

Report to Congress on Head Start Monitoring



FISCAL YEAR 2017



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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Executive Summary

This report presents a summary of the findings of fiscal year (FY) 2017 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 2017 monitoring review system, summarizes grantee review outcomes, and describes the types of findings most commonly identified in FY 2017.

FY 2017 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.

In FY 2017, OHS reduced the number of monitoring events experienced by individual grantees. OHS focused monitoring events on CLASS[®], beginning in October 2016, and Eligibility, Recruitment, Selection, Enrollment, and Attendance (ERSEA), beginning in January 2017. Grantees scheduled for these events received notification of their upcoming review via letter.

OHS also conducted a review of Early Head Start-Child Care Partnership (EHS-CCP) grantees new to Early Head Start. The four goals for the EHS-CCP reviews were:

- ▶ Conduct site visits to determine how the grantee and its partners are working together to plan and provide high-quality services.
- ▶ Evaluate the benefits of partnership funding.
- ▶ Determine whether there is a need for additional technical assistance or a more in-depth review.
- ▶ Determine the fiscal oversight and integrity of partnership funds.

Grantees also received “Targeted” reviews if OHS determined the grantee was at risk.¹ 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.

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

Exhibit 1 summarizes the types of reviews conducted in FY 2017.

¹ “Targeted” reviews were termed “Other” reviews in previous fiscal years.

Exhibit 1: Types of FY 2017 Reviews

Type of Review	Description
ERSEA	▶ Assesses the grantees’ practices for verifying the eligibility status of children, families, and pregnant women receiving the program’s services; ensuring the appropriate enrollment of children into the program; and monitoring children’s attendance.
CLASS®	▶ Evaluates the quality of teacher-child interactions that promote positive child outcomes.
EHS-CCP	▶ Conducted for grantees who received an EHS-CCP grant and who were new to Early Head Start.
Targeted	▶ Conducted for grantees if they are determined to be at risk.
Follow-up	▶ Conducted for grantees found to be out of compliance with Head Start requirements to ensure that all findings are corrected.

Notes: Reviews were conducted by one to two reviewers knowledgeable about the content area and Head Start. Reviewers in each content area are led by a Content Area 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 in each content area.

Outcomes of FY 2017 Monitoring Reviews

OHS conducted reviews of 681 grantees in FY 2017. Of the 681 grantees that received monitoring reviews:²

- ▶ 133 received an ERSEA review.
- ▶ 85 received an EHS-CCP review.
- ▶ 252 received a CLASS® review.
- ▶ 84 received a Targeted review.
- ▶ 291 received a Follow-up review.³

Monitoring reviews have three possible outcomes: compliant, one or more noncompliances with no deficiencies, or one or more deficiencies. Grantees with one or more deficiencies also may have areas of noncompliance. 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*

² 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.

³ Of the 291 grantees with a Follow-up review completed in FY 2017, 228 (78.3 percent) had follow-ups from reviews completed in previous fiscal years.

- 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 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:

- ▶ **With the exception of “Targeted” reviews, for each review type, high percentages of reviewed grantees were compliant with the monitored standards.** Of the 133 grantees that underwent an ERSEA review in FY 2017, only one grantee (0.8 percent) was found to have one noncompliance. All other grantees (99.2 percent) were found to be compliant with the monitored ERSEA standards. Of the 85 grantees that underwent an EHS-CCP review in FY 2017, 95.3 percent were found to be compliant. Only four EHS-CCP grantees (4.7 percent) were found to have one or more noncompliances.
- ▶ **The majority of grantees who received Targeted reviews were found to be deficient.** Of the 84 grantees that underwent a Targeted review in FY 2017, 10 percent were found to be compliant, 17.8 percent were found to have one or more noncompliances, and 72.2 percent were found to have one or more deficiencies.
- ▶ **Grantees corrected nearly all findings on Follow-up reviews.** Among grantees that received Follow-up reviews in FY 2017, 92.9 percent of findings were corrected, while 7.1 percent of findings were not corrected and therefore, were elevated to deficiencies.
- ▶ **Head Start program CLASS[®] average scores in FY 2017 were similar to those found in FY 2016.** Grantees had average CLASS[®] scores of 6.07 out of 7 for Emotional Support and 5.83 out of 7 for Classroom Organization domains. Scores for Instructional Support also were notably lower than those for the other domains, averaging 3.00 out of 7.

Number and Types of Findings Identified in FY 2017

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

- ▶ **As in FY 2016, in each review type, most FY 2017 grantees with findings had a small number of findings.** Among grantees with only ERSEA noncompliances, none had two or more findings. Similarly, almost all (97.6 percent) of grantees with EHS-CCP reviews had one or fewer findings.

Most Common Findings Identified in FY 2017

Most frequently cited issues are summarized in the following bullet points.

- ▶ **The only finding cited in ERSEA reviews was Recruitment and Enrollment of Children with Disabilities.** The only finding issued on ERSEA reviews was focused on “Recruitment and Enrollment of Children with Disabilities” cited for one grantee.
- ▶ **Grantees receiving EHS-CCP reviews struggled with Physical Arrangements Consistent with the Health, Safety, and Developmental Needs of Children.** On EHS-CCP reviews, a number of citations were each cited once for grantees, including “Allowable and Allocable Costs,” “Teacher Qualifications,” and “Classroom Size and Staffing.”
- ▶ **Overall, no grantees had identified deficiencies in ERSEA or EHS-CCP reviews in FY 2017.** All deficiencies were identified in Targeted reviews. Almost three-quarters (72.2 percent) of grantees who had a Targeted review had an identified deficiency. Of those, almost half (48.1 percent) was 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 2018

Revise Monitoring System Methodology and Support Systems in Response to the new Head Start Program Performance Standards (HSPPS)

In FY 2018, OHS will implement a revised aligned monitoring system (AMS 2.0) to monitor the newly implemented HSPPS and to streamline the monitoring process and reduce grantee burden of multiple review events from multiple agencies. In addition to Follow-up and Targeted reviews, AMS 2.0 will be comprised of three review events:

- ▶ CLASS®
- ▶ Focus Area One
- ▶ Focus Area Two

CLASS®, Follow-up, and Targeted reviews will be implemented with procedures identical to those implemented in the original Aligned Monitoring System. This section will describe the new Focus Area One and Focus Area Two review events.

Focus Area One

Focus Area One is 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. Focus Area One discussions focus on the grantees' program design, management, and governance structure. Grantees will describe 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 ERSEA strategies and fiscal infrastructure

The Focus Area One review is an off-site activity that entails 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 will talk with the grantee's regional program and fiscal specialists.

Focus Area Two

Informed by the information collected during the Focus Area One review, Focus Area Two is 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 is designed to broaden OHS's understanding of each grantee's performance and to determine if programs are meeting the requirements of the HSPPS, Uniform Guidance, and Head Start Act. The Focus Area Two review will focus 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 is an onsite review event that provides 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 will learn 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 includes discussions, classroom explorations, and data tours. Discussions will occur with program management, staff, parents, the governing body, the policy council, and teachers (at the end of each classroom exploration). *Data tours* are a new feature of the onsite

review. Conducted with management staff, center leaders, and directors, data tours are an opportunity for the grantee staff to show the data they collect, analyze, use, and share to make informed program decisions.

