Quality Improvement Plan, Review Decision</p>
<b>Delegate Agency</b>	<p>A delegate agency is a public or private nonprofit or for-profit organization or agency to which a Head Start grantee has delegated by written agreement the carrying out of all or part of its responsibility for operating a Head Start program or programs.</p>

Term	Definition
	Related Terms: Grantee, Head Start Program
<i><b>Determination</b></i>	<p>A determination is an OHS decision regarding a grantee’s lack of compliance with state and/or federal requirements. A determination is documented in the Head Start Review Report and is supported by one or more areas of noncompliance each citing one or more performance standards. There are two types of determinations: deficiency determinations and noncompliance determinations. A determination statement indicates the type of determination, the corrective action timeframe, and the required corrective actions (Follow-up review and/or Quality Improvement Plan).</p> <p>Related Terms: Area of Noncompliance, Deficiency, Head Start Review Report, Noncompliance, Preliminary Area of Noncompliance, Quality Improvement Plan</p>
<i><b>Early Head Start Program</b></i>	<p>An agency or delegate agency funded under the Head Start Act to provide comprehensive child development services to children from birth to 3 years of age and pregnant women.</p> <p>Related Terms: Delegate Agency, Head Start Program</p>
<i><b>Fiscal Year (FY)</b></i>	Twelve-month accounting period (federal FY 2018 began on October 1, 2017, and ended on September 30, 2018).
<i><b>Focus Area One Review</b></i>	An off-site review that entailed reviewing grantee documentation and engaging in discussions (via conference call) with the program’s director and management team focused on the grantees’ program design, management, and governance structure. Also referred to as an “FA1” review.
<i><b>Focus Area Two Review</b></i>	An onsite review that, through classroom explorations, data tours, and discussions with program management, staff, parents, the governing body, the policy council, and teachers, assessed how grantees operate their programs and provide quality services that meet children’s and families’ needs and comply with HSPPS and other federal and state requirements. Also referred to as an “FA2” review.
<i><b>Follow-up Review</b></i>	Return visits made to grantees to verify whether corrective actions have been implemented. Determinations in Focus Area One, Focus Area Two, or Special reviews indicate whether or not a Follow-up review is required, and the timeframe within which the grantee must correct the areas of noncompliance (ANCs). If the initial Follow-up review team identifies that one or more ANCs have not been corrected, OHS may decide a second Follow-up review is required. Less often, a third or fourth Follow-up review is conducted.

Term	Definition
	Related Terms: Focus Area One review, Focus Area Two review, Monitoring reviews, Special review
<i>Grant</i>	<p>A federally funded monetary award that is provided to an agency to perform Head Start (Early Head Start or Head Start/Early Head Start) services either directly or through delegate agencies.</p> <p>Related Terms: Grantee, Head Start Program</p>
<i>Grantee</i>	<p>An agency (i.e., public or private nonprofit, school system) that has been awarded one or more grants by the Administration for Children and Families to administer one or more Head Start programs (Early Head Start or Head Start/Early Head Start) or to oversee the programs administered by a delegate agency.</p> <p>Related Terms: Delegate Agency, Noncompliance, Preliminary Area of Noncompliance, Program Type</p>
<i>Grantee Compliance Status</i>	<p>The final determination made on the grantee by the Office of Head Start (OHS) based on the results of the onsite monitoring review. The status is one of the following:</p> <ol style="list-style-type: none"> <li>(1) Compliant: Grantees without a “noncompliant” or “deficient” finding.</li> <li>(2) Having one or more noncompliances: Grantees with one or more “noncompliant” findings.</li> <li>(3) Having one or more deficiencies: Grantees with one or more “deficient” findings. Deficient grantees may have one or more “noncompliant” findings in addition to one or more “deficient” findings</li> </ol> <p>Related terms: Deficiency, Noncompliance</p>
<i>Head Start Program</i>	<p>An agency or delegate agency funded under the Head Start Act to provide comprehensive child development services.</p> <p>Related Terms: Delegate Agency, Early Head Start Program, Program Type</p>
<i>Head Start Program Performance Standards</i>	Regulations applicable to program administration and grants management for all Head Start program grants under the Act. The regulations encompass requirements to provide education, health, mental health, nutrition, and family and community engagement services, as well as rules for local program governance and aspects of federal administration of the program.

Term	Definition
<i>(HSPPS) and Other Regulations</i>	Related Terms: Area of Noncompliance, Head Start Program Requirements, Monitoring Reviews
<i>Head Start Program Requirements</i>	The Head Start Program Requirements include the Head Start Program Performance Standards and applicable laws, regulations, and policy requirements to which all grantees operating a Head Start program must adhere. During the onsite monitoring review, review teams assess a grantee's compliance with the Head Start Program Requirements.
	Related Terms: Area of Noncompliance, Head Start Program Performance Standards, Monitoring Reviews
<i>Head Start Review Report</i>	The Head Start Review Report serves as legal notice to a Head Start grantee of the results of the monitoring review. It provides the grantee with detailed information on the areas in which the grantee is not meeting Head Start Program Requirements. The Head Start Review Report also documents the corrective action timeframes that the grantee has to resolve the issues addressed in the report.
	Related Terms: Deficiency, Preliminary Area of Noncompliance, Noncompliance
<i>Health and Human Services (HHS)</i>	The federal government agency that oversees the Administration for Children and Families.
<i>Monitoring Reviews</i>	In FY 2018, there were five main types of monitoring reviews or review types: Focus Area One, Focus Area Two, CLASS®, Special, and Follow-up. Programs that are not in compliance with Head Start federal regulations and requirements during the onsite monitoring review are required to have a Follow-up review to verify whether corrective actions have been implemented.
	Related Terms: CLASS® Review, Focus Area One Review, Focus Area Two Review, Review Lead, Follow-up Review, Head Start Program Performance Standards, Head Start Program Requirements, Review Decision, Special Review, Triennial Review
<i>Noncompliance</i>	A noncompliance is a failure to comply with one or more Head Start Program Performance Standards and related to a noncompliance determination in the completed Head Start Review Report.
	Related Terms: Area of Noncompliance, Determination, Grantee, Head Start Review Report, Quality Improvement Plan, Review Decision



Term	Definition
<i>Office of Head Start (OHS)</i>	Within the Administration for Children and Families in the U.S. Department of Health and Human Services, the OHS serves as the principal advisory unit to the Assistant Secretary on issues regarding the Head Start program. OHS provides leadership, coordinates activities, develops legislative and budgetary proposals, and presents objectives and initiatives for the Head Start program.
	Related Terms: Administration for Children and Families, Health and Human Services
<i>Office of Head Start Monitoring System Software</i>	Also referred to as IT-AMS, the Office of Head Start Monitoring System Software is an integrated technology solution supporting a broad spectrum of monitoring review activities: pre-site planning and document sharing, onsite review coordination and documentation, and post-review report development.
<i>Preliminary Area of Noncompliance (PANC)</i>	A preliminary conclusion of a grantee's failure to comply with a given Head Start Program Performance Standard or regulation. This conclusion is based on evidence collected by the review team during the monitoring review. A PANC becomes an area of noncompliance in a final Review Report if Office of Head Start determines that the PANC has sufficient evidence and documentation.
	Related Terms: Area of Noncompliance, Citation, Determination, Grantee, Head Start Review Report
<i>Program Type</i>	Program type describes the category of services (i.e., Early Head Start or Head Start) that a Head Start program provides. There are three program types: Head Start, Early Head Start, and Head Start/Early Head Start.
	Related Terms: Early Head Start Program, Head Start Program

Term	Definition
<i>Protocol</i>	<p>In the Aligned Monitoring System, each review event has a monitoring protocol designed to assess the performance and compliance of Head Start grantees in monitored content areas. In FY 2018, Focus Area One and Focus Area Two monitoring protocols focused on areas such as program design and management; quality education and child development services; quality health program services; quality family and community engagement services; fiscal infrastructure; and eligibility, recruitment, selection, enrollment, and attendance (ERSEA).</p> <p>Each protocol contains a set of compliance questions that are linked directly to a regulation; therefore, any review activity, including interviews, observations, or document review, relates to a clearly defined performance requirement. Review teams are required to adhere to a uniform and defined set of compliance questions, increasing focus, efficiency, fairness, and comprehensiveness of the scope of the review.</p>
<i>Quality Improvement Plan (QIP)</i>	<p>Once a grantee is determined to have one or more deficiencies, the grantee must submit for approval a QIP to the Regional Office outlining the deficiencies to be corrected, the actions to be taken to correct each deficiency, and the timeframe for accomplishing the corrective actions specified.</p>
	Related Terms: Deficiency, Determination, Noncompliance
<i>Review Decision</i>	<p>Decision about a grantee's compliance with applicable laws and regulations based on evidence collected during the monitoring review. Review decisions include "no areas of noncompliance," "areas of noncompliance," and deficiency determinations.</p>
	Related Terms: Area of Noncompliance, Deficiency, Determination, Monitoring Reviews, Noncompliance
<i>Review Lead (RL)</i>	<p>Individual who leads the monitoring review team. The RL delegates tasks, assigns reviewers to complete sections of the Monitoring Protocol, and facilitates and coordinates interaction between grantee staff and review team members.</p>
	Related Terms: Monitoring Reviews
<i>Reviewer</i>	<p>Member of a monitoring review team who, under the guidance of the monitoring Review Lead, gathers evidence through observations, interviews, and document review to assess the performance of a Head Start grantee being reviewed.</p>
	Related Terms: Review Lead, Monitoring Reviews

Term	Definition
<i>Special Review</i>	Alerted to a potential performance issue or concern with a grantee, OHS may resolve to conduct an out-of-cycle review, referred to as a “Special review.” Special reviews, unlike Focus Area One; Focus Area Two; or CLASS <sup>®</sup> reviews, are non-routine in nature.
	Related Terms: Follow-up Review, Monitoring Reviews, Triennial Review
<i>Triennial Review</i>	In the previous Office of Head Start Monitoring System, Head Start grantees underwent monitoring reviews every 3 years. These types of reviews were referred to as “Triennial reviews.” Triennial reviews were implemented prior to FY 2015. In FY 2015 through FY 2017, OHS no longer conducted Triennial reviews and implemented a new Aligned Monitoring System, which conducts specific content area reviews (e.g., Environmental Health and Safety [EnvHS]; fiscal/eligibility, recruitment, selection, enrollment, and attendance [ERSEA]) and a CLASS <sup>®</sup> review across the first 3 years of a grantee’s 5-year grant cycle.
	Related Terms: Follow-up Review, Monitoring Reviews, Special Review

## **Appendix: Tables**

The following appendix tables present the most frequently cited Head Start Program Performance Standards (HSPPS) for Focus Area Two and Special reviews combined.

**Exhibit A1: FY 2018 Performance Standards Most Frequently Cited as Compliant**

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
		n	%
1302.90(c)(1)(v)	Personnel policies. (c) Standards of conduct. (1) A program must ensure all staff, consultants, contractors, and volunteers abide by the program's standards of conduct that: (v) Ensure no child is left alone or unsupervised by staff, consultants, contractors, or volunteers while under their care.	45	7.1%
1302.102(d)(1)(ii)	Achieving program goals d) Reporting. (1) A program must submit: (ii) Reports, as appropriate, to the responsible HHS official immediately or as soon as practicable, related to any significant incidents affecting the health and safety of program participants, circumstances affecting the financial viability of the program, breaches of personally identifiable information, or program involvement in legal proceedings, any matter for which notification or a report to state, tribal, or local authorities is required by applicable law,	38	6.0%
1302.31(b)(1)(i)	1302.31 Teaching and the learning environment. (b) Effective teaching practices. (1) Teaching practices must: (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;	17	2.7%
75.302(b)(4)	Financial Management System (b) The financial management system of each non-Federal entity must provide for the following (see also §§ 75.361, 75.362, 75.363, 75.364, and 75.365): (4) Effective control over, and accountability for, all funds, property, and other assets. The non-Federal entity must adequately safeguard all assets and assure that they are used solely for authorized purposes. See § 75.303.	14	2.2%
1302.31(b)(1)(iii)	Teaching Practices and Learning Environments: Teaching Practices and Data Use b) <i>Effective teaching practices</i> . (1) Teaching practices must: (iii) Integrate child assessment data in individual and group planning; and,	13	2.0%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
		n	%
1302.91(e)(1)	<p>Staff Hiring, Supervision and Development: Staff Qualifications</p> <p>(e) Child and family services staff -</p> <p>(1) Early Head Start center-based teacher qualification requirements. 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 development with a focus on infant and toddler development.</p>	13	2.0%
1302.31(b)(1)(ii)	<p>Teaching Practices and Learning Environments: Effective Teaching Practices</p> <p>(b) Effective teaching practices.</p> <p>(1) Teaching practices must:</p> <p>(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;</p>	12	1.9%
1302.47(b)(1)(ix)	<p>Safety practices.</p> <p>(b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with 1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety. This system must ensure:</p> <p>(1) Facilities. All facilities where children are served, including areas for learning, playing, sleeping, toileting, and eating are, at a minimum:</p> <p>(ix) Kept safe through an ongoing system of preventative maintenance.</p>	12	1.9%
1302.101(a)(1)	Program and Human Resource Management	10	1.6%
1302.102(c)(1)	<p>Achieving program goals. (c) Using data for continuous improvement. (1) A program must implement a process for using data to identify program strengths and needs, develop and implement plans that address program needs, and continually evaluate compliance with program performance standards and progress towards achieving program goals described in paragraph (a) of this section.</p>	10	1.6%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
		n	%
1302.31(b)(1)(iv)	<p>Teaching Practices and Learning Environments: Effective Teaching Practices</p> <p>(b) <i>Effective teaching practices.</i></p> <p>(1) Teaching practices must:</p> <p>(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 <i>Head Start Early Learning Outcomes Framework: Ages Birth to Five</i>.</p>	10	1.6%
1302.42(b)(2)	<p>Addressing Health Status and Health Needs</p> <p>(b) <i>Ensuring up-to-date child health status.</i> (1) 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>(2) Within 45 calendar 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.</p>	10	1.6%
1302.47(b)(1)(iii)	<p>Safety practices.</p> <p>(b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with 1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety. This system must ensure:</p> <p>(1) Facilities. All facilities where children are served, including areas for learning, playing, sleeping, toileting, and eating are, at a minimum:</p> <p>(iii) Free from pollutants, hazards and toxins that are accessible to children and could endanger children's safety;</p>	10	1.6%
1302.101(a)(2)	<p>Staff Hiring, Supervision and Development: Ongoing Supervision</p> <p>(a) <i>Implementation.</i> A program must implement a management system that:</p> <p>(2) Provides regular and ongoing supervision to support individual staff professional development and continuous program quality improvement;</p>	8	1.3%
1302.102(b)(1)(i)	<p>Achieving program goals.</p> <p>(b) Monitoring program performance. (1) Ongoing compliance oversight and correction. In order to ensure effective ongoing oversight and correction, a program must establish and implement a system of ongoing oversight that ensures effective implementation of the program performance standards, including ensuring child safety, and other applicable federal regulations as described in this part, and must:</p> <p>(i) Collect and use data to inform this process;</p>	8	1.3%



Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
		n	%
1302.47(b)(5)(i)	<p>Safety practices.</p> <p>(b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with 1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety. This system must ensure:</p> <p>(5) Safety practices. All staff and consultants follow appropriate practices to keep children safe during all activities, including, at a minimum:</p> <p>(i) Reporting of suspected or known child abuse and neglect, including that staff comply with applicable federal, state, local, and tribal laws;</p>	8	1.3%
1302.90(c)(1)(ii)(A)	<p>Personnel policies.</p> <p>(c) Standards of conduct.</p> <p>(1) A program must ensure all staff, consultants, contractors, and volunteers abide by the program's standards of conduct that:</p> <p>(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:</p> <p>(A) Use corporal punishment;</p>	8	1.3%
1302.42(d)(2)	<p>Child health status and care.</p> <p>(d) Extended follow-up care.</p> <p>(2) 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>	7	1.1%
648A(g)(3)	<p>Staff Qualifications and Development.</p> <p>(g) Staff Recruitment and Selection Procedures—Before a Head Start agency employs an individual, such agency shall—</p> <p>(3) obtain—</p> <p>(A) a State, tribal, or Federal criminal record check covering all jurisdictions where the grantee provides Head Start services to children;</p> <p>(B) a State, tribal, or Federal criminal record check as required by the law of the jurisdiction where the grantee provides Head Start services; or</p> <p>(C) a criminal record check as otherwise required by Federal law.</p>	7	1.1%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
		n	%
1302.42(b)(1)	<p>Addressing Health Status and Health Needs</p> <p>(b) <i>Ensuring up-to-date child health status.</i> (1) 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>(i) 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 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 issued by the Centers for Disease Control and Prevention, and any additional recommendations from the local Health Services Advisory Committee that are based on prevalent community health problems;</p>	6	0.9%
1302.42(b)(1) (i)	<p>Child health status and care.</p> <p>(b) <i>Ensuring up-to-date child health status.</i> (1) 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>(i) 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 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 issued by the Centers for Disease Control and Prevention, and any additional recommendations from the local Health Services Advisory Committee that are based on prevalent community health problems;</p>	6	0.9%
1302.42(d)(1)	<p>Child health status and care.</p> <p>(d) <i>Extended follow-up care.</i></p> <p>(1) 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>	6	0.9%
1302.45(b)(1)	<p>Child mental health and social and emotional well-being.</p> <p>(b) <i>Mental health consultants.</i> A program must ensure mental health consultants assist:</p> <p>(1) The program to implement strategies to identify and support children with mental health and social and emotional concerns;</p>	6	0.9%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
		n	%
1302.45(b)(2)	<p>Mental Health Support</p> <p>(b) <i>Mental health consultants</i>. A program must ensure mental health consultants assist:</p> <p>(2) Teachers, including family child care providers, to improve classroom management and teacher practices 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>	6	0.9%
1302.47(b)(1)(iv)	<p>Safety practices.</p> <p>(b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with 1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety. This system must ensure:</p> <p>(1) Facilities. All facilities where children are served, including areas for learning, playing, sleeping, toileting, and eating are, at a minimum:</p> <p>(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;</p>	6	0.9%
1302.91(e)(2)(ii)	<p>Staff qualifications and competency requirements.</p> <p>(e) Child and family services staff. (2) Head Start center-based teacher qualification requirements. (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>	6	0.9%
1302.92(b)(5)	<p>Training and professional development.</p> <p>(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:</p> <p>(5) Research-based approaches to professional development for education staff, that are focused on effective curricula implementation, knowledge of the content in Head Start Early Learning Outcomes Framework: Ages Birth to Five, 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.</p>	6	0.9%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
		n	%
642(d)(2)(A)	Powers and Functions of Head Start Agencies (d) Program Governance Administration- (2) CONDUCT OF RESPONSIBILITIES- Each Head Start agency shall ensure the sharing of accurate and regular information for use by the governing body and the policy council, about program planning, policies, and Head Start agency operations, including— (A) monthly financial statements, including credit card expenditures;	6	0.9%
75.302(b)(2)	Financial Management System (b) The financial management system of each non-Federal entity must provide for the following (see also §§ 75.361, 75.362, 75.363, 75.364, and 75.365): (2) Accurate, current, and complete disclosure of the financial results of each Federal award or program in accordance with the reporting requirements set forth in §§ 75.341 and 75.342. If an HHS awarding agency requires reporting on an accrual basis from a recipient that maintains its records on other than an accrual basis, the recipient must not be required to establish an accrual accounting system. This recipient may develop accrual data for its reports on the basis of an analysis of the documentation on hand. Similarly, a pass-through entity must not require a subrecipient to establish an accrual accounting system and must allow the subrecipient to develop accrual data for its reports on the basis of an analysis of the documentation on hand.	6	0.9%
75.302(b)(7)	Financial management and standards for financial management systems. (b) The financial management system of each non-Federal entity must provide for the following: (7) Written procedures for determining the allowability of costs in accordance with subpart E of this part and the terms and conditions of the Federal award.	6	0.9%
1302.102(d)(1)(ii)(A)	Achieving program goals. (d) Reporting. (1) A program must submit: (ii) Reports, as appropriate, to the responsible HHS official immediately or as soon as practicable, related to any significant incidents affecting the health and safety of program participants, circumstances affecting the financial viability of the program, breaches of personally identifiable information, or program involvement in legal proceedings, any matter for which notification or a report to state, tribal, or local authorities is required by applicable law, including at a minimum: (A) Any reports regarding agency staff or volunteer compliance with federal, state, tribal, or local laws addressing child abuse and neglect or laws governing sex offenders;	5	0.8%
1302.45(a)(2)	Mental Health Services (a) <i>Wellness promotion.</i> To support a program-wide culture that promotes children's mental health, social and emotional well-being, and overall health, a program must: (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;	5	0.8%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
		n	%
1302.52(b)	Identifying Family Needs and Making Progress toward Individual Family Outcomes (b) Identification of family strengths and needs. 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.	5	0.8%
642(c)(1)(B)(ii)	Powers and Functions of Head Start Agencies (c) Program Governance- Upon receiving designation as a Head Start agency, the agency shall establish and maintain a formal structure for program governance, for the oversight of quality services for Head Start children and families and for making decisions related to program design and implementation. Such structure shall include the following: (1) GOVERNING BODY- (B) COMPOSITION- The governing body shall be composed as follows: (ii) Not less than 1 member shall have a background and expertise in early childhood education and development.	5	0.8%
75.405(a)(2)	Allocable costs. (a) A cost is allocable to a particular Federal award or other cost objective if the goods or services involved are chargeable or assignable to that Federal award or cost objective in accordance with relative benefits received. This standard is met if the cost: (2) Benefits both the Federal award and other work of the non-Federal entity and can be distributed in proportions that may be approximated using reasonable methods;	5	0.8%
1302.102(b)(1)	Ongoing Oversight and Continuous Program Improvement: Collecting Data for Ongoing Oversight and Continuous Program Improvement (b) <i>Monitoring program performance.</i>  (1) <i>Ongoing compliance oversight and correction.</i> In order to ensure effective ongoing oversight and correction, a program must establish and implement a system of ongoing oversight that ensures effective implementation of the program performance standards, including ensuring child safety, and other applicable federal regulations as described in this part, and must:	4	0.6%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
		n	%
1302.102(b)(1)(ii)	Achieving program goals. (b) Monitoring program performance. (1) Ongoing compliance oversight and correction. In order to ensure effective ongoing oversight and correction, a program must establish and implement a system of ongoing oversight that ensures effective implementation of the program performance standards, including ensuring child safety, and other applicable federal regulations as described in this part, and must: (ii) Correct quality and compliance issues immediately, or as quickly as possible;	4	0.6%
1302.12(k)(2)(i)	Determining, verifying, and documenting eligibility. (k) Records. (2) Each eligibility determination record must include: (i) Copies of any documents or statements, including declarations, that are deemed necessary to verify eligibility under paragraphs (h) and (i) of this section;	4	0.6%
1302.16(b)	Attendance (b) <i>Managing systematic program attendance issues.</i> 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).	4	0.6%
1302.45(b)(4)	Child mental health and social and emotional well-being. (b) Mental health consultants. A program must ensure mental health consultants assist: (4) Staff to address prevalent child mental health concerns, including internalizing problems such as appearing withdrawn and externalizing problems such as challenging behaviors; and,	4	0.6%
1302.90(c)(1)(ii)(F)	Personnel policies. (c) Standards of conduct. (1) A program must ensure all staff, consultants, contractors, and volunteers abide by the program's standards of conduct that: (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: (F) Use any form of emotional abuse, including public or private humiliation, rejecting, terrorizing, extended ignoring, or corrupting a child;	4	0.6%
1302.91(e)(2)	Staff Hiring, Supervision and Development: Staff Qualifications (e) <i>Child and family services staff.</i> (2) <i>Head Start center-based teacher qualification requirements.</i> (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.	4	0.6%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
		n	%
1302.92(b)(3)	<p>Training and professional development.</p> <p>(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:</p> <p>(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;</p>	4	0.6%
1302.92(b)(4)	<p>Training and professional development.</p> <p>(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:</p> <p>(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 and family outcomes; and,</p>	4	0.6%
1303.5(a)(1)	<p>Limitations on development and administrative costs.</p> <p>(a) Limitations (1) Costs to develop and administer a program cannot be excessive or exceed 15 percent of the total approved program costs. Allowable costs to develop and administer a Head Start program cannot exceed 15 percent of the total approved program costs, which includes both federal costs and non-federal match, unless the responsible HHS official grants a waiver under paragraph (b) of this section that approves a higher percentage in order to carry out the purposes of the Act.</p>	4	0.6%
642(c)(1)(B)(i)	<p>Powers and Functions of Head Start Agencies</p> <p>(c) Program Governance- Upon receiving designation as a Head Start agency, the agency shall establish and maintain a formal structure for program governance, for the oversight of quality services for Head Start children and families and for making decisions related to program design and implementation. Such structure shall include the following:</p> <p>(1) GOVERNING BODY-</p> <p>(B) COMPOSITION- The governing body shall be composed as follows:</p> <p>(i) Not less than 1 member shall have a background and expertise in fiscal management or accounting.</p>	4	0.6%
75.303(b)	<p>Internal Controls</p> <p>(b) Comply with Federal statutes, regulations, and the terms and conditions of the Federal awards.</p>	4	0.6%
75.403(g)	<p>Factors affecting allowability of costs.</p> <p>(g) Be adequately documented. See also §§ 75.300 through 75.309.</p>	4	0.6%



Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
		n	%
1302.102(b)(1)(iii)	Achieving program goals. (b) Monitoring program performance. (1) Ongoing compliance oversight and correction. In order to ensure effective ongoing oversight and correction, a program must establish and implement a system of ongoing oversight that ensures effective implementation of the program performance standards, including ensuring child safety, and other applicable federal regulations as described in this part, and must: (iii) Work with the governing body and the policy council to address issues during the ongoing oversight and correction process and during federal oversight; and,	3	0.5%
1302.12(k)	Determining, verifying, and documenting eligibility. (k) Records Maintenance and Content. (k) <i>Records</i> . (1) 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.	3	0.5%
1302.12(k)(1)	Determining, verifying, and documenting eligibility. (k) <i>Records</i> . (1) 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.	3	0.5%
1302.21(b)(4)	Center-based option. (b) Ratios and group size. (4) A class that serves a majority of children who are four and five years old must have no more than 20 children with a teacher and a teaching assistant or two teachers. A double session class that serves a majority of children who are four and five years old must have no more than 17 children with a teacher and a teaching assistant or two teachers.	3	0.5%
1302.32(a)(2)	Curricula. (a) Curricula. (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.	3	0.5%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
		n	%
1302.42(b)(4)	<p><b>Addressing Health Status and Health Needs</b></p> <p>(b) <i>Ensuring up-to-date child health status.</i> (1) 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>(4) A program must identify each child’s nutritional health needs, taking into account available health information, 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 Advisory Committee.</p>	3	0.5%
1302.45(a)(1)	<p><b>Mental Health Support</b></p> <p>(a) Wellness promotion. To support a program-wide culture that promotes children’s mental health, social and emotional well-being, and overall health, a program must:</p> <p>(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;</p>	3	0.5%
1302.45(b)(5)	<p>Child mental health and social and emotional well-being.</p> <p>(b) Mental health consultants. A program must ensure mental health consultants assist:</p> <p>(5) In helping both parents and staff to understand mental health and access mental health interventions, if needed.</p>	3	0.5%
1302.47(b)(2)(v)	<p><b>Safety practices.</b></p> <p>(b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with 1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety. This system must ensure:</p> <p>(2) Equipment and materials. 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:</p> <p>(v) Be kept safe through an ongoing system of preventative maintenance.</p>	3	0.5%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
		n	%
1302.52(c)(3)	Family partnership services. (c) Individualized family partnership services. A program must offer individualized family partnership services that: (3) 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;	3	0.5%
1302.61(a)	Services for Children with Disabilities: Additional services for children with disabilities (a) Additional services for children with disabilities. Programs must ensure the individualized needs of children with disabilities, including but not limited to those eligible for services under IDEA, are being met and all children have access to and can fully participate in the full range of activities and services. Programs must provide any necessary modifications to the environment, multiple and varied formats for instruction, and individualized accommodations and supports as necessary to support the full participation of children with disabilities. Programs must ensure all individuals with disabilities are protected from discrimination under and provided with all services and program modifications required by section 504 of the Rehabilitation Act (29 U.S.C. 794), the Americans with Disabilities Act (42 U.S.C. 12101 et seq.), and their implementing regulations.	3	0.5%
1302.92(b)	Staff Hiring, Supervision and Development: Training and Professional Development (b) <i>Services during IDEA eligibility determination.</i> While the local agency responsible for implementing IDEA determines a child's eligibility, a program must provide individualized services and supports, to the maximum extent possible, to meet the child's needs. Such additional supports may be available through a child's health insurance or it may be appropriate or required to provide the needed services and supports under section 504 of the Rehabilitation Act if the child satisfies the definition of disability in section 705(9)(b) of the Rehabilitation Act. When such supports are not available through alternate means, pending the evaluation results and eligibility determination, a program must individualize program services based on available information such as parent input and child observation and assessment data and may use program funds for these purposes.	3	0.5%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
		n	%
75.302(b)(3)	<p>Financial Management System</p> <p>(b) The financial management system of each non-Federal entity must provide for the following (see also §§ 75.361, 75.362, 75.363, 75.364, and 75.365):</p> <p>(3) Records that identify adequately the source and application of funds for federally-funded activities. These records must contain information pertaining to Federal awards, authorizations, obligations, unobligated balances, assets, expenditures, income and interest and be supported by source documentation.</p>	3	0.5%
75.403(a)	<p>Budget Management</p> <p>(a) Be necessary and reasonable for the performance of the Federal award and be allocable thereto under these principles.</p>	3	0.5%
75.430(a)(1)	<p>Compensation - personal services. (a) General Compensation for personal services includes all remuneration, paid currently or accrued, for services of employees rendered during the period of performance under the Federal award, including but not necessarily limited to wages and salaries. Compensation for personal services may also include fringe benefits which are addressed in 75.431. Costs of compensation are allowable to the extent that they satisfy the specific requirements of this part, and that the total compensation for individual employees:</p> <p>(1) Is reasonable for the services rendered and conforms to the established written policy of the non-Federal entity consistently applied to both Federal and non-Federal activities;</p>	3	0.5%
1302.102(b)(2)	<p>Ongoing Oversight and Continuous Program Improvement: Using Data for Ongoing Oversight and Continuous Program Improvement</p> <p>b) <i>Monitoring program performance.</i></p> <p>(1) <i>Ongoing compliance oversight and correction.</i> In order to ensure effective ongoing oversight and correction, a program must establish and implement a system of ongoing oversight that ensures effective implementation of the program performance standards, including ensuring child safety, and other applicable federal regulations as described in this part, and must:</p> <p>(2) <i>Ongoing assessment of program goals.</i> A program must effectively oversee progress towards program goals on an ongoing basis and annually must:</p>	2	0.3%
1302.102(c)(2) (i)	<p>Achieving program goals.</p> <p>(c) Using data for continuous improvement.</p> <p>(2) This process must:</p> <p>(i) Ensure data is aggregated, analyzed and compared in such a way to assist agencies in identifying risks and informing strategies for continuous improvement in all program service areas;</p>	2	0.3%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
		n	%
1302.102(c)(2)(ii)	Achieving program goals. (c) Using data for continuous improvement. (2) This process must: (ii) Ensure child-level assessment data is aggregated and analyzed at least three times a year, including for sub-groups, such as dual language learners and children with disabilities, as appropriate, except in programs operating fewer than 90 days, and used with other program data described in paragraph (c)(2)(iv) of this section to direct continuous improvement related to curriculum choice and implementation, teaching practices, professional development, program design and other program decisions, including changing or targeting scope of services; and,	2	0.3%
1302.16(a)(1)	Attendance. (a) Promoting regular attendance. A program must track attendance for each child. (1) 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 start time, the program must attempt to contact the parent to ensure the child's well-being.	2	0.3%
1302.21(b)(3)	Center-based option. (b) Ratios and group size. (3) A class that serves a majority of children who are three years old must have no more than 17 children with a teacher and teaching assistant or two teachers. A double session class that serves a majority of children who are three years old must have no more than 15 children with a teacher and teaching assistant or two teachers.	2	0.3%
1302.31(e)	Teaching Practices and Learning Environments: Using All Opportunities as Learning Opportunities	2	0.3%
1302.31(e)(3)	Teaching and the learning environment. (e) Promoting learning through approaches to rest, meals, routines, and physical activity. (3) A program must approach routines, such as hand washing and diapering, and transitions between activities, as opportunities for strengthening development, learning, and skill growth.	2	0.3%
1302.42(a)	Addressing Health Status and Health Needs (a) Source of health care. (1) 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.	2	0.3%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
		n	%
1302.42(b)(1)(ii)	Child health status and care. (b) Ensuring up-to-date child health status. (1) 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: (ii) Assist parents 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).	2	0.3%
1302.42(b)(3)	Child health status and care. (b) Ensuring up-to-date child health status. (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.	2	0.3%
1302.42(c)	Addressing Health Status and Health Needs (c) <i>Ongoing care.</i> (1) A program must help parents continue to follow recommended schedules of well-child and oral health care.	2	0.3%
1302.45(b)(3)	Child mental health and social and emotional well-being. (b) Mental health consultants. A program must ensure mental health consultants assist: (3) Other staff, including home visitors, to meet children's mental health and social and emotional needs through strategies that include observation and consultation;	2	0.3%
1302.47(a)	Safety practices. (a) 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 Caring for our Children Basics, available at <a href="http://www.acf.hhs.gov/sites/default/files/ece/caring_for_our_children_basics.pdf">http://www.acf.hhs.gov/sites/default/files/ece/caring_for_our_children_basics.pdf</a> , for additional information to develop and implement adequate safety policies and practices described in this part.	2	0.3%
1302.47(b)	Safety practices. b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with §1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety.	2	0.3%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
		n	%
1302.47(b)(1)(ii)	Safety practices. (b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with 1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety. This system must ensure: (1) Facilities. All facilities where children are served, including areas for learning, playing, sleeping, toileting, and eating are, at a minimum: (ii) Clean and free from pests;	2	0.3%
1302.47(b)(2)(iv)	Safety practices. (b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with 1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety. This system must ensure: (2) Equipment and materials. 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: (iv) Allow for the separation of infants and toddlers from preschoolers during play in center-based programs; and,	2	0.3%
1302.51(b)	Parent activities to promote child learning and development. (b) 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.	2	0.3%
1302.52(c)(1)	Family partnership services. (c) Individualized family partnership services. A program must offer individualized family partnership services that: 1) Collaborate with families to identify interests, needs, and aspirations related to the family engagement outcomes described in paragraph (b) of this section;	2	0.3%
1302.52(c)(2)	Family partnership services. (c) Individualized family partnership services. A program must offer individualized family partnership services that: (2) Help families achieve identified individualized family engagement outcomes;	2	0.3%



Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
		n	%
1302.52(c)(4)	Family partnership services. (c) Individualized family partnership services. A program must offer individualized family partnership services that: (4) Assign staff and resources based on the urgency and intensity of identified family needs and goals.	2	0.3%
1302.90(c)(1)(i)	Personnel policies. (c) Standards of conduct. (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;	2	0.3%
1302.90(c)(1)(ii)(B)	Personnel policies. (c) Standards of conduct. (1) A program must ensure all staff, consultants, contractors, and volunteers abide by the program's standards of conduct that: (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: (B) Use isolation to discipline a child;	2	0.3%
1302.90(c)(1)(ii)(G)	Personnel policies. (c) Standards of conduct (1) A program must ensure all staff, consultants, contractors, and volunteers abide by the program's standards of conduct that: (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: (G) Physically abuse a child;	2	0.3%
1302.91(a)	Staff Hiring, Supervision and Development: Staff Qualifications (a) Purpose. 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 positions and 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.	2	0.3%
1302.92(c)(4)(iii)	Training and professional development. c) A program must implement a research-based, coordinated coaching strategy for education staff that: (4) Ensures intensive coaching opportunities for the staff identified through the process in paragraph (c)(1) of this section that: (iii) Provide ongoing communication between the coach, program director, education director, and any other relevant staff; and,	2	0.3%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
		n	%
1302.93(b)	Staff health and wellness. (b) 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.	2	0.3%
1303.12	Identifying and Mitigating Risk An agency must have an ongoing process to identify risks and have cost-effective insurance for those identified risks; a grantee must require the same for its delegates. The agency must specifically consider the risk of accidental injury to children while participating in the program. The grantee must submit proof of appropriate coverage in its initial application for funding. The process of identifying risks must also consider the risk of losses resulting from fraudulent acts by individuals authorized to disburse Head Start funds. Consistent with 45 CFR part 75, if the agency lacks sufficient coverage to protect the federal government's interest, the agency must maintain adequate fidelity bond coverage.	2	0.3%
1303.46(b)(3)	Recording and posting notices of federal interest. (b) Recording notices of federal interest. (3) If a grantee uses federal funds to renovate a facility that it, or a third party owns, the grantee must record the notice of federal interest in the official real property records for the jurisdiction in which the facility is located as soon as it receives the notice of award to renovate the facility.	2	0.3%
1303.5(a)(2)	Limitations on development and administrative costs. (a) Limitations. (2) To assess total program costs and determine whether a grantee meets this requirement, the grantee must: (i) Determine the costs to develop and administer its program, including the local costs of necessary resources; (ii) Categorize total costs as development and administrative or program costs; (iii) Identify and allocate the portion of dual benefits costs that are for development and administration; (iv) Identify and allocate the portion of indirect costs that are for development and administration versus program costs; and, (v) Delineate all development and administrative costs in the grant application and calculate the percentage of total approved costs allocated to development and administration.	2	0.3%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
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1304.11(b)(2)(ii)	<p>Basis for determining whether a Head Start agency will be subject to an open competition.</p> <p>A Head Start or Early Head Start agency shall be required to compete for its next five years of funding whenever the responsible HHS official determines that one or more of the following seven conditions existed during the relevant time period covered by the responsible HHS official's review under 1304.15:</p> <p>(b) An agency has been determined by the responsible HHS official based on a review conducted under section 641A(c)(1)(A), (C), or (D) of the Act during the relevant time period covered by the responsible HHS official's review under 1304.15 not to have:</p> <p>(2) After December 9, 2011, taken steps to achieve the school readiness goals described under paragraph (b)(1) of this section demonstrated by: (ii) Analyzing individual ongoing, child-level assessment data for all children birth to age five participating in the program and using that data in combination with input from parents and families to determine each child's status and progress with regard to, at a minimum, language and literacy development, cognition and general knowledge, approaches toward learning, physical well-being and motor development, and social and emotional development and to individualize the experiences, instructional strategies, and services to best support each child.</p>	2	0.3%
642(c)(1)(B)(iii)	<p>Powers and Functions of Head Start Agencies.</p> <p>(c) Program Governance- Upon receiving designation as a Head Start agency, the agency shall establish and maintain a formal structure for program governance, for the oversight of quality services for Head Start</p> <p>(1) GOVERNING BODY-</p> <p>(B) COMPOSITION- The governing body shall be composed as follows:</p> <p>(iii) Not less than 1 member shall be a licensed attorney familiar with issues that come before the governing body.</p>	2	0.3%
642(c)(1)(C)(ii)	<p>Powers and Functions of Head Start Agencies.</p> <p>(c) Program Governance- Upon receiving designation as a Head Start agency, the agency shall establish and maintain a formal structure for program governance, for the oversight of quality services for Head Start children and families, and for making decisions related to program design and implementation. Such structure shall include the following:</p> <p>(1) GOVERNING BODY-</p> <p>(C) CONFLICT OF INTEREST- Members of the governing body shall—</p> <p>(ii) not receive compensation for serving on the governing body or for providing services to the Head Start agency;</p>	2	0.3%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
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642(c)(1)(C)(iii)	<p>Powers and Functions of Head Start Agencies</p> <p>(c) Program Governance- Upon receiving designation as a Head Start agency, the agency shall establish and maintain a formal structure for program governance, for the oversight of quality services for Head Start children and families and for making decisions related to program design and implementation. Such structure shall include the following:</p> <p>(1) GOVERNING BODY-</p> <p>(C) CONFLICT OF INTEREST- Members of the governing body shall—</p> <p>(iii) not be employed, nor shall members of their immediate family be employed, by the Head Start agency (including any delegate agency);</p>	2	0.3%
642(c)(1)(E)(ii)	<p>Powers and Functions of Head Start Agencies</p> <p>(c) Program Governance- Upon receiving designation as a Head Start agency, the agency shall establish and maintain a formal structure for program governance, for the oversight of quality services for Head Start children and families and for making decisions related to program design and implementation. Such structure shall include the following:</p> <p>(1) GOVERNING BODY-</p> <p>(E) RESPONSIBILITIES- The governing body shall—</p> <p>(ii) establishing procedures and criteria for recruitment, selection, and enrollment of children;</p>	2	0.3%
642(c)(1)(E)(iv)(V)(aa)	<p>Powers and Functions of Head Start Agencies</p> <p>(c) Program Governance- Upon receiving designation as a Head Start agency, the agency shall establish and maintain a formal structure for program governance, for the oversight of quality services for Head Start children and families and for making decisions related to program design and implementation. Such structure shall include the following:</p> <p>(1) GOVERNING BODY-</p> <p>(E) RESPONSIBILITIES- The governing body shall—</p> <p>(iv) be responsible for other activities, including—</p> <p>(V) reviewing and approving all major policies of the agency, including—</p> <p>(aa) the annual self-assessment and financial audit;</p>	2	0.3%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
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642(c)(1)(E)(iv) (VII)(cc)	<p>Powers and Functions of Head Start Agencies</p> <p>(c) Program Governance- Upon receiving designation as a Head Start agency, the agency shall establish and maintain a formal structure for program governance, for the oversight of quality services for Head Start children and families and for making decisions related to program design and implementation. Such structure shall include the following:</p> <p>(1) GOVERNING BODY-</p> <p>(E) RESPONSIBILITIES- The governing body shall—</p> <p>(iv) be responsible for other activities, including—</p> <p>(VII) approving financial management, accounting, and reporting policies, and compliance with laws and regulations related to financial statements, including the—</p> <p>(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;</p>	2	0.3%
642(d)(3)	<p>Powers and Functions of Head Start Agencies</p> <p>(d) Program Governance Administration-</p> <p>(3) TRAINING AND TECHNICAL ASSISTANCE- Appropriate training and technical assistance shall be provided to the members of the governing body and the policy council to ensure that the members understand the information the members receive and can effectively oversee and participate in the programs of the Head Start agency.</p>	2	0.3%
642(f)(3)	<p>Teaching Practices and Learning Environments: Curriculum</p> <p>(f) Quality Standards, Curricula, and Assessment- To be so designated, each Head Start agency shall—</p> <p>(3) implement a research-based early childhood curriculum</p>	2	0.3%
642(f)(3)(A)	<p>Powers and Functions of Head Start Agencies</p> <p>(f) Quality Standards, Curricula, and Assessment- To be so designated, each Head Start agency shall—</p> <p>(3) implement a research-based early childhood curriculum that—</p> <p>(A) promotes young children's school readiness in the areas of language and cognitive development, early reading and mathematics skills, socio-emotional development, physical development, and approaches to learning;</p>	2	0.3%
75.303(a)	<p>Internal controls. The non-Federal entity must:</p> <p>(a) Establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations, and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in "Standards for Internal Control in the Federal Government," issued by the Comptroller General of the United States or the "Internal Control Integrated Framework," issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).</p>	2	0.3%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
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75.303(d)	Internal controls. The non-Federal entity must: (d) Take prompt action when instances of noncompliance are identified including noncompliance identified in audit findings.	2	0.3%
75.318(b)(1)	Real property. (b) Use. (1) Except as otherwise provided by Federal statutes or by the HHS awarding agency, real property will be used for the originally authorized purpose as long as needed for that purpose, during which time the non-Federal entity must not dispose of or encumber its title or other interests.	2	0.3%
75.318(b)(2)	Real property. (b) Use. (2) The non-Federal entity shall obtain written approval from the HHS awarding agency for the use of real property in other federally-sponsored projects when the recipient determines that the property is no longer needed for the purpose of the original project. Use in other projects shall be limited to those under federally-sponsored projects (i.e., awards) or programs that have purpose consistent with those authorized for support by the HHS awarding agency.	2	0.3%
75.318(c)	Real property. (c) Disposition. When real property is no longer needed as provided in subsection (b), the non-Federal entity must obtain disposition instructions from the HHS awarding agency or pass-through entity.	2	0.3%
75.320(a)(2)	Equipment. (a) Title. Subject to the obligations and conditions set forth in this section, title to equipment acquired under a Federal award will vest upon acquisition in the non-Federal entity. Unless a statute specifically authorizes the Federal agency to vest title in the non-Federal entity without further obligation to the Federal Government, and the Federal agency elects to do so, the title must be a conditional title. Title must vest in the non-Federal entity subject to the following conditions: (2) Not encumber the property without approval of the HHS awarding agency or pass-through entity.	2	0.3%
75.327(a)	General Procurement Standards (a) The non-Federal entity must use its own documented procurement procedures which reflect applicable State, local, and tribal laws and regulations, provided that the procurements conform to applicable Federal law and the standards identified in this part.	2	0.3%
75.327(i)	General Procurement Standards (i) The non-Federal entity must maintain records sufficient to detail the history of procurement. These records will include, but are not necessarily limited to the following: rationale for the method of procurement, selection of contract type, contractor selection or rejection, and the basis for the contract price.	2	0.3%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
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75.327(c)(1)	(c)(1) The non-Federal entity must maintain written standards of conduct covering conflicts of interest and governing the actions of its employees engaged in the selection, award and administration of contracts. No employee, officer, or agent may participate in the selection, award, or administration of a contract supported by a Federal award if he or she has a real or apparent conflict of interest. Such a conflict of interest would arise when the employee, officer, or agent, any member of his or her immediate family, his or her partner, or an organization which employs or is about to employ any of the parties indicated herein, has a financial or other interest in or a tangible personal benefit from a firm considered for a contract. The officers, employees, and agents of the non-Federal entity may neither solicit nor accept gratuities, favors, or anything of monetary value from contractors or parties to subcontracts. However, non-Federal entities may set standards for situations in which the financial interest is not substantial or the gift is an unsolicited item of nominal value. The standards of conduct must provide for disciplinary actions to be applied for violations of such standards by officers, employees, or agents of the non-Federal entity.	2	0.3%
75.403(b)	Factors affecting allowability of costs. (b) Conform to any limitations or exclusions set forth in these principles or in the Federal award as to types or amount of cost items.	2	0.3%
75.405(a)(1)	Allocable costs. (a) A cost is allocable to a particular Federal award or other cost objective if the goods or services involved are chargeable or assignable to that Federal award or cost objective in accordance with relative benefits received. This standard is met if the cost: (1) Is incurred specifically for the Federal award;	2	0.3%
75.430	Compensation - personal services. (a) General Compensation for personal services includes all remuneration, paid currently or accrued, for services of employees rendered during the period of performance under the Federal award, including but not necessarily limited to wages and salaries. Compensation for personal services may also include fringe benefits which are addressed in 75.431. Costs of compensation are allowable to the extent that they satisfy the specific requirements of this part, and that the total compensation for individual employees: (b) Reasonableness. (c) Professional activities outside the non-Federal entity. (d) Unallowable costs. (e) Special considerations. (f) Incentive compensation. (g) Nonprofit organizations. (h) Institutions of higher education (IHEs). (i) Standards for documentation of personnel expenses.	2	0.3%



Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
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75.430(b)	Compensation - personal services. (b) Reasonableness. Compensation for employees engaged in work on Federal awards will be considered reasonable to the extent that it is consistent with that paid for similar work in other activities of the non-Federal entity. In cases where the kinds of employees required for Federal awards are not found in the other activities of the non-Federal entity, compensation will be considered reasonable to the extent that it is comparable to that paid for similar work in the labor market in which the non-Federal entity competes for the kind of employees involved.	2	0.3%
75.435	Defense and prosecution of criminal and civil proceedings, claims, appeals, and patent infringements.	2	0.3%
75.446(b)	Idle facilities and idle capacity. (b) The costs of idle facilities are unallowable except to the extent that: (1) They are necessary to meet workload requirements which may fluctuate and are allocated appropriately to all benefiting programs; or (2) Although not necessary to meet fluctuations in workload, they were necessary when acquired and are now idle because of changes in program requirements, efforts to achieve more economical operations, reorganization, termination, or other causes which could not have been reasonably foreseen. Under the exception stated in this subsection, costs of idle facilities are allowable for a reasonable period of time, ordinarily not to exceed one year, depending on the initiative taken to use, lease, or dispose of such facilities.	2	0.3%
75.446(c)	Idle facilities and idle capacity. (c) The costs of idle capacity are normal costs of doing business and are a factor in the normal fluctuations of usage or indirect cost rates from period to period. Such costs are allowable, provided that the capacity is reasonably anticipated to be necessary to carry out the purpose of the Federal award or was originally reasonable and is not subject to reduction or elimination by use on other Federal awards, subletting, renting, or sale, in accordance with sound business, economic, or security practices. Widespread idle capacity throughout an entire facility or among a group of assets having substantially the same function may be considered idle facilities.	2	0.3%
1301.2(b)(2)	Governance Engagement and Oversight: The Governing Body (b) Duties and responsibilities. (1) The governing body is responsible for activities specified at section 642(c)(1)(E) of the Act. (2) The governing body must use ongoing monitoring results, data on school readiness goals, other information described in §1302.102, and information described at section 642(d)(2) of the Act to conduct its responsibilities.	1	0.2%
1301.3(e)	Policy council and policy committee. (e) Reimbursement. 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.	1	0.2%



Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
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1302.101(a)(3)	<p>Budget Management</p> <p>(b) Duties and responsibilities. (1) The governing body is responsible for activities specified at section 642(c)(1)(E) of the Act.</p> <p>(2) The governing body must use ongoing monitoring results, data on <u>school readiness goals</u>, other information described in §1302.102, and information described at section 642(d)(2) of the Act to conduct its responsibilities.</p>	1	0.2%
1302.101(b)(3)	<p>Management system.</p> <p>(b) Coordinated approaches. At the beginning of each program year, and on an ongoing basis throughout the year, a program must design and implement program-wide coordinated approaches that ensure:</p> <p>(3) The full and effective participation of all children with disabilities, including but not limited to children eligible for services under IDEA, by providing services with appropriate facilities, program materials, curriculum, instruction, staffing, supervision, and partnerships, at a minimum, consistent with section 504 of the Rehabilitation Act and the Americans with Disabilities Act; and,</p>	1	0.2%
1302.102(b)(1)(iv)	<p>Achieving program goals.</p> <p>(b) Monitoring program performance. (1) Ongoing compliance oversight and correction. In order to ensure effective ongoing oversight and correction, a program must establish and implement a system of ongoing oversight that ensures effective implementation of the program performance standards, including ensuring child safety, and other applicable federal regulations as described in this part, and must:</p> <p>(iv) Implement procedures that prevent recurrence of previous quality and compliance issues, including previously identified deficiencies, safety incidents, and audit findings.</p>	1	0.2%
1302.102(b)(2)(ii)	<p>Achieving program goals.</p> <p>(b) Monitoring program performance.</p> <p>(2) Ongoing assessment of program goals. A program must effectively oversee progress towards program goals on an ongoing basis and annually must:</p> <p>(ii) Communicate and collaborate with the governing body and policy council, program staff, and parents of enrolled children when conducting the annual self-assessment; and,</p>	1	0.2%
1302.102(c)(2)(iv)	<p>Achieving program goals.</p> <p>(c) Using data for continuous improvement.</p> <p>(2) This process must:</p> <p>(iv) Use information from ongoing monitoring and the annual self-assessment, and program data on teaching practice, staffing and professional development, child-level assessments, family needs assessments, and comprehensive services, to identify program needs, and develop and implement plans for program improvement; and,</p>	1	0.2%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
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1302.102(c)(2)(v)	Achieving program goals. (c) Using data for continuous improvement. (2) This process must: (v) Use program improvement plans as needed to either strengthen or adjust content and strategies for professional development, change program scope and services, refine school readiness and other program goals, and adapt strategies to better address the needs of sub-groups.	1	0.2%
1302.102(d)(1)	Achieving program goals. (d) Reporting. (1) A program must submit: (i) Status reports, determined by ongoing oversight data, to the governing body and policy council, at least semi-annually; (ii) Reports, as appropriate, to the responsible HHS official immediately or as soon as practicable, related to any significant incidents affecting the health and safety of program participants, circumstances affecting the financial viability of the program, breaches of personally identifiable information, or program involvement in legal proceedings, any matter for which notification or a report to state, tribal, or local authorities is required by applicable law, including at a minimum: (A) Any reports regarding agency staff or volunteer compliance with federal, state, tribal, or local laws addressing child abuse and neglect or laws governing sex offenders; (B) Incidents that require classrooms or centers to be closed for any reason; (C) Legal proceedings by any party that are directly related to program operations; and, (D) All conditions required to be reported under 1304.12, including disqualification from the Child and Adult Care Food Program (CACFP) and license revocation.	1	0.2%
1302.102(d)(2)	Achieving program goals. (d) Reporting. (2) Annually, a program must publish and disseminate a report that complies with section 644(a)(2) of the Act and includes a summary of a program's most recent community assessment, as described in 1302.11(b), consistent with privacy protections in subpart C of part 1303 of this chapter.	1	0.2%
1302.12(a)(1)(ii)	Determining, verifying, and documenting eligibility. (a) Process overview. (1) Program staff must: (ii) Verify information as required in paragraphs (h) and (i) of this section; and,	1	0.2%
1302.12(a)(1)(iii)	Determining, verifying, and documenting eligibility. (a) Process overview. (1) Program staff must: (iii) Create an eligibility determination record for enrolled participants according to paragraph (k) of this section.	1	0.2%
1302.12(k)(3)	Determining, verifying, and documenting eligibility. (k) Records. (3) 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.	1	0.2%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
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1302.14(a)(1)	Selection process. (a) Selection criteria. (1) 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 described 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.	1	0.2%
1302.14(b)(1)	Selection process. (b) Children eligible for services under IDEA. (1) 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.	1	0.2%
1302.16(a)(2)(i)	Attendance (a) <i>Promoting regular attendance.</i> A program must track attendance for each child. (2) A program must implement strategies to promote attendance. At a minimum, a program must: (i) Provide information about the benefits of regular attendance;	1	0.2%
1302.16(a)(2)(ii)	Attendance. (a) Promoting regular attendance. A program must track attendance for each child. (2) A program must implement strategies to promote attendance. At a minimum, a program must: (ii) Support families to promote the child's regular attendance;	1	0.2%
1302.16(a)(2)(iii)	Attendance. (a) Promoting regular attendance. A program must track attendance for each child. (2) A program must implement strategies to promote attendance. At a minimum, a program must: (iii) 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,	1	0.2%
1302.16(a)(2)(iv)	Attendance (a) Promoting regular attendance. A program must track attendance for each child. (2) A program must implement strategies to promote attendance. At a minimum, a program must: (iv) 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 identified children, such as direct contact with parents or intensive case management, as necessary.	1	0.2%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
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1302.17(a)(1)	Suspension and expulsion. (a) Limitations on suspension. (1) 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.	1	0.2%
1302.17(b)(1)	Suspension and expulsion. (b) Prohibition on expulsion. (1) A program cannot expel or unenroll a child from Head Start because of a child's behavior.	1	0.2%
1302.21(b)	Center-based option. (b) Ratios and group size.	1	0.2%
1302.21(b)(1)	Center-based option. (b) Ratios and group size. (1) Staff-child ratios and group size maximums must be determined by the age of the majority of children and the needs of children present. A program must determine the age of the majority of children in a class at the start of the year and may adjust this determination during the program year, if necessary. Where state or local licensing requirements are more stringent than the teacher-child ratios and group size specifications in this section, a program must meet the stricter requirements. A program must maintain appropriate ratios during all hours of program operation, except: (i) For brief absences of a teaching staff member for no more than five minutes; and, (ii) During nap time, one teaching staff member may be replaced by one staff member or volunteer who does not meet the teaching qualifications required for the age.	1	0.2%
1302.21(b)(1) (i)	Center-based option. (b) Ratios and group size. (1) Staff-child ratios and group size maximums must be determined by the age of the majority of children and the needs of children present. A program must determine the age of the majority of children in a class at the start of the year and may adjust this determination during the program year, if necessary. Where state or local licensing requirements are more stringent than the teacher-child ratios and group size specifications in this section, a program must meet the stricter requirements. A program must maintain appropriate ratios during all hours of program operation, except: (i) For brief absences of a teaching staff member for no more than five minutes;	1	0.2%
1302.21(b)(2)	Center-based option. (b) Ratios and group size. (2) An Early Head Start or Migrant or Seasonal Head Start class that serves children under 36 months old must have two teachers with no more than eight children, or three teachers with no more than nine children. Each teacher must be assigned consistent, primary responsibility for no more than four children to promote continuity of care for individual children. A program must minimize teacher changes throughout a child's enrollment, whenever possible, and consider mixed age group classes to support continuity of care.	1	0.2%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
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1302.21(d)(2)	Center-based option. (d) Licensing and square footage requirements. (2) A center-based program must have at least 35 square feet of usable indoor space per child available for the care and use of children (exclusive of bathrooms, halls, kitchen, staff rooms, and storage places) and at least 75 square feet of usable outdoor play space per child.	1	0.2%
1302.23(b)(1)	Family child care option. (b) Ratios and group size. (1) A program that operates the family child care option where Head Start children are enrolled must ensure group size does not exceed the limits specified in this section. If the family child care provider's own children under the age of six are present, they must be included in the group size.	1	0.2%
1302.23(b)(4)	Family child care option. (b) Ratios and group size. (4) A program must maintain appropriate ratios during all hours of program operation. A program must ensure providers have systems to ensure the safety of any child not within view for any period. A program must make substitute staff and assistant providers available with the necessary training and experience to ensure quality services to children are not interrupted.	1	0.2%
1302.31(b)(2)	Teaching Practices and Learning Environments: Effective Teaching Practices for Dual Language Learners (b) Effective teaching practices. (1) Teaching practices must: (2) For dual language learners, a program must recognize bilingualism and biliteracy as strengths and implement research-based teaching practices that support their development.	1	0.2%
1302.31(b)(2) (ii)	Teaching and the learning environment. (b) Effective teaching practices. (2) For dual language learners, a program must recognize bilingualism and biliteracy as strengths and implement research-based teaching practices that support their development. These practices must: (ii) 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,	1	0.2%
1302.31(b)(2) (iii)	Teaching and the learning environment. (b) Effective teaching practices. (2) For dual language learners, a program must recognize bilingualism and biliteracy as strengths and implement research-based teaching practices that support their development. These practices must: (iii) 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.	1	0.2%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
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1302.31(c)	Center-based option. (c) Service duration. (c) <i>Learning environment</i> . A program must ensure teachers implement well-organized learning 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:	1	0.2%
1302.42(b)	Addressing Health Status and Health Needs (b) Ensuring up-to-date child health status. (1) 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:	1	0.2%
1302.42(c)(1)	Child health status and care. (c) Ongoing care. (1) A program must help parents continue to follow recommended schedules of well-child and oral health care.	1	0.2%
1302.42(c)(3)	Child health status and care. (c) Ongoing care. (3) 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.	1	0.2%
1302.43	Oral health practices. 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.	1	0.2%
1302.44(a)(2) (ii)	Child nutrition. (a) Nutrition service requirements. (2) Specifically, a program must: (ii) Ensure each child in a program that operates for six hours or more per day receives meals and snacks that provide one half to two thirds of the child's daily nutritional needs, depending upon the length of the program day;	1	0.2%
1302.44(a)(2) (iv)	Child nutrition. (a) Nutrition service requirements. (2) Specifically, a program must: (iv) Feed infants and toddlers according to their individual developmental readiness and feeding skills as recommended in USDA requirements outlined in 7 CFR parts 210, 220, and 226, and ensure infants and young toddlers are fed on demand to the extent possible;	1	0.2%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
		n	%
1302.45(a)(4)	Child mental health and social and emotional well-being. (a) Wellness promotion. To support a program-wide culture that promotes children's mental health, social and emotional well-being, and overall health, a program must: (4) Build community partnerships to facilitate access to additional mental health resources and services, as needed.	1	0.2%
1302.45(b)	Mental Health Services (b) <i>Mental health consultants</i> . A program must ensure mental health consultants assist:	1	0.2%
1302.46(a)	Integrating Family Engagement into all Systems and Services: Health Services (a) Parent collaboration. 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.	1	0.2%
1302.47(b)(1)	Safety practices. (b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with 1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety. This system must ensure: (1) Facilities. All facilities where children are served, including areas for learning, playing, sleeping, toileting, and eating are, at a minimum: (i) Meet licensing requirements in accordance with 1302.21(d)(1) and 1302.23(d); (ii) Clean and free from pests; (iii) Free from pollutants, hazards and toxins that are accessible to children and could endanger children's safety; (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; (v) Well lit, including emergency lighting; (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; (vii) Free from firearms or other weapons that are accessible to children; (viii) Designed to separate toileting and diapering areas from areas for preparing food, cooking, eating, or children's activities; and, (ix) Kept safe through an ongoing system of preventative maintenance.	1	0.2%



Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
		n	%
1302.47(b)(1) (i)	Safety practices. (b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with 1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety. This system must ensure: (1) Facilities. All facilities where children are served, including areas for learning, playing, sleeping, toileting, and eating are, at a minimum: (i) Meet licensing requirements in accordance with 1302.21(d)(1) and 1302.23(d);	1	0.2%
1302.47(b)(2)	Safety practices. (b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with 1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety. This system must ensure: (2) Equipment and materials. 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: (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; (iii) Be designed to ensure appropriate supervision of children at all times; (iv) Allow for the separation of infants and toddlers from preschoolers during play in center-based programs; and, (v) Be kept safe through an ongoing system of preventative maintenance.	1	0.2%
1302.47(b)(2) (ii)	Safety practices. (b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with 1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety. This system must ensure: (2) Equipment and materials. 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: (ii) Be accessible only to children for whom they are age appropriate;	1	0.2%



Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
		n	%
1302.47(b)(5)(iii)	Safety practices. (b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with 1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety. This system must ensure: (5) Safety practices. All staff and consultants follow appropriate practices to keep children safe during all activities, including, at a minimum: (iii) Appropriate indoor and outdoor supervision of children at all times;	1	0.2%
1302.47(b)(6)(i)	Safety practices. (b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with 1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety. This system must ensure: (6) Hygiene practices. All staff systematically and routinely implement hygiene practices that at a minimum ensure: (i) Appropriate toileting, hand washing, and diapering procedures are followed;	1	0.2%
1302.47(b)(6)(ii)	Safety practices. (b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with 1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety. This system must ensure: (6) Hygiene practices. All staff systematically and routinely implement hygiene practices that at a minimum ensure: (ii) Safe food preparation; and,	1	0.2%
1302.52(c)	Identifying Family Needs and Making Progress toward Individual Family Outcomes (c) <i>Individualized family partnership services</i> . A program must offer individualized family partnership services	1	0.2%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
		n	%
1302.90(c)(1)(ii)(H)	Personnel policies. (c) Standards of conduct. (1) A program must ensure all staff, consultants, contractors, and volunteers abide by the program's standards of conduct that: (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: (H) Use any form of verbal abuse, including profane, sarcastic language, threats, or derogatory remarks about the child or child's family; or,	1	0.2%
1302.91(c)	Staff qualifications and competency requirements. (c) Fiscal officer. 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.	1	0.2%
1302.91(e)(6)(i)	Staff qualifications and competency requirements. (e) Child and family services staff. (6) Home visitors. A program must ensure home visitors providing home-based education services: (i) 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,	1	0.2%
1302.92(b)(1)	Training and professional development. (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: (1) Staff completing a minimum of 15 clock hours of professional development per year. For teaching staff, such professional development must meet the requirements described in section 648A(a)(5) of the Act.	1	0.2%
1302.92(b)(2)	Training and professional development. (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: (2) Training on methods to handle suspected or known child abuse and neglect cases, that comply with applicable federal, state, local, and tribal laws;	1	0.2%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
		n	%
1303.46(a)	Recording and posting notices of federal interest. (a) Survival of federal interest. A grantee that receives funds under this subpart must file notices of federal interest as set forth in paragraph (b) of this section. Federal interest cannot be defeated by a grantee's failure to file a notice of federal interest.	1	0.2%
1303.46(b)(1)	Recording and posting notices of federal interest. (b) Recording notices of federal interest. (1) If a grantee uses federal funds to purchase real property or a facility, excluding modular units, appurtenant to real property, it must record a notice of federal interest in the official real property records for the jurisdiction where the facility is or will be located. The grantee must file the notice of federal interest as soon as it uses Head Start funds to either fully or partially purchase a facility or real property where a facility will be constructed or as soon as it receives permission from the responsible HHS official to use Head Start funds to continue purchase on a facility.	1	0.2%
1303.46(b)(4)	Recording and posting notices of federal interest. (b) Recording notices of federal interest. (4) If a grantee uses federal funds in whole or in part to purchase a modular unit or to renovate a modular unit, the grantee must post the notice of federal interest, in clearly visible locations, on the exterior of the modular unit and inside the modular unit.	1	0.2%
1303.72(a)(1)	Vehicle operation. (a) Safety. A program must ensure: (1) Each child is seated in a child restraint system appropriate to the child's age, height, and weight;	1	0.2%
1303.72(a)(3)	Vehicle operation. (a) Safety. A program must ensure: (3) Up-to-date child rosters and lists of the adults each child is authorized to be released to, including alternates in case of emergency, are maintained and no child is left behind, either at the classroom or on the vehicle at the end of the route; and,	1	0.2%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
		n	%
1304.11(b)(2)(i)	<p>Basis for determining whether a Head Start agency will be subject to an open competition.</p> <p>A Head Start or Early Head Start agency shall be required to compete for its next five years of funding whenever the responsible HHS official determines that one or more of the following seven conditions existed during the relevant time period covered by the responsible HHS official's review under 1304.15:</p> <p>(b) An agency has been determined by the responsible HHS official based on a review conducted under section 641A(c)(1)(A), (C), or (D) of the Act during the relevant time period covered by the responsible HHS official's review under 1304.15 not to have:</p> <p>(2) After December 9, 2011, taken steps to achieve the school readiness goals described under paragraph (b)(1) of this section demonstrated by:</p> <p>(i) Aggregating and analyzing aggregate child-level assessment data at least three times per year (except for programs operating less than 90 days, which will be required to do so at least twice within their operating program period) and using that data in combination with other program data to determine grantees' progress toward meeting its goals, to inform parents and the community of results, and to direct continuous improvement related to curriculum, instruction, professional development, program design and other program decisions; and,</p>	1	0.2%
642(c)(1)(E)(i)	<p>Governance Engagement and Oversight: The Governing Body</p> <p>(c) Program Governance- Upon receiving designation as a Head Start agency, the agency shall establish and maintain a formal structure for program governance, for the oversight of quality services for Head Start children and families and for making decisions related to program design and implementation. Such structure shall include the following:</p> <p>(1) GOVERNING BODY-</p> <p>(E) RESPONSIBILITIES- The governing body shall—</p> <p>(i) have legal and fiscal responsibility for administering and overseeing programs under this subchapter, including the safeguarding of Federal funds;</p>	1	0.2%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
		n	%
642(c)(1)(E)(iv) (VII)(bb)	<p>Governance Engagement and Oversight: The Governing Body</p> <p>(c) Program Governance- Upon receiving designation as a Head Start agency, the agency shall establish and maintain a formal structure for program governance, for the oversight of quality services for Head Start children and families and for making decisions related to program design and implementation. Such structure shall include the following:</p> <p>(1) GOVERNING BODY-</p> <p>(E) RESPONSIBILITIES- The governing body shall—</p> <p>(iv) be responsible for other activities, including—</p> <p>(VII) approving financial management, accounting, and reporting policies, and compliance with laws and regulations related to financial statements, including the—</p> <p>(bb) annual approval of the operating budget of the agency;</p>	1	0.2%
642(f)(3)(B)	<p>Powers and Functions of Head Start Agencies</p> <p>(f) Quality Standards, Curricula, and Assessment- To be so designated, each Head Start agency shall—</p> <p>(3) implement a research-based early childhood curriculum that—</p> <p>(B) is based on scientifically valid research and has standardized training procedures and curriculum materials to support implementation;</p>	1	0.2%
642(f)(3)(E)	<p>Powers and Functions of Head Start Agencies</p> <p>(f) Quality Standards, Curricula, and Assessment- To be so designated, each Head Start agency shall—</p> <p>(3) implement a research-based early childhood curriculum that—</p> <p>(E) is aligned with the Head Start Child Outcomes Framework developed by the Secretary and, as appropriate, State early learning standards;</p>	1	0.2%
644(a)(2)	<p>Administrative Requirements and Standards</p> <p>(a)(2) Each Head Start agency shall make available to the public a report published at least once in each fiscal year</p>	1	0.2%
653(b)(1)	<p>Comparability of Wages. (b) Limitation-</p> <p>(1) IN GENERAL- Notwithstanding any other provision of law, no Federal funds may be used to pay any part of the compensation of an individual employed by a Head Start agency, if such compensation, including non-Federal funds, exceeds an amount equal to the rate payable for level II of the Executive Schedule under section 5313 of title 5, United States Code.</p>	1	0.2%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
		n	%
75.302(a)	Financial management and standards for financial management systems. (a) Each state must expend and account for the Federal award in accordance with state laws and procedures for expending and accounting for the state's own funds. In addition, the state's and the other non-Federal entity's financial management systems, including records documenting compliance with Federal statutes, regulations, and the terms and conditions of the Federal award, must be sufficient to permit the preparation of reports required by general and program-specific terms and conditions; and the tracing of funds to a level of expenditures adequate to establish that such funds have been used according to the Federal statutes, regulations, and the terms and conditions of the Federal award. See also 75.450.	1	0.2%
75.302(b)(5)	Financial management and standards for financial management systems. (b) The financial management system of each non-Federal entity must provide for the following: (5) Comparison of expenditures with budget amounts for each Federal award.	1	0.2%
75.302(b)(6)	Financial management and standards for financial management systems. (b) The financial management system of each non-Federal entity must provide for the following: (6) Written procedures to implement the requirements of 75.305.	1	0.2%
75.305(b)	Payment. (b) For non-Federal entities other than states, payments methods must minimize the time elapsing between the transfer of funds from the United States Treasury or the pass-through entity and the disbursement by the non-Federal entity whether the payment is made by electronic funds transfer, or issuance or redemption of checks, warrants, or payment by other means. See also 75.302(b)(6). Except as noted elsewhere in this part, HHS awarding agencies must require recipients to use only OMB-approved standard governmentwide information collection requests to request payment.	1	0.2%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
		n	%
75.305(b)(1)	<p>Financial Management System</p> <p>(b) For non-Federal entities other than states, payments methods must minimize the time elapsing between the transfer of funds from the United States Treasury or the pass-through entity and the disbursement by the non-Federal entity whether the payment is made by electronic funds transfer, or issuance or redemption of checks, warrants, or payment by other means. See also § 75.302(b)(6). Except as noted elsewhere in this part, HHS awarding agencies must require recipients to use only OMB-approved standard governmentwide information collection requests to request payment.</p> <p>(1) The <u>non-Federal entity</u> must be paid in advance, provided it maintains or demonstrates the willingness to maintain both written procedures that minimize the time elapsing between the transfer of funds and disbursement by the <u>non-Federal entity</u>, and financial management systems that meet the <u>standards</u> for fund control and accountability as established in this part. <u>Advance payments</u> to a <u>non-Federal entity</u> must be limited to the minimum amounts needed and be timed to be in accordance with the actual, immediate cash requirements of the <u>non-Federal entity</u> in carrying out the purpose of the approved program or project. The timing and amount of <u>advance payments</u> must be as close as is administratively feasible to the actual disbursements by the <u>non-Federal entity</u> for direct program or <u>project costs</u> and the proportionate share of any allowable indirect costs. The <u>non-Federal entity</u> must make timely payment to <u>contractors</u> in accordance with the <u>contract</u> provisions.</p>	1	0.2%
75.306	Cost sharing or matching.	1	0.2%
75.306(b)(1)	<p>Cost sharing or matching. (b) For all Federal awards, any shared costs or matching funds and all contributions, including cash and third party in-kind contributions, must be accepted as part of the non-Federal entity's cost sharing or matching when such contributions meet all of the following criteria:</p> <p>(1) Are verifiable from the non-Federal entity's records;</p>	1	0.2%
75.306(b)(2)	<p>Cost sharing or matching.</p> <p>(b) For all Federal awards, any shared costs or matching funds and all contributions, including cash and third party in-kind contributions, must be accepted as part of the non-Federal entity's cost sharing or matching when such contributions meet all of the following criteria:</p> <p>(2) Are not included as contributions for any other Federal award;</p>	1	0.2%
75.306(b)(3)	<p>Cost sharing or matching.</p> <p>(b) For all Federal awards, any shared costs or matching funds and all contributions, including cash and third party in-kind contributions, must be accepted as part of the non-Federal entity's cost sharing or matching when such contributions meet all of the following criteria:</p> <p>(3) Are necessary and reasonable for accomplishment of project or program objectives;</p>	1	0.2%

Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Citations	
		n	%
75.306(b)(4)	Cost sharing or matching. (b) For all Federal awards, any shared costs or matching funds and all contributions, including cash and third party in-kind contributions, must be accepted as part of the non-Federal entity's cost sharing or matching when such contributions meet all of the following criteria: (4) Are allowable under subpart E of this part;	1	0.2%
75.306(i)(3)	Cost sharing or matching. (i) The value of donated property must be determined in accordance with the usual accounting policies of the non-Federal entity, with the following qualifications: (3) The value of donated space must not exceed the fair rental value of comparable space as established by an independent appraisal of comparable space and facilities in a privately-owned building in the same locality.	1	0.2%
75.309(a)	Period of performance and availability of funds. (a) A non-Federal entity may charge to the Federal award only allowable costs incurred during the period of performance (except as described in 75.461) and any costs incurred before the HHS awarding agency or pass-through entity made the Federal award that were authorized by the Federal awarding agency or pass-through entity. Funds available to pay allowable costs during the period of performance include both Federal funds awarded and carryover balances.	1	0.2%
75.441	Costs resulting from non-Federal entity violations of, alleged violations of, or failure to comply with, Federal, state, tribal, local or foreign laws and regulations are unallowable, except when incurred as a result of compliance with specific provisions of the Federal award, or with prior written approval of the HHS awarding agency.	1	0.2%



**Exhibit A2: FY 2018 Performance Standards Most Frequently Cited as Deficient**

Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
1302.90(c)(1)(ii) (A)	Personnel policies. (c) Standards of conduct. (1) A program must ensure all staff, consultants, contractors, and volunteers abide by the program's standards of conduct that: (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: (A) Use corporal punishment;	37	18.2%
1302.90(c)(1)(v)	Personnel policies. (c) Standards of conduct. (1) A program must ensure all staff, consultants, contractors, and volunteers abide by the program's standards of conduct that: (v) Ensure no child is left alone or unsupervised by staff, consultants, contractors, or volunteers while under their care.	33	16.3%
1302.90(c)(1)(ii) (G)	Personnel policies. (c) Standards of conduct (1) A program must ensure all staff, consultants, contractors, and volunteers abide by the program's standards of conduct that: (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: (G) Physically abuse a child;	27	13.3%
1302.90(c)(1)(ii) (H)	Personnel policies. (c) Standards of conduct. (1) A program must ensure all staff, consultants, contractors, and volunteers abide by the program's standards of conduct that: (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: (H) Use any form of verbal abuse, including profane, sarcastic language, threats, or derogatory remarks about the child or child's family; or,	8	3.9%
1302.47(b)(5) (iv)	Safety practices. (b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with §1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety. (5) Safety practices. All staff and consultants follow appropriate practices to keep children safe during all activities, including, at a minimum: (iv) Only releasing children to an authorized adult;	7	3.4%
1303.72(a)(3)	Vehicle operation. (a) Safety. A program must ensure: (3) Up-to-date child rosters and lists of the adults each child is authorized to be released to, including alternates in case of emergency, are maintained and no child is left behind, either at the classroom or on the vehicle at the end of the route; and,	7	3.4%

Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
1302.90(c)(1)(ii) (B)	Personnel policies. (c) Standards of conduct. (1) A program must ensure all staff, consultants, contractors, and volunteers abide by the program's standards of conduct that: (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: (B) Use isolation to discipline a child;	6	3.0%
1302.90(c)(1)(ii) (F)	Personnel policies. (c) Standards of conduct. (1) A program must ensure all staff, consultants, contractors, and volunteers abide by the program's standards of conduct that: (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: (F) Use any form of emotional abuse, including public or private humiliation, rejecting, terrorizing, extended ignoring, or corrupting a child;	6	3.0%
642(c)(1)(A)	Powers and Functions of Head Start Agencies. (c) Program Governance- Upon receiving designation as a Head Start agency, the agency shall establish and maintain a formal structure for program governance, for the oversight of quality services for Head Start children and families and for making decisions related to program design and implementation. Such structure shall include the following: (1) GOVERNING BODY- (A) IN GENERAL- The governing body shall have legal and fiscal responsibility for the Head Start agency.	4	2.0%
642(c)(1)(E)(i)	Governance Engagement and Oversight: The Governing Body (c) Program Governance- Upon receiving designation as a Head Start agency, the agency shall establish and maintain a formal structure for program governance, for the oversight of quality services for Head Start children and families and for making decisions related to program design and implementation. Such structure shall include the following: (1) GOVERNING BODY- (E) RESPONSIBILITIES- The governing body shall— (i) have legal and fiscal responsibility for administering and overseeing programs under this subchapter, including the safeguarding of Federal funds;	4	2.0%
1302.101(a)(1)	Program and Human Resource Management (a) Implementation. A program must implement a management system that: (1) Ensures a program, fiscal, and human resource management structure that provides effective management and oversight of all program areas and fiduciary responsibilities to enable delivery of high-quality services in all of the program services described in subparts C, D, E, F, G, and H of this part;	3	1.5%

Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
1302.101(a)(2)	Staff Hiring, Supervision and Development: Ongoing Supervision (a) <i>Implementation</i> . A program must implement a management system that: (2) Provides regular and ongoing supervision to support individual staff professional development and continuous program quality improvement;	3	1.5%
1302.102(b)(1)(i)	Achieving program goals. (b) Monitoring program performance. (1) Ongoing compliance oversight and correction. In order to ensure effective ongoing oversight and correction, a program must establish and implement a system of ongoing oversight that ensures effective implementation of the program performance standards, including ensuring child safety, and other applicable federal regulations as described in this part, and must: (i) Collect and use data to inform this process;	3	1.5%
1302.102(b)(1)(ii)	Achieving program goals. (b) Monitoring program performance. (1) Ongoing compliance oversight and correction. In order to ensure effective ongoing oversight and correction, a program must establish and implement a system of ongoing oversight that ensures effective implementation of the program performance standards, including ensuring child safety, and other applicable federal regulations as described in this part, and must: (ii) Correct quality and compliance issues immediately, or as quickly as possible;	3	1.5%
1302.47(a)	Safety practices. (a) 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 Caring for our Children Basics, available at <a href="http://www.acf.hhs.gov/sites/default/files/ecd/caring_for_our_children_basics.pdf">http://www.acf.hhs.gov/sites/default/files/ecd/caring_for_our_children_basics.pdf</a> , for additional information to develop and implement adequate safety policies and practices described in this part.	3	1.5%
1302.90(c)(1)(ii)(D)	Personnel policies. (c) Standards of conduct. (1) A program must ensure all staff, consultants, contractors, and volunteers abide by the program's standards of conduct that: (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: (D) Use or withhold food as a punishment or reward;	3	1.5%
1302.102(c)(1)	Achieving program goals. (c) Using data for continuous improvement. (1) A program must implement a process for using data to identify program strengths and needs, develop and implement plans that address program needs, and continually evaluate compliance with program performance standards and progress towards achieving program goals described in paragraph (a) of this section.	2	1.0%

Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
1302.47(b)(1)(iv)	<p>Safety practices.</p> <p>(b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with 1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety. This system must ensure:</p> <p>(1) Facilities. All facilities where children are served, including areas for learning, playing, sleeping, toileting, and eating are, at a minimum:</p> <p>(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;</p>	2	1.0%
1302.90(c)(1)(ii)(E)	<p>Personnel policies.</p> <p>(c) Standards of conduct. (1) A program must ensure all staff, consultants, contractors, and volunteers abide by the program's standards of conduct that: (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:</p> <p>(E) Use toilet learning/training methods that punish, demean, or humiliate a child;</p>	2	1.0%
642(c)(1)(E)(ii)	<p>Powers and Functions of Head Start Agencies</p> <p>(c) Program Governance- Upon receiving designation as a Head Start agency, the agency shall establish and maintain a formal structure for program governance, for the oversight of quality services for Head Start children and families and for making decisions related to program design and implementation. Such structure shall include the following:</p> <p>(1) GOVERNING BODY-</p> <p>(E) RESPONSIBILITIES- The governing body shall—</p> <p>(ii) establishing procedures and criteria for recruitment, selection, and enrollment of children;</p>	2	1.0%
642(c)(1)(E)(iii)	<p>Powers and Functions of Head Start Agencies.</p> <p>(c) Program Governance- Upon receiving designation as a Head Start agency, the agency shall establish and maintain a formal structure for program governance, for the oversight of quality services for Head Start</p> <p>(c) Program Governance- Upon receiving designation as a Head Start agency, the agency shall establish and maintain a formal structure for program governance, for the oversight of quality services for Head Start children and families and for making decisions related to program design and implementation. Such structure shall include the following:</p> <p>(1) GOVERNING BODY-</p> <p>(E) RESPONSIBILITIES- The governing body shall—</p> <p>(iii) be responsible for ensuring compliance with Federal laws (including regulations) and applicable State, tribal, and local laws (including regulations);</p>	2	1.0%

Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
648A(g)(3)	<p>Staff Qualifications and Development.</p> <p>(g) Staff Recruitment and Selection Procedures- Before a Head Start agency employs an individual, such agency shall—</p> <p>(3) obtain—</p> <p>(A) a State, tribal, or Federal criminal record check covering all jurisdictions where the grantee provides Head Start services to children;</p> <p>(B) a State, tribal, or Federal criminal record check as required by the law of the jurisdiction where the grantee provides Head Start services; or</p> <p>(C) a criminal record check as otherwise required by Federal law.</p>	2	1.0%
1302.102(b)(1)(iii)	<p>Achieving program goals.</p> <p>(b) Monitoring program performance. (1) Ongoing compliance oversight and correction. In order to ensure effective ongoing oversight and correction, a program must establish and implement a system of ongoing oversight that ensures effective implementation of the program performance standards, including ensuring child safety, and other applicable federal regulations as described in this part, and must:</p> <p>(iii) Work with the governing body and the policy council to address issues during the ongoing oversight and correction process and during federal oversight; and,</p>	1	0.5%
1302.102(b)(1)(iv)	<p>Achieving program goals.</p> <p>(b) Monitoring program performance. (1) Ongoing compliance oversight and correction. In order to ensure effective ongoing oversight and correction, a program must establish and implement a system of ongoing oversight that ensures effective implementation of the program performance standards, including ensuring child safety, and other applicable federal regulations as described in this part, and must:</p> <p>(iv) Implement procedures that prevent recurrence of previous quality and compliance issues, including previously identified deficiencies, safety incidents, and audit findings.</p>	1	0.5%
1302.102(b)(2)	<p>Ongoing Oversight and Continuous Program Improvement: Using Data for Ongoing Oversight and Continuous Program Improvement</p> <p>(b) Monitoring program performance. (1) Ongoing compliance oversight and correction. In order to ensure effective ongoing oversight and correction, a program must establish and implement a system of ongoing oversight that ensures effective implementation of the program performance standards, including ensuring child safety, and other applicable federal regulations as described in this part, and must:</p> <p>(2) <i>Ongoing assessment of program goals.</i> A program must effectively oversee progress towards program goals on an ongoing basis and annually must:</p>	1	0.5%

Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
1302.102(b)(2)(i)	<p>Ongoing Oversight and Continuous Program Improvement: Sharing Data for Ongoing Oversight of Program Services</p> <p>b) <i>Monitoring program performance.</i> (1) <i>Ongoing compliance oversight and correction.</i> In order to ensure effective ongoing oversight and correction, a program must establish and implement a system of ongoing oversight that ensures effective implementation of the program performance standards, including ensuring child safety, and other applicable federal regulations as described in this part, and must:</p> <p>(2) <i>Ongoing assessment of program goals.</i> A program must effectively oversee progress towards program goals on an ongoing basis and annually must:</p> <p>(i) Conduct a self-assessment that uses program data including aggregated child assessment data, and professional development and parent and family engagement data as appropriate, to evaluate the program's progress towards meeting goals established under paragraph (a) of this section, compliance with program performance standards throughout the program year, and the effectiveness of the professional development and family engagement systems in promoting school readiness;</p>	1	0.5%
1302.102(d)(1)(ii)	<p>Achieving program goals</p> <p>(d) Reporting. (1) A program must submit:</p> <p>(ii) Reports, as appropriate, to the responsible HHS official immediately or as soon as practicable, related to any significant incidents affecting the health and safety of program participants, circumstances affecting the financial viability of the program, breaches of personally identifiable information, or program involvement in legal proceedings, any matter for which notification or a report to state, tribal, or local authorities is required by applicable law,</p>	1	0.5%
1302.102(d)(1)(ii) (A)	<p>Achieving program goals.</p> <p>(d) Reporting. (1) A program must submit:</p> <p>(ii) Reports, as appropriate, to the responsible HHS official immediately or as soon as practicable, related to any significant incidents affecting the health and safety of program participants, circumstances affecting the financial viability of the program, breaches of personally identifiable information, or program involvement in legal proceedings, any matter for which notification or a report to state, tribal, or local authorities is required by applicable law, including at a minimum:</p> <p>(A) Any reports regarding agency staff or volunteer compliance with federal, state, tribal, or local laws addressing child abuse and neglect or laws governing sex offenders;</p>	1	0.5%

Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
1302.47(b)	Safety practices. b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with § 1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety.	1	0.5%
1302.47(b)(1)(iii)	Safety practices. (b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with 1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety. This system must ensure: (1) Facilities. All facilities where children are served, including areas for learning, playing, sleeping, toileting, and eating are, at a minimum: (iii) Free from pollutants, hazards and toxins that are accessible to children and could endanger children's safety;	1	0.5%
1302.47(b)(1)(ix)	Safety practices. (b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with 1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety. This system must ensure: (1) Facilities. All facilities where children are served, including areas for learning, playing, sleeping, toileting, and eating are, at a minimum: (ix) Kept safe through an ongoing system of preventative maintenance.	1	0.5%



Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
1302.47(b)(2)	<p>Safety practices.</p> <p>(b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with 1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety. This system must ensure:</p> <p>(2) Equipment and materials. 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:</p> <p>(i) Be clean and safe for children's use and are appropriately disinfected;</p> <p>(ii) Be accessible only to children for whom they are age appropriate;</p> <p>(iii) Be designed to ensure appropriate supervision of children at all times;</p> <p>(iv) Allow for the separation of infants and toddlers from preschoolers during play in center-based programs; and,</p> <p>(v) Be kept safe through an ongoing system of preventative maintenance.</p>	1	0.5%
1302.47(b)(5)(i)	<p>Safety practices.</p> <p>(b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with 1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety. This system must ensure:</p> <p>(5) Safety practices. All staff and consultants follow appropriate practices to keep children safe during all activities, including, at a minimum:</p> <p>(i) Reporting of suspected or known child abuse and neglect, including that staff comply with applicable federal, state, local, and tribal laws;</p>	1	0.5%
1302.47(b)(5)(iii)	<p>Safety practices.</p> <p>(b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with 1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety. This system must ensure:</p> <p>(5) Safety practices. All staff and consultants follow appropriate practices to keep children safe during all activities, including, at a minimum:</p> <p>(iii) Appropriate indoor and outdoor supervision of children at all times;</p>	1	0.5%



Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
1302.47(b)(6)(i)	<p>Safety practices.</p> <p>(b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with 1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety. This system must ensure:</p> <p>(6) Hygiene practices. All staff systematically and routinely implement hygiene practices that at a minimum ensure:</p> <p>(i) Appropriate toileting, hand washing, and diapering procedures are followed;</p>	1	0.5%
1302.47(b)(6)(ii)	<p>Safety practices.</p> <p>(b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with 1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety. This system must ensure:</p> <p>(6) Hygiene practices. All staff systematically and routinely implement hygiene practices that at a minimum ensure:</p> <p>(ii) Safe food preparation; and,</p>	1	0.5%
1302.47(b)(7)(v)	<p>Safety practices.</p> <p>(b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with 1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety. This system must ensure:</p> <p>(7) Administrative safety procedures. Programs establish, follow, and practice, as appropriate, procedures for, at a minimum:</p> <p>(v) Maintaining procedures and systems to ensure children are only released to an authorized adult; and,</p>	1	0.5%
1302.90(c)(1)(iv)	<p>Personnel policies.</p> <p>(c) Standards of conduct. (1) A program must ensure all staff, consultants, contractors, and volunteers abide by the program's standards of conduct that:</p> <p>(iv) Require staff, consultants, contractors, and volunteers to comply with program confidentiality policies concerning personally identifiable information about 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>	1	0.5%

Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
1302.90(c)(2)	Personnel policies. (c) Standards of conduct. (2) Personnel policies and procedures must include appropriate penalties for staff, consultants, and volunteers who violate the standards of conduct.	1	0.5%
1302.91(e)(2)(ii)	Staff qualifications and competency requirements. (e) Child and family services staff. (2) Head Start center-based teacher qualification requirements. (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.	1	0.5%
1302.92(b)(5)	Training and professional development. (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: (5) Research-based approaches to professional development for education staff, that are focused on effective curricula implementation, knowledge of the content in <i>Head Start Early Learning Outcomes Framework: Ages Birth to Five</i> , 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.	1	0.5%

Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
1304.11(b)(2)(i)	<p>Basis for determining whether a Head Start agency will be subject to an open competition.</p> <p>A Head Start or Early Head Start agency shall be required to compete for its next five years of funding whenever the responsible HHS official determines that one or more of the following seven conditions existed during the relevant time period covered by the responsible HHS official's review under 1304.15:</p> <p>(b) An agency has been determined by the responsible HHS official based on a review conducted under section 641A(c)(1)(A), (C), or (D) of the Act during the relevant time period covered by the responsible HHS official's review under 1304.15 not to have:</p> <p>(2) After December 9, 2011, taken steps to achieve the school readiness goals described under paragraph (b)(1) of this section demonstrated by:</p> <p>(i) Aggregating and analyzing aggregate child-level assessment data at least three times per year (except for programs operating less than 90 days, which will be required to do so at least twice within their operating program period) and using that data in combination with other program data to determine grantees' progress toward meeting its goals, to inform parents and the community of results, and to direct continuous improvement related to curriculum, instruction, professional development, program design and other program decisions; and,</p>	1	0.5%
1304.11(b)(2)(ii)	<p>Basis for determining whether a Head Start agency will be subject to an open competition.</p> <p>A Head Start or Early Head Start agency shall be required to compete for its next five years of funding whenever the responsible HHS official determines that one or more of the following seven conditions existed during the relevant time period covered by the responsible HHS official's review under 1304.15:</p> <p>(b) An agency has been determined by the responsible HHS official based on a review conducted under section 641A(c)(1)(A), (C), or (D) of the Act during the relevant time period covered by the responsible HHS official's review under 1304.15 not to have:</p> <p>(2) After December 9, 2011, taken steps to achieve the school readiness goals described under paragraph (b)(1) of this section demonstrated by: (ii) Analyzing individual ongoing, child-level assessment data for all children birth to age five participating in the program and using that data in combination with input from parents and families to determine each child's status and progress with regard to, at a minimum, language and literacy development, cognition and general knowledge, approaches toward learning, physical well-being and motor development, and social and emotional development and to individualize the experiences, instructional strategies, and services to best support each child.</p>	1	0.5%

Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
642(c)(1)(B)(i)	<p>Powers and Functions of Head Start Agencies</p> <p>(c) Program Governance- Upon receiving designation as a Head Start agency, the agency shall establish and maintain a formal structure for program governance, for the oversight of quality services for Head Start children and families and for making decisions related to program design and implementation. Such structure shall include the following:</p> <p>(1) GOVERNING BODY-</p> <p>(B) COMPOSITION- The governing body shall be composed as follows:</p> <p>(i) Not less than 1 member shall have a background and expertise in fiscal management or accounting.</p>	1	0.5%
642(c)(1)(E)(iv) (V) (bb)	<p>Powers and Functions of Head Start Agencies</p> <p>(c) Program Governance- Upon receiving designation as a Head Start agency, the agency shall establish and maintain a formal structure for program governance, for the oversight of quality services for Head Start children and families and for making decisions related to program design and implementation. Such structure shall include the following:</p> <p>(1) GOVERNING BODY-</p> <p>(E) RESPONSIBILITIES- The governing body shall—</p> <p>(iv) be responsible for other activities, including—</p> <p>(V) reviewing and approving all major policies of the agency, including—</p> <p>(bb) such agency's progress in carrying out the programmatic and fiscal provisions in such agency's grant application, including implementation of corrective actions;</p>	1	0.5%
642(c)(1)(E)(iv) (V) (cc)	<p>Powers and Functions of Head Start Agencies</p> <p>(c) Program Governance- Upon receiving designation as a Head Start agency, the agency shall establish and maintain a formal structure for program governance, for the oversight of quality services for Head Start children and families and for making decisions related to program design and implementation. Such structure shall include the following:</p> <p>(1) GOVERNING BODY-</p> <p>(E) RESPONSIBILITIES- The governing body shall—</p> <p>(iv) be responsible for other activities, including—</p> <p>(V) reviewing and approving all major policies of the agency, including—</p> <p>(cc) personnel policies of such agencies regarding the hiring, evaluation, termination, and compensation of agency employees;</p>	1	0.5%

Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
642(c)(1)(E)(iv) (VII)(dd)	<p>Powers and Functions of Head Start Agencies</p> <p>(c) Program Governance- Upon receiving designation as a Head Start agency, the agency shall establish and maintain a formal structure for program governance, for the oversight of quality services for Head Start children and families and for making decisions related to program design and implementation. Such structure shall include the following:</p> <p>(1) GOVERNING BODY-</p> <p>(E) RESPONSIBILITIES- The governing body shall—</p> <p>(iv) be responsible for other activities, including—</p> <p>(VII) approving financial management, accounting, and reporting policies, and compliance with laws and regulations related to financial statements, including the—</p> <p>(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;</p>	1	0.5%
642(c)(1)(E)(iv) (VIII)	<p>Powers and Functions of Head Start Agencies</p> <p>(c) Program Governance- Upon receiving designation as a Head Start agency, the agency shall establish and maintain a formal structure for program governance, for the oversight of quality services for Head Start children and families and for making decisions related to program design and implementation. Such structure shall include the following:</p> <p>(1) GOVERNING BODY-</p> <p>(E) RESPONSIBILITIES- The governing body shall—</p> <p>(iv) be responsible for other activities, including—</p> <p>(VIII) reviewing results from monitoring conducted under section 641A(c), including appropriate follow-up activities;</p>	1	0.5%
642(c)(1)(E)(iv) (X) (bb)	<p>Powers and Functions of Head Start Agencies</p> <p>(c) Program Governance- Upon receiving designation as a Head Start agency, the agency shall establish and maintain a formal structure for program governance, for the oversight of quality services for Head Start children and families and for making decisions related to program design and implementation. Such structure shall include the following:</p> <p>(1) GOVERNING BODY-</p> <p>(E) RESPONSIBILITIES- The governing body shall—</p> <p>(iv) be responsible for other activities, including—</p> <p>(X) establishing, adopting, and periodically updating written standards of conduct that establish standards and formal procedures for disclosing, addressing, and resolving—</p> <p>(bb) complaints, including investigations, when appropriate;</p>	1	0.5%

Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
648A(g)(3)(A)	Staff Qualifications and Development. (g) Staff Recruitment and Selection Procedures- Before a Head Start agency employs an individual, such agency shall— (3) obtain— (A) a State, tribal, or Federal criminal record check covering all jurisdictions where the grantee provides Head Start services to children;	1	0.5%
75.302(b)(2)	Financial Management System (b) The financial management system of each non-Federal entity must provide for the following (see also §§ 75.361, 75.362, 75.363, 75.364, and 75.365): (2) Accurate, current, and complete disclosure of the financial results of each Federal award or program in accordance with the reporting requirements set forth in §§ 75.341 and 75.342. If an HHS awarding agency requires reporting on an accrual basis from a recipient that maintains its records on other than an accrual basis, the recipient must not be required to establish an accrual accounting system. This recipient may develop accrual data for its reports on the basis of an analysis of the documentation on hand. Similarly, a pass-through entity must not require a subrecipient to establish an accrual accounting system and must allow the subrecipient to develop accrual data for its reports on the basis of an analysis of the documentation on hand.	1	0.5%
75.302(b)(3)	Financial Management System (b) The financial management system of each non-Federal entity must provide for the following (see also §§ 75.361, 75.362, 75.363, 75.364, and 75.365): (3) Records that identify adequately the source and application of funds for federally-funded activities. These records must contain information pertaining to Federal awards, authorizations, obligations, unobligated balances, assets, expenditures, income and interest and be supported by source documentation.	1	0.5%
75.302(b)(4)	Financial Management System (b) The financial management system of each non-Federal entity must provide for the following (see also §§ 75.361, 75.362, 75.363, 75.364, and 75.365): (4) Effective control over, and accountability for, all funds, property, and other assets. The non-Federal entity must adequately safeguard all assets and assure that they are used solely for authorized purposes. See § 75.303.	1	0.5%
75.302(b)(5)	Financial management and standards for financial management systems. (b) The financial management system of each non-Federal entity must provide for the following: (5) Comparison of expenditures with budget amounts for each Federal award.	1	0.5%

Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
75.303(a)	Internal controls. The non-Federal entity must: (a) Establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations, and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government,” issued by the Comptroller General of the United States or the “Internal Control Integrated Framework,” issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).	1	0.5%
75.405(a)(2)	Allocable costs. (a) A cost is allocable to a particular Federal award or other cost objective if the goods or services involved are chargeable or assignable to that Federal award or cost objective in accordance with relative benefits received. This standard is met if the cost: (2) Benefits both the Federal award and other work of the non-Federal entity and can be distributed in proportions that may be approximated using reasonable methods;	1	0.5%
1302.90(c)(1)(ii) (A)	Personnel policies. (c) Standards of conduct. (1) A program must ensure all staff, consultants, contractors, and volunteers abide by the program’s standards of conduct that: (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: (A) Use corporal punishment;	37	18.2%
1302.90(c)(1)(v)	Personnel policies. (c) Standards of conduct. (1) A program must ensure all staff, consultants, contractors, and volunteers abide by the program’s standards of conduct that: (v) Ensure no child is left alone or unsupervised by staff, consultants, contractors, or volunteers while under their care.	33	16.3%
1302.90(c)(1)(ii) (G)	Personnel policies. (c) Standards of conduct (1) A program must ensure all staff, consultants, contractors, and volunteers abide by the program’s standards of conduct that: (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: (G) Physically abuse a child;	27	13.3%

Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
1302.90(c)(1)(ii) (H)	Personnel policies. (c) Standards of conduct. (1) A program must ensure all staff, consultants, contractors, and volunteers abide by the program's standards of conduct that: (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: (H) Use any form of verbal abuse, including profane, sarcastic language, threats, or derogatory remarks about the child or child's family; or,	8	3.9%
1302.47(b)(5) (iv)	Safety practices. (b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with § 1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety. (5) Safety practices. All staff and consultants follow appropriate practices to keep children safe during all activities, including, at a minimum: (iv) Only releasing children to an authorized adult;	7	3.4%
1303.72(a)(3)	Vehicle operation. (a) Safety. A program must ensure: (3) Up-to-date child rosters and lists of the adults each child is authorized to be released to, including alternates in case of emergency, are maintained and no child is left behind, either at the classroom or on the vehicle at the end of the route; and,	7	3.4%
1302.90(c)(1)(ii) (B)	Personnel policies. (c) Standards of conduct. (1) A program must ensure all staff, consultants, contractors, and volunteers abide by the program's standards of conduct that: (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: (B) Use isolation to discipline a child;	6	3.0%
1302.90(c)(1)(ii) (F)	Personnel policies. (c) Standards of conduct. (1) A program must ensure all staff, consultants, contractors, and volunteers abide by the program's standards of conduct that: (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: (F) Use any form of emotional abuse, including public or private humiliation, rejecting, terrorizing, extended ignoring, or corrupting a child;	6	3.0%



Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
642(c)(1)(A)	<p>Powers and Functions of Head Start Agencies.</p> <p>(c) Program Governance- Upon receiving designation as a Head Start agency, the agency shall establish and maintain a formal structure for program governance, for the oversight of quality services for Head Start children and families and for making decisions related to program design and implementation. Such structure shall include the following:</p> <p>(1) GOVERNING BODY-</p> <p>(A) IN GENERAL- The governing body shall have legal and fiscal responsibility for the Head Start agency.</p>	4	2.0%
642(c)(1)(E)(i)	<p>Governance Engagement and Oversight: The Governing Body</p> <p>(c) Program Governance- Upon receiving designation as a Head Start agency, the agency shall establish and maintain a formal structure for program governance, for the oversight of quality services for Head Start children and families and for making decisions related to program design and implementation. Such structure shall include the following:</p> <p>(1) GOVERNING BODY-</p> <p>(E) RESPONSIBILITIES- The governing body shall—</p> <p>(i) have legal and fiscal responsibility for administering and overseeing programs under this subchapter, including the safeguarding of Federal funds;</p>	4	2.0%
1302.101(a)(1)	<p>Program and Human Resource Management</p> <p>(a) Implementation. A program must implement a management system that:</p> <p>(1) Ensures a program, fiscal, and human resource management structure that provides effective management and oversight of all program areas and fiduciary responsibilities to enable delivery of high-quality services in all of the program services described in subparts C, D, E, F, G, and H of this part;</p>	3	1.5%
1302.101(a)(2)	<p>Staff Hiring, Supervision and Development: Ongoing Supervision</p> <p>(a) Implementation. A program must implement a management system that:</p> <p>(2) Provides regular and ongoing supervision to support individual staff professional development and continuous program quality improvement;</p>	3	1.5%
1302.102(b)(1)(i)	<p>Achieving program goals.</p> <p>(b) Monitoring program performance. (1) Ongoing compliance oversight and correction. In order to ensure effective ongoing oversight and correction, a program must establish and implement a system of ongoing oversight that ensures effective implementation of the program performance standards, including ensuring child safety, and other applicable federal regulations as described in this part, and must:</p> <p>(i) Collect and use data to inform this process;</p>	3	1.5%

Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
1302.102(b)(1)(ii)	Achieving program goals. (b) Monitoring program performance. (1) Ongoing compliance oversight and correction. In order to ensure effective ongoing oversight and correction, a program must establish and implement a system of ongoing oversight that ensures effective implementation of the program performance standards, including ensuring child safety, and other applicable federal regulations as described in this part, and must: (ii) Correct quality and compliance issues immediately, or as quickly as possible;	3	1.5%
1302.47(a)	Safety practices. (a) 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 Caring for our Children Basics, available at <a href="http://www.acf.hhs.gov/sites/default/files/ecc/caring_for_our_children_basics.pdf">http://www.acf.hhs.gov/sites/default/files/ecc/caring_for_our_children_basics.pdf</a> , for additional information to develop and implement adequate safety policies and practices described in this part.	3	1.5%
1302.90(c)(1)(ii)(D)	Personnel policies. (c) Standards of conduct. (1) A program must ensure all staff, consultants, contractors, and volunteers abide by the program's standards of conduct that: (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: (D) Use or withhold food as a punishment or reward;	3	1.5%
1302.102(c)(1)	Achieving program goals. (c) Using data for continuous improvement. (1) A program must implement a process for using data to identify program strengths and needs, develop and implement plans that address program needs, and continually evaluate compliance with program performance standards and progress towards achieving program goals described in paragraph (a) of this section.	2	1.0%
1302.47(b)(1)(iv)	Safety practices. (b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with 1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety. This system must ensure: (1) Facilities. All facilities where children are served, including areas for learning, playing, sleeping, toileting, and eating are, at a minimum: (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;	2	1.0%

Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
1302.90(c)(1)(ii)(E)	Personnel policies. (c) Standards of conduct. (1) A program must ensure all staff, consultants, contractors, and volunteers abide by the program's standards of conduct that: (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: (E) Use toilet learning/training methods that punish, demean, or humiliate a child;	2	1.0%
642(c)(1)(E)(ii)	Powers and Functions of Head Start Agencies (c) Program Governance- Upon receiving designation as a Head Start agency, the agency shall establish and maintain a formal structure for program governance, for the oversight of quality services for Head Start children and families and for making decisions related to program design and implementation. Such structure shall include the following: (1) GOVERNING BODY- (E) RESPONSIBILITIES- The governing body shall— (ii) establishing procedures and criteria for recruitment, selection, and enrollment of children;	2	1.0%
642(c)(1)(E)(iii)	Powers and Functions of Head Start Agencies. (c) Program Governance- Upon receiving designation as a Head Start agency, the agency shall establish and maintain a formal structure for program governance, for the oversight of quality services for Head Start children and families and for making decisions related to program design and implementation. Such structure shall include the following: (1) GOVERNING BODY- (E) RESPONSIBILITIES- The governing body shall— (iii) be responsible for ensuring compliance with Federal laws (including regulations) and applicable State, tribal, and local laws (including regulations);	2	1.0%
648A(g)(3)	Staff Qualifications and Development. (g) Staff Recruitment and Selection Procedures- Before a Head Start agency employs an individual, such agency shall— (3) obtain— (A) a State, tribal, or Federal criminal record check covering all jurisdictions where the grantee provides Head Start services to children; (B) a State, tribal, or Federal criminal record check as required by the law of the jurisdiction where the grantee provides Head Start services; or (C) a criminal record check as otherwise required by Federal law.	2	1.0%

Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
1302.102(b)(1)(iii)	<p>Achieving program goals.</p> <p>(b) Monitoring program performance. (1) Ongoing compliance oversight and correction. In order to ensure effective ongoing oversight and correction, a program must establish and implement a system of ongoing oversight that ensures effective implementation of the program performance standards, including ensuring child safety, and other applicable federal regulations as described in this part, and must:</p> <p>(iii) Work with the governing body and the policy council to address issues during the ongoing oversight and correction process and during federal oversight; and,</p>	1	0.5%