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 receives a monitoring review at least once every three years; each newly designated grantee be reviewed after the completion of its first year (and then at least once every three years thereafter); and all grantees that “fail to meet the standards” receive Follow-up reviews. Teams of reviewers knowledgeable about Head Start conducted fiscal year (FY) 2017 reviews, with Content Area Leads (CALs) leading each team. Each review is 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: immediately, if the Secretary finds the deficiency threatens the health or safety of staff or program participants or the integrity of federal funds; or within a specified time frame and not to exceed one year, under a Quality Improvement Plan (QIP). If the grantee does not correct the deficiency within the specified time period, 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 2017 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 zero to five) 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 be full partners in the education of their children and 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 2017.

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.

Basic Mechanics of the Monitoring Process

The monitoring process uses a rigorous, evidence-based approach to confirm that grantees comply with federal legislative, regulatory, and program requirements. In FY 2017, OHS reduced the number of monitoring events experienced by individual grantees. In FY 2017, OHS monitored the following performance areas as:

- ▶ Eligibility, Recruitment, Selection, Enrollment, and Attendance (ERSEA): Eligibility and Attendance
- ▶ Teacher-Child Interactions (as addressed through the Classroom Assessment Scoring System[®] (CLASS[®]) observation instrument)

CLASS[®] reviews were scheduled beginning in October 2016, and ERSEA reviews were scheduled beginning in January 2017.

OHS also conducted a review of Early Head Start-Child Care Partnership (EHS-CCP) grantees new to Early Head Start. The four goals for the EHS-CCP reviews were:

- ▶ Conduct site visits to determine how the grantee and its partners are working together to plan and provide high-quality services.
- ▶ Evaluate the benefits of partnership funding.
- ▶ Determine whether there is a need for additional technical assistance or a more in-depth review.
- ▶ Determine the fiscal oversight and integrity of partnership funds.

Prior to the start of the fiscal year, OHS sends a global letter to all five-year grantees to advise them of the reviews they will receive during the fiscal year. Grantees scheduled for an announced review then receive 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 CAL contacts the grantee to begin scheduling onsite activities. Prior to the onsite review, team members review grantee documents posted on the OHS monitoring website. In FY 2017, only four review events⁴ were unannounced, allowing OHS to observe grantees during a normal school day. The information gathered from these reviews provides OHS with better

⁴ The FY 2017 unannounced reviews were all Targeted review events.

insight regarding the day-to-day struggles and successes grantees encounter, and enables OHS to provide more accurate guidance and assistance to grantees.

In FY 2017, there were five types of reviews:

- ▶ ERSEA
- ▶ CLASS®
- ▶ EHS-CCP
- ▶ Follow-up
- ▶ Targeted⁵

Grantees may receive Targeted reviews outside of their review schedule if OHS determines the program to be at risk. These reviews may occur onsite or off-site (remotely, from the Regional Office) depending on the nature of the concern.

Monitoring reviews have three possible outcomes: compliant; one or more noncompliances with no deficiencies; or one or more deficiencies. Grantees with one or more deficiencies also may have areas of noncompliance. 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:

- (vii) A threat to the health, safety, or civil rights of children or staff;*
- (viii) A denial to parents of the exercise of their full roles and responsibilities related to program operations;*
- (ix) A failure to comply with standards related to early childhood development and health services, family and community partnerships, or program design and management;*
- (x) The misuse of funds received under this subchapter;*
- (xi) 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*
- (xii) 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.” OHS determines, on the basis of the review, whether grantees are compliant, have areas of noncompliance that do

⁵ “Targeted” reviews were termed “Other” reviews in previous fiscal years.

not constitute deficiencies, or have deficiencies. Grantees found to have an ANC or a deficiency receive a Follow-up review to ensure that the finding is corrected.

Each review event is conducted by one or two qualified non-federal consultants, supervised by a CAL, and generally takes place over a three to five-day period. 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 review team initiates the information collection process, which is supported 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 CAL on a routine basis through the OHS Monitoring System (OHSMS) software application, team meetings, email, and telephone communications. The CAL 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 submitted to OHS. OHS makes final determinations on the grantee’s compliance and notifies grantees of any areas that require correction.

The Office of Head Start Monitoring Protocols

The OHS Monitoring Protocols are designed to assess the compliance of grantees with the HSPPS and the Head Start Act and to reflect the department’s continued commitment to ensuring that the national monitoring system assesses grantees in a uniform, thorough, and consistent manner. Each review event has its own protocol:

- ▶ ERSEA
- ▶ EHS-CCP

Each Protocol is organized into Key Performance Areas (KPA), which group together related program requirements for that content area and highlight key objectives that programs should achieve in their service delivery and management system design and implementation (e.g., School Readiness). Each KPA contains one or more CMs, which are linked to specific standards; together the CMs help reviewers assess whether the grantee is meeting the higher level objectives outlined within the KPA statement. Review teams use Targeted Questions (TQs) to gather evidence to support the assessment of compliance for each CM. The TQs indicate 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 were developed to organize the evidence gathering process. These guides, which organize the TQs by method of data collection and source, include:

- ▶ Interview Guides (including Document Reviews)
- ▶ Observation Guides

▶ Child File Review Guides

The evidence collected through each guide is linked to CMs and used to assist review teams in making precise and accurate assessments.

Summary of Key Changes in Program Monitoring Effective in FY 2017

This section highlights key changes from the FY 2017 Protocol. Specific changes included:

- ▶ Implementing a reduced monitoring schedule which included ERSEA and CLASS® reviews.
- ▶ Implementing the new EHS-CCP review.

Standardized Methodology and Reviewer Reliability

In an effort to increase consistency, objectivity, and accuracy within the review process, OHS formalized reviewer requirements relating to the onsite review process in FY 2013 and further enhanced these requirements in FY 2017. This formalization served to reinforce the importance of random sampling and review scheduling and to further define the expectations of reviewers while conducting reviews. As a result, reviewers have a clarified set of standards to which they are held accountable and reviews are more uniform across grantees.

Sampling

The FY 2017 Monitoring Protocol continues to use random samples for staff files, child files, and class/group observations (such as CLASS®) to ensure the generalizability of information collected through the review process. The sample size and composition are determined by a probability-driven algorithm that selects a random sample to ensure that monitoring review observations are valid and generalizable to an entire grantee. The sampling algorithm was implemented in the OHS monitoring software to ensure consistency in its implementation.

Evidence Assessment System

Since FY2012 and continued in FY 2017, reviewers collected information about grantee performance and reported it through the Evidence Assessment System (EAS). This system allows reviewers to summarize information collected during the review more easily and provide OHS with more detailed information about the scope and materiality of the evidence collected. For each CM, reviewers are asked to match the evidence collected throughout the review to an appropriate threshold that corresponds to the degree to which the grantee is complying with the requirements (e.g., the review selects whether 0 to 5 percent, 6 to 24 percent, or 25 to 50 percent of files reviewed indicate children were not screened within 45 days of enrollment). Prior to the introduction of this system, reviewers only indicated either “Yes” or “No” as to whether the grantee was in compliance. This system standardizes processes around evidence collection to improve consistency in the types and amount of information gathered across review teams.

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 use CLASS® as a tool to evaluate the quality of teacher-child interactions

that promote positive child outcomes. CLASS[®] scores range from one to seven, with one indicating the lowest quality interactions and seven indicating the highest quality interactions. One dimension, Negative Climate, is inverse scored, with seven indicating the lowest quality interactions and one indicating the highest quality interactions. In FY 2017, 252 grantees participated in a CLASS[®] review.

CLASS[®] dimensions are grouped into three overall domains: Classroom Organization, Emotional Support, and Instructional Support. Reviewers use the dimensions in the Classroom Organization domain to evaluate the way teachers organize and manage students’ behavior, time, and attention in the classroom. Reviewer use 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 use the dimensions in the Instructional Support domain to form an index of the instructional value of the classroom. The dimensions are divided among the domains as follows:

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

Following updates made to the FY2012 CLASS[®] Protocol, randomly selected, statistically driven sample sizes continued to be used to identify which grantees’ classes were observed in FY 2017. The monitoring software reflects the classes selected for the sample and provides replacement classrooms as needed. The number of cycles observed per classroom remains at two. Research done by the tool developer supports 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 continues 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).

Reporting

OHS utilizes 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 is the collection, verification, and substantiation of evidence from multiple sources to corroborate findings of noncompliance. As guided by the Monitoring Protocol, review teams conduct interviews with program staff, Policy Council and board members, parents, and others; observe children and teachers in classroom settings; and review program documents and materials, as well as children’s files, to assess compliance with Head Start requirements.

If, during an onsite review, the CAL identifies a deficiency that requires immediate corrective action, an HHS Responsible Official provides written notice of the deficiency requiring immediate correction and the CAL is authorized to direct the grantee to take immediate corrective action to ensure that staff and/or children are removed from imminent harm or immediate danger and that the cause of the imminent harm or immediate danger is corrected. The corrective action required of the grantee to correct the immediate deficiency is provided in the notice.

Designation Renewal System

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 new system, 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* and it became effective on December 9, 2011. The first cohort of 132 grantees required to re compete under DRS was announced in December 2011. The second cohort of 122 grantees required to re compete under DRS was announced in February 2013. The third cohort of 103 grantees required to re compete under DRS was announced in February 2014. The fourth cohort of 90 grantees required to re compete under DRS was announced in December 2014. The fifth cohort of 12 grantees required to compete under DRS was announced in March 2016. The FY 2017 DRS cohort⁶ of 58 grantees required to compete under DRS was announced in April 2017. Details about the FY 2018 DRS cohort based on monitoring reviews in FY 2017 are as follows:

- ▶ The total number of grants subject to recompetition = 171
- ▶ The number of grants subject to recompetition due to low CLASS[®] scores alone = 62
- ▶ The number of grants subject to recompetition due to deficiencies alone = 90
- ▶ The number of grants subject to recompetition due to low CLASS[®] scores and deficiencies = 19

The Reviewer Pool

OHS ensures that each review is staffed by individuals who are 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. Reviewers are assigned to review teams under a governing framework that limits the number of reviews that reviewers employed by a Head Start grantee or delegate agency can participate in each year and prevents reviewers from reviewing programs within their home states. OHS also maintains a pre-site 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

⁶ In FY 2017, OHS started referencing DRS cohorts by the fiscal year in which the grantees required to compete under DRS was announced.

identifies the processes that need to be strengthened and the areas in which additional support are required to facilitate reviewers' work while on site. These efforts continue to maintain the efficiency and effectiveness of the review teams.

Centralized Quality Control and Finalization of Review Reports

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 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, thereby enabling grantees to take corrective action and bring their programs into compliance more quickly.

III. Grantee Monitoring Review Outcomes

This section presents basic descriptive data on Head Start monitoring reviews conducted in FY 2017, 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 2017 focuses on the cohort of grantees who underwent ERSEA, CLASS[®], Targeted, and Follow-up reviews and who received review reports in FY 2017. **Exhibit 2** summarizes the five types of reviews conducted in FY 2017.

Exhibit 2: Types of FY 2017 Reviews

Type of Review	Description
ERSEA	▶ Assesses the grantees’ practices for verifying the eligibility status of children, families, and pregnant women receiving the program’s services; ensuring the appropriate enrollment of children into the program; and monitoring children’s attendance.
CLASS[®]	▶ Evaluates the quality of teacher-child interactions that promote positive child outcomes.
EHS-CCP	▶ Conducted for grantees who received an Early Head Start-Child Care Partnership (EHS-CCP) grant and who were new to Early Head Start.
Targeted	▶ Conducted for grantees if they are determined to be at risk.
Follow-up	▶ Conducted for grantees found to be out of compliance with Head Start requirements to ensure that all findings are corrected.

This report also includes information on Follow-up reviews for all grantees with outstanding findings that were reviewed in FY 2017, including grantees with findings that originated in previous fiscal years.

In total, 681 grantees⁷ received final reports from 838 ERSEA, CLASS[®], EHS-CCP, Targeted, and Follow-up reviews completed in FY 2017.⁸

⁷ Throughout this report, the term “grantees” is equivalent to the term “grants” as our analyses were conducted at the individual grant level (rather than at the agency level where some agencies can be awarded multiple grants).

⁸ This report presents data that are current as of March 26, 2018.

Grantee Review Outcomes

After a review is completed, OHS issues a Head Start Review Report to each grantee. The report indicates 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 is 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 will be one of two types: noncompliant or deficient.

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

Of the 681 grantees that received monitoring reviews in FY 2017:⁹

- ▶ 133 received an ERSEA review.
- ▶ 85 received an EHS-CCP review.
- ▶ 252 received a CLASS® reviews.
- ▶ 84 received a Targeted review.
- ▶ 291 received a Follow-up review.¹⁰

Exhibits 3, 4, and 5 present outcomes for grantees that received ERSEA and/or Targeted 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 2017. In FY 2017, compliant review outcomes were found for 99.2 percent of grantees receiving an ERSEA review. Of the 133 grantees that received an ERSEA review, only one grantee had an ERSEA finding in FY 2017 for “Recruitment and Enrollment of Children with Disabilities”.¹¹

⁹ 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.

¹⁰ Of the 291 grantees with a Follow-up review completed in FY 2017, 228 (78.3 percent) had follow-ups from reviews completed in previous fiscal years.

¹¹ Because only one grantee had an ERSEA finding in FY 2017, charts presenting ERSEA review outcome patterns (e.g., review outcomes by grantee size) are not presented in this report.

Exhibit 3: FY 2017 Review Outcomes for Grant by Review Type

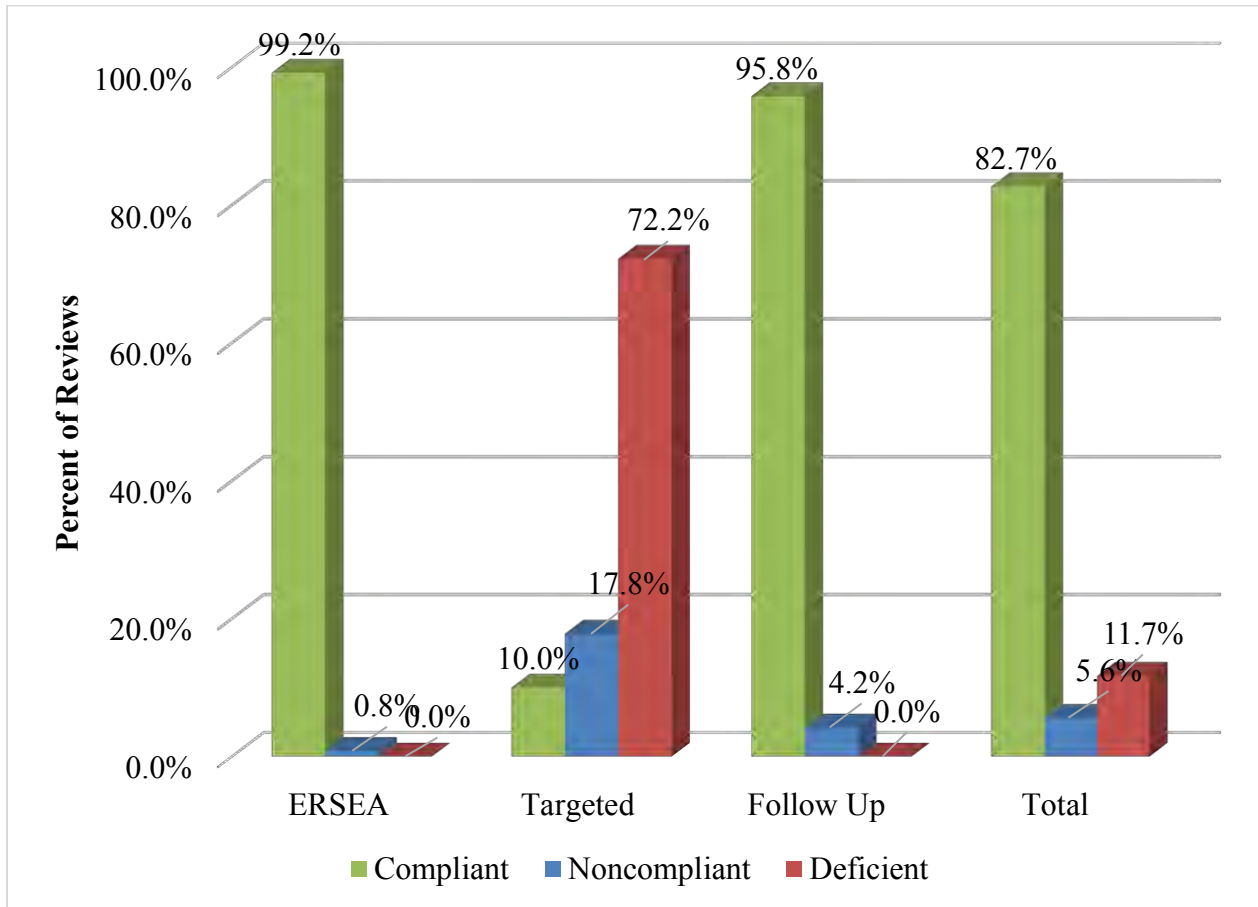
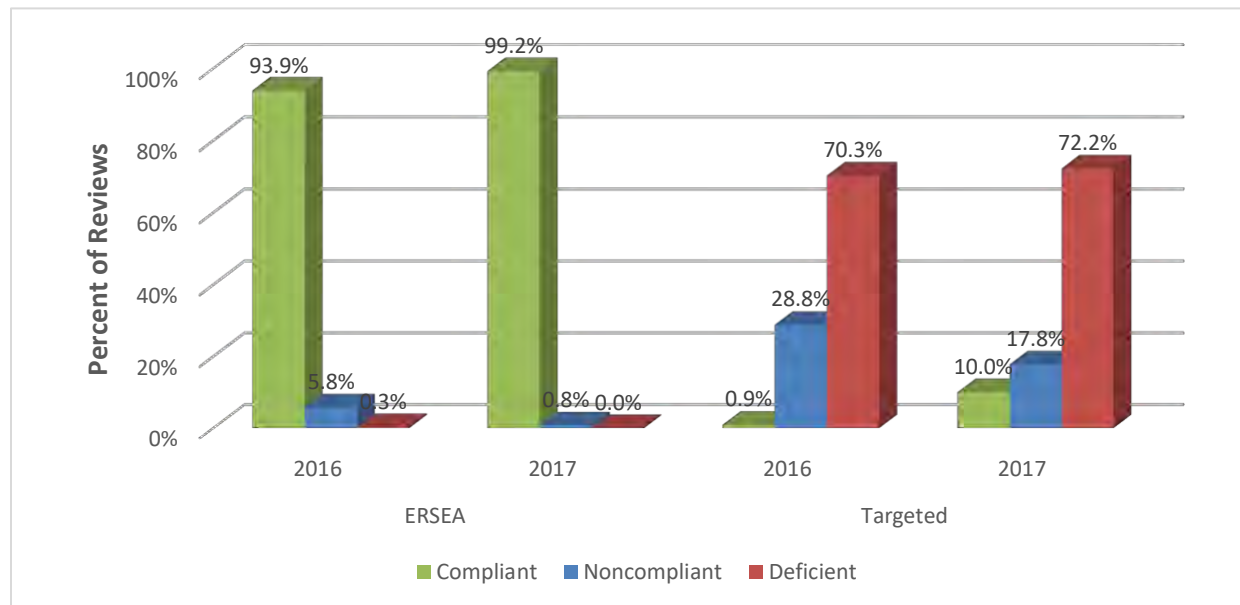


Exhibit 4 looks at outcomes for similar content areas across fiscal years 2016 and 2017. Overall, findings decreased in ERSEA reviews from FY 2016 (6.1%) to FY 2017 (0.8%).¹² Targeted reviews had a slight increase in deficiencies (70.3% to 72.2%) and a decrease in noncompliances (28.8% to 17.8%) when comparing FY 2016 to FY 2017.

¹² Note that in FY 2016 ERSEA standards were monitored with Fiscal standards in a combined Fiscal/ERSEA review. For these analyses comparing ERSEA findings from FY 2016 and FY 2017, outcomes for FY 2016 “ERSEA reviews” were determined by calculating findings on the monitored ERSEA standards from FY 2016 Fiscal/ERSEA reviews.

Exhibit 4: Review Outcomes by Review Type and Fiscal Year



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 2017 reviews. Regarding ERSEA reviews, only one grantee (of the 133 grantees that received an ERSEA review) had an ERSEA finding in FY 2017 – it had an area of noncompliance for “Recruitment and Enrollment of Children with Disabilities”.

Regarding Targeted reviews, **Exhibit 5** displays the most frequently cited issues among grantees who received a finding in FY 2017 Targeted reviews. In FY 2017, “Code of Conduct” was the issue most frequently cited during Targeted reviews; over three-quarters (82.9 percent) of all grantees who had findings on Targeted reviews were cited in this area. “Reporting to the Governing Body and Policy Council” was the second most frequently cited issue, with over one-tenth (13.2 percent) of grantees receiving citations on Targeted reviews regarding this issue. The third most frequently cited issue in Targeted reviews was “Criminal Record Checks.”

Exhibit 5: Performance Issues Most Frequently Cited in FY 2017 Targeted Reviews (n = 84)

Rank	Issue	Grantees Reviewed Citations on Targeted Reviews	
		n	%
1	Code of Conduct	63	82.9%
2	Reporting to the Governing Body and Policy Council	10	13.2%
3	Criminal Record Checks	7	9.2%
4	Children are Only Released to a Parent or Legal Guardian	5	6.6%
4	Governing Body Responsibilities	5	6.6%
4	Allowable and Allocable Costs	5	6.6%
5	Record-Keeping Systems	4	5.3%
6	Staff Qualifications	3	3.9%
6	Financial Management Systems	3	3.9%
7	Governing Body and Policy Council Training and Technical Assistance	2	2.6%
7	Determining Child Health Status	2	2.6%
7	Policy Council Responsibilities	2	2.6%
8	Physical Arrangements Consistent with the Health, Safety, and Developmental Needs of Children	1	1.3%
8	Ongoing Monitoring of Grantee Operations and Delegates	1	1.3%
8	Communication with Staff and Families	1	1.3%
8	Maintenance, Repair, Safety, and Security of all Facilities, Materials, and Equipment	1	1.3%
8	Recruitment and Enrollment of Children with Disabilities	1	1.3%
8	Enrollment	1	1.3%
8	Professional Development Plans	1	1.3%
8	Approach to Child Development and Education	1	1.3%
8	Classroom Size and Staffing	1	1.3%

III. Grantee Monitoring Review Outcomes

Rank	Issue	Grantees Reviewed Citations on Targeted Reviews	
		n	%
8	Procurement Procedures	1	1.3%

Note: Grantees may be cited for multiple citations. As a result, there can be overlap in the categories and the sum of the number of “Grantees Reviewed Citations on Targeted Reviews.”

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

Overall, grantees were mostly successful in correcting their findings on follow-up. Of the 506 findings reviewed on FY 2017 Follow-up reviews, 470 (92.3 percent) were corrected on their first Follow-up review; 36 (7.1 percent) were not corrected and were, therefore, elevated to deficiencies.

Exhibit 6 displays the most frequently cited elevated findings in FY 2017 reviews. Among FY 2017 reviews, the most commonly cited issues on elevated findings were related to “Allowable and Allocable Costs” (61.1 percent). Note that the number of elevated findings is small so caution must be taken when making conclusions with these data.

Exhibit 6: Performance Issues Most Frequently Elevated, FY 2017 (n = 18)

Rank	Issue	Grantees Reviewed with Elevated Findings	
		n	%
1	Allowable and Allocable Costs	11	61.1%
2	Financial Management Systems	6	33.3%
3	Determining Child Health Status	2	11.1%
3	Reporting to the Governing Body and Policy Council	2	11.1%
5	Reporting Systems	1	5.6%
5	Depreciation and Use Allowance	1	5.6%
5	Limitations on Costs of Development and Administration	1	5.6%
5	Comparability of Wages	1	5.6%
5	Procurement Procedures	1	5.6%
5	Governing Body Responsibilities	1	5.6%

III. Grantee Monitoring Review Outcomes

Rank	Issue	Grantees Reviewed with Elevated Findings	
		n	%
5	Davis Bacon Act	1	5.6%
5	Governing Body Composition	1	5.6%
5	Code of Conduct	1	5.6%
5	Criminal Record Checks	1	5.6%
5	Facilities Purchase, Major Renovations and Construction	1	5.6%

Note: Grantees may be cited for multiple citations. As a result, there will be overlap in the categories and the sum of the number of “Grantees Reviewed with Elevated Findings” may be greater than 18.

EHS-CCP Results

In FY 2017, 85 grantees received EHS-CCP reviews. Of those, 81 grantees (95.3 percent) were compliant with the monitored standards (see **Exhibit 7**). Only four grantees total had any findings on their EHS-CCP review. Two grantees (2.4 percent) had one finding and two more had two or more findings (2.4 percent).

Exhibit 7: FY 2017 EHS-CCP Distribution of Reviewed Grantees by Number of Findings

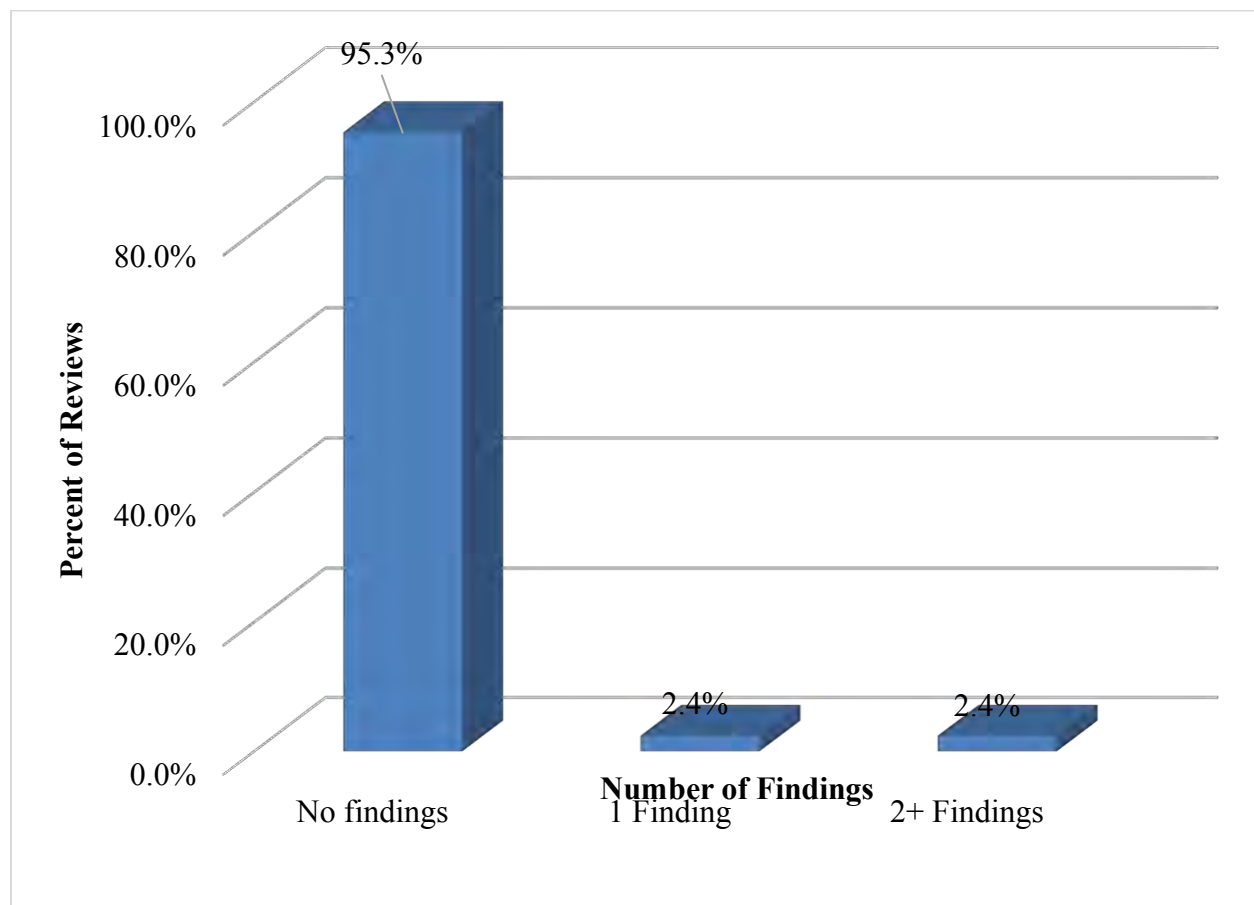


Exhibit 8 displays the most frequently cited areas of noncompliance in FY 2017 EHS-CCP reviews. In FY 2017, grantees received citations on a number of issues evenly, including “Allowable and Allocable Costs,” “Teacher Qualifications,” and “Classroom Size and Staffing.” All of these issues were each cited among one grantee.

Exhibit 8: Performance Issues Most Frequently Cited among Areas of Noncompliance in FY 2017 EHS-CCP Reviews (n = 4)

Rank	Issue	Grantees Reviewed With Noncompliant EHS-CCP Citations	
		n	%
1	Allowable and Allocable Costs	1	25%
1	Classroom Size and Staffing	1	25%
1	Maintenance, Repair, Safety, and Security of all Facilities, Materials, and Equipment	1	25%

III. Grantee Monitoring Review Outcomes

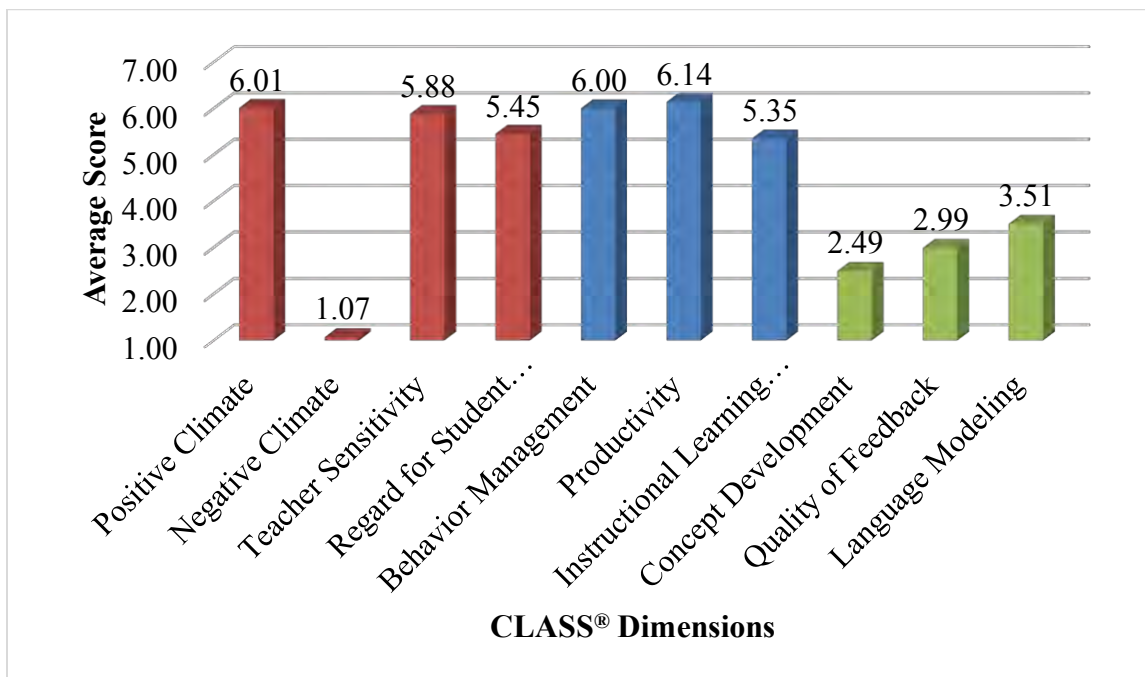
Rank	Issue	Grantees Reviewed With Noncompliant EHS-CCP Citations	
		n	%
1	Physical Arrangements Consistent with the Health, Safety, and Developmental Needs of Children	1	25%
1	Quality Standards, Curricula, and Assessment	1	25%
1	Teacher Qualifications	1	25%

Note: Grantees may be cited for multiple citations. As a result, there can be overlap in the categories and the sum of the number of “Grantees Reviewed with Noncompliant EHS-CCP Citations” can be greater than the number of total findings.

IV. CLASS®

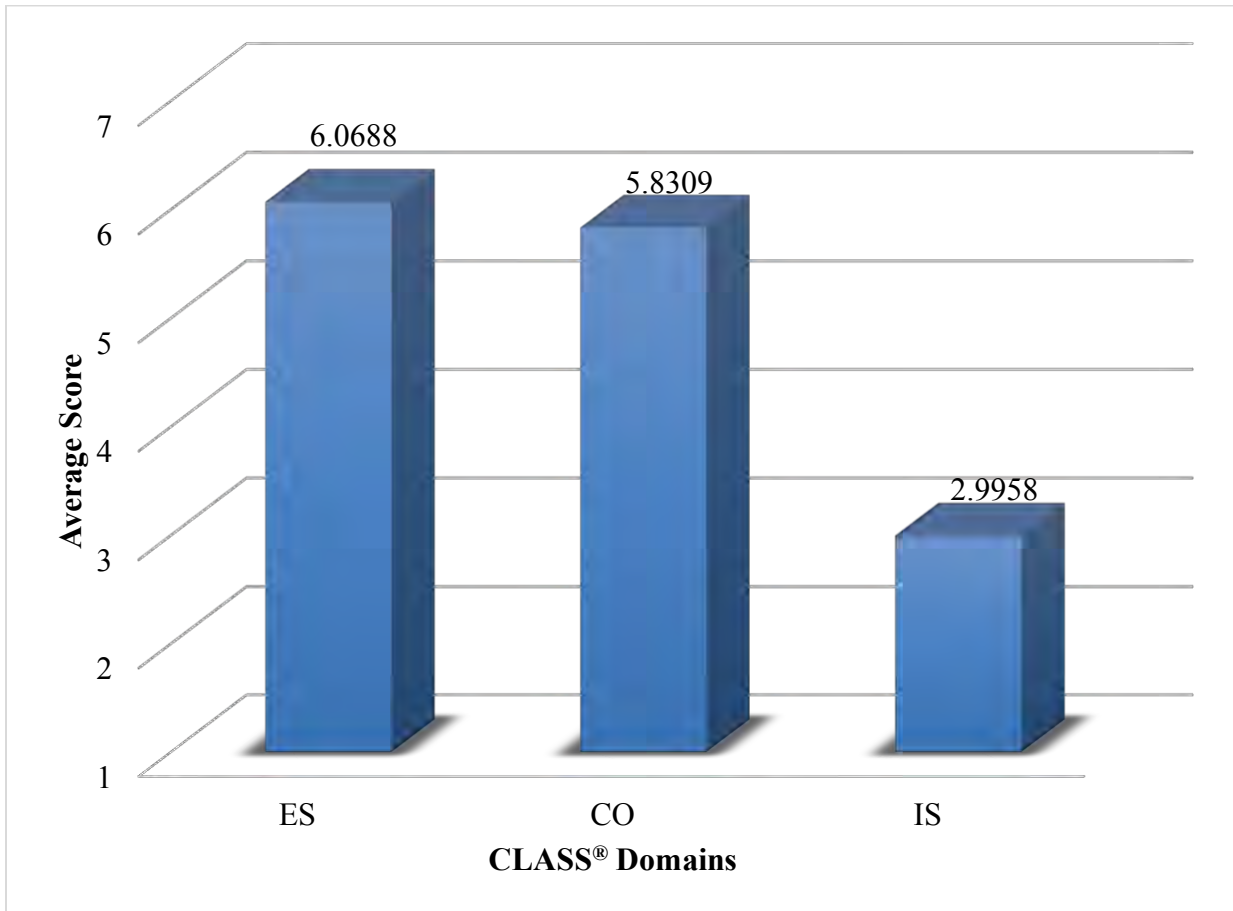
As noted in Section II of this report, CLASS® dimensions are grouped into three main domains—Classroom Organization, Emotional Support, and Instructional Support—that assess the various ways teachers and students interact. In FY 2017, grantees generally scored in the high-quality range in the Emotional Support and Classroom Organization dimensions (see **Exhibit 9**). Note that 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 9: FY 2017 Average CLASS® Scores by Dimension (n = 252)



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 10**), a similar pattern to FY 2015. 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 10: FY 2017 Average CLASS® Scores by Domain

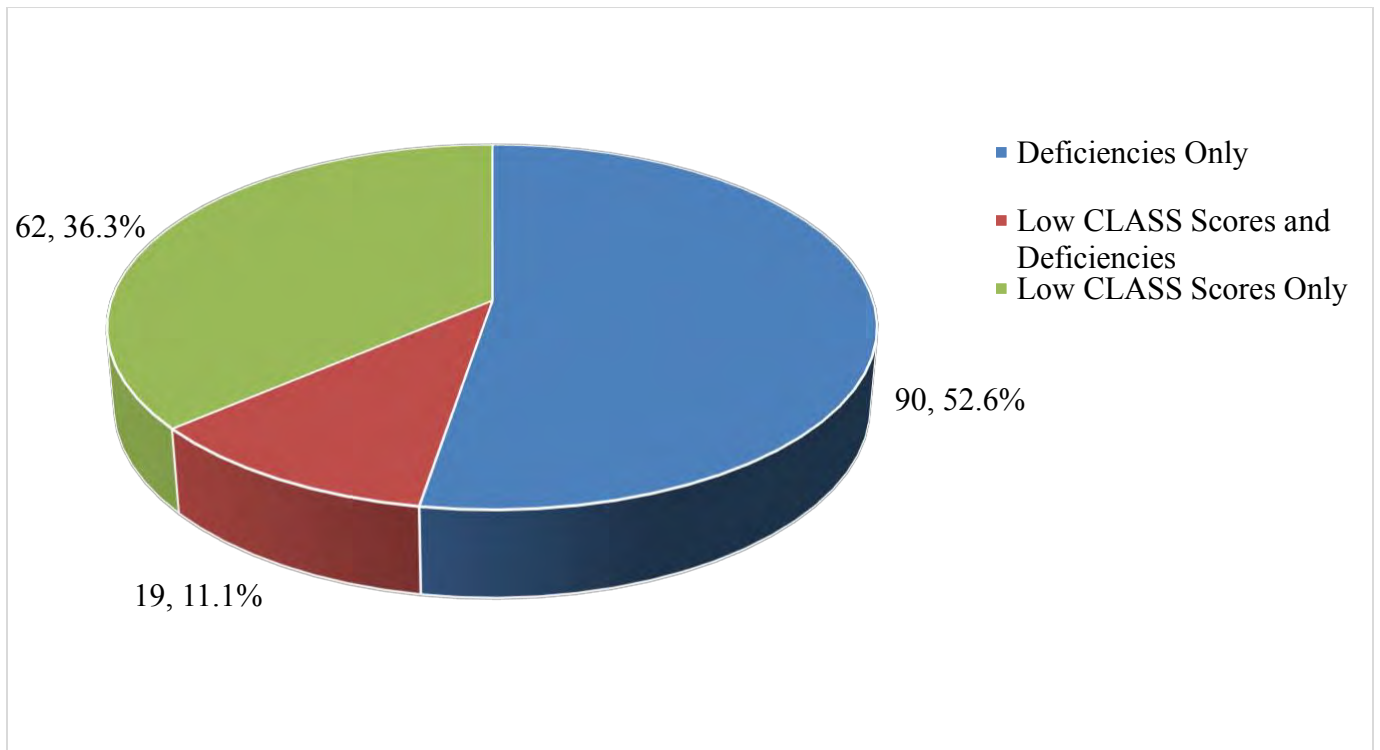


NOTE: The score for Negative Climate was inverted to calculate the average Emotional Support score (i.e., a score of one became a score of seven).

V. Designation Renewal System Results

OHS has so far identified 171 grants that are required to compete for renewed grant funding based on low CLASS[®] scores or deficient findings. Of those 171 grants, 90 (52.6 percent) qualified based solely on elevated findings, immediate deficiencies, or deficiencies identified during FY 2017 reviews. An additional 62 grants (36.3 percent) qualified based on low CLASS[®] scores alone and 19 (11.1 percent) qualified based on low CLASS[®] scores **and** deficiencies identified during FY 2017 reviews. Grantees can also be required to re compete for their grants for non-monitoring reasons. To date, no grantees have been required to re compete for continued funding for non-monitoring reasons in FY 2017. **Exhibit 11** presents the number of grantees in the DRS cohort and the reasons for their inclusion in the cohort.

Exhibit 11: FY 2017 Number of Grants Subject to Recompetition under the DRS and Reason for Inclusion (n = 171)



VI. Annual Review of the FY 2017 Fiscal Monitoring Procedures

Section 650(c) of the Head Start Act requires 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 the OHS fiscal monitoring process provides a complete and accurate picture of grantee fiscal integrity and required compliance with laws and regulations.

The Fiscal Integrity 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 Protocol organizes elements of HSPPS and other regulations into a tool to monitor grantees in a standardized way. The key areas of the Fiscal Integrity 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 1305. The Fiscal Integrity 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 and review of documents, transactions, agreements, and interviews, including governing body and Policy Council members and key fiscal personnel.

FY 2018 Fiscal Integrity Protocol

As mentioned earlier in this report, there were no scheduled Fiscal reviews in FY 2017.¹³ The OHS used FY 2017 to review the new HSPPS and review the FY 2016 Fiscal Integrity Protocol to consider enhancements to reflect changes in policy and procedure and to ensure compliance with the Head Start Act in preparation for FY 2018.

¹³ If a grantee was identified as “at risk” for a fiscal integrity issue, a targeted review was scheduled to investigate the specific issue.

VII. New Directions in Monitoring for FY 2018

Revise Monitoring System Methodology and Support Systems in Response to the new Head Start Program Performance Standards (HSPPS)

In FY 2018, OHS will implement a revised aligned monitoring system (AMS 2.0) to monitor the newly implemented HSPPS and to streamline the monitoring process and reduce grantee burden of multiple review events from multiple agencies. In addition to Follow-up and Targeted reviews, AMS 2.0 will be comprised of three review events:

- ▶ CLASS®
- ▶ Focus Area One
- ▶ Focus Area Two

CLASS®, Follow-up, and Targeted reviews will be implemented with procedures identical to those implemented in the original Aligned Monitoring System. This section will describe the new Focus Area One and Focus Area Two review events.

Focus Area One

Focus Area One is 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. Focus Area One discussions focus on the grantees' program design, management, and governance structure. Grantees will describe 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 ERSEA strategies and fiscal infrastructure

The Focus Area One review is an off-site activity that entails 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 will talk with the grantee's regional program and fiscal specialists.

Focus Area Two

Informed by the information collected during the Focus Area One review, Focus Area Two is 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 is designed to broaden OHS's understanding of each grantee's performance and to determine if programs are meeting the requirements of the HSPPS, Uniform Guidance, and Head Start Act. The Focus Area Two review will focus 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 is an onsite review event that provides 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 will learn 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 includes discussions, classroom explorations, and data tours. Discussions will occur with program management, staff, parents, the governing body, the policy council, and teachers (at the end of each classroom exploration). *Data tours* are a new feature of the onsite review. Conducted with management staff, center leaders, and directors, data tours are an opportunity for the grantee staff to show the data they collect, analyze, use, and share to make informed program decisions.

Appendix: Glossary

Term	Definition
<p><i>Administration for Children and Families (ACF)</i></p>	<p>Division of the U.S. Department of Health and Human Services (includes the Regional Offices).</p>
<p><i>Aligned Monitoring System (AMS)</i></p>	<p>In FY 2015, OHS implemented a newly aligned monitoring system to address the OHS grant cycle shift from an indefinite to a five-year project period. The AMS was designed to provide OHS with comprehensive performance data needed by the fourth year of the five-year grant. OHS will evaluate the data to determine whether the grantee will need to re compete.</p> <p>During the FY 2017 monitoring season, OHS reduced the number of monitoring events experienced by individual grantees and explored ways to monitor grantee implementation of the new HSPPS effectively. During this transition time, the only required monitoring events scheduled in FY 2017 were CLASS[®], beginning in October 2016, and ERSEA, beginning in January 2017.</p> <p>OHS also conducted a review of Early Head Start-Child Care Partnership (EHS-CCP) grantees new to Early Head Start.</p>
<p><i>Area of Noncompliance (ANC)</i></p>	<p>An ANC is a type of review decision recorded in a complete 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.</p> <p>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.</p> <p>Related Terms: Citation, Deficiency, Determination, Noncompliance, Preliminary Area of Noncompliance, Head Start Program Performance Standards, Head Start Program Requirements, Noncompliance, and Review Decision</p>
<p><i>Citation</i></p>	<p>A citation is a performance standard referenced on a Preliminary Area of Noncompliance or an Area of Noncompliance.</p>

Term	Definition
	<p>Related Terms: Area of Noncompliance, Head Start Program Performance Standards, and Preliminary Area of Noncompliance</p>
<p><i>CLASS® Review</i></p>	<p>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.</p>
	<p>Related Terms: Monitoring Reviews</p>
<p><i>Content Area Lead (CAL)</i></p>	<p>Staff person who leads the monitoring review team. The CAL delegates tasks, assigns reviewers to complete sections of the Protocol, and facilitates and coordinates interaction between grantee staff and review team members.</p>
	<p>Related Terms: Monitoring Reviews</p>

Term	Definition
<p>Deficiency</p>	<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> <ul style="list-style-type: none"> (i) <i>A threat to the health, safety, or civil rights of children or staff;</i> (ii) <i>A denial to parents of the exercise of their full roles and responsibilities related to program operations;</i> (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> (iv) <i>The misuse of funds received under this subchapter;</i> (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> (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>(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><i>Deficiency is an OHS determination that a grantee has failed to substantially to provide the required services or to substantially implement required procedures.</i></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 (QIP)).</p> <p>Related Terms: Area of Noncompliance, Determination, Grantee, Head Start Review Report, Quality Improvement Plan , Review Decision</p>
<p>Delegate Agency</p>	<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 and Head Start Program
<i>Determination</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 QIP).</p> <p>Related Terms: Area of Noncompliance, Deficiency, Head Start Review Report, Noncompliance, Preliminary Area of Noncompliance, and Quality Improvement Plan</p>
<i>Early Head Start – Child Care Partnership (EHS-CCP) Review</i>	<p>In FY 2017, OHS conducted a review of EHS-CCP grantees new to Early Head Start. The four goals for the EHS-CCP reviews were:</p> <ul style="list-style-type: none"> ▶ Conduct site visits to determine how the grantee and its partners are working together to plan and provide high-quality services. ▶ Evaluate the benefits of partnership funding. ▶ Determine whether there is a need for additional technical assistance or a more in-depth review. ▶ Determine the fiscal oversight and integrity of partnership funds. <p>Reviews of EHS-CCPs assessed program performance in the areas of Fiscal Management, Health and Safety, Education and Child Development, Family and Community Engagement, and Program Management. Grantees and partners participated in two-day onsite visits supported by initial off-site Fiscal reviews. The review included interviews with grantee and partnership staff, observations of learning environments, and reviews of documents.</p>
<i>Early Head Start Program</i>	<p>An agency or delegate agency funded under the Head Start Act to provide comprehensive child development services to children from birth to three years of age and pregnant women.</p> <p>Related Terms: Delegate Agency and Head Start Program</p>

Term	Definition
<p><i>Eligibility, Recruitment, Selection, Enrollment, and Attendance (ERSEA) Review</i></p>	<p>This ERSEA Protocol guides the assessment of a program’s practices for verifying the eligibility status of children, families, and pregnant women receiving the program’s services and ensuring the appropriate enrollment of children into the program. The protocol also assesses how the program monitors children’s attendance and offering families support, as needed, when attendance is an issue.</p> <p>Related Terms: Monitoring Reviews</p>
<p><i>Fiscal Year (FY)</i></p>	<p>Twelve-month accounting period (federal FY 2017 began on October 1, 2016 and ended on September 30, 2017).</p>
<p><i>Follow-up Review</i></p>	<p>Return visits made to grantees to verify whether corrective actions have been implemented. Determinations in Environmental Health and Safety (EnvHS); Fiscal/Eligibility, Recruitment, Selection, Enrollment, and Attendance (ERSEA); or Targeted 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.</p> <p>Related Terms: Environmental Health and Safety Review; Fiscal/Eligibility, Recruitment, Selection, Enrollment, and Attendance Review; Monitoring Reviews; Targeted Review; and Triennial Review</p>
<p><i>Grant</i></p>	<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 and Head Start Program</p>
<p><i>Grantee</i></p>	<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, and Program Type</p>

Term	Definition
<p><i>Grantee Compliance Status</i></p>	<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"> (1) Compliant: Grantees without a noncompliant or deficient finding. (2) Having one or more noncompliances: Grantees with one or more noncompliant findings. (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
	<p>Related terms: Deficiency and Noncompliance</p>
<p><i>Head Start Program</i></p>	<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, and Program Type</p>
<p><i>Head Start Program Performance Standards and Other Regulations</i></p>	<p>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.</p>
	<p>Related Terms: Area of Noncompliance, Head Start Program Requirements, and Monitoring Reviews</p>
<p><i>Head Start Program Requirements</i></p>	<p>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.</p>
	<p>Related Terms: Area of Noncompliance, Head Start Program Performance Standards, and Monitoring Reviews</p>
<p><i>Head Start Review Report</i></p>	<p>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.</p>

Term	Definition
	<p>Related Terms: Completed Review, Deficiency, Preliminary Area of Noncompliance, and Noncompliance</p>
<i>Health and Human Services (HHS)</i>	<p>The federal government agency that oversees the Administration for Children and Families.</p>
<i>Monitoring Reviews</i>	<p>In FY 2017, there were five main types of monitoring reviews or review types: Eligibility, Recruitment, Selection, Enrollment, and Attendance (ERSEA); CLASS®; Early Head Start-Child Care Partnership (EHS-CCP) reviews; Targeted; and Follow-up.</p> <p>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.</p> <p>Related Terms: CLASS® Review; Content Area Lead; Eligibility, Recruitment, Selection, Enrollment, and Attendance Review; Early Head Start-Child Care Partnership (EHS-CCP) Review; Follow-up Review; Head Start Program Performance Standards, Head Start Program Requirements; Review Decision; and Targeted Review</p>
<i>Noncompliance</i>	<p>A noncompliance is an area of noncompliance (ANC) citing one or more performance standards and related to a noncompliance determination in the completed Head Start Review Report.</p> <p>Related Terms: Area of Noncompliance, Determination, Grantee, Head Start Review Report, Quality Improvement Plan, and Review Decision</p>
<i>Office of Head Start (OHS)</i>	<p>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.</p> <p>Related Terms: Administration for Children and Families, Health and Human Services</p>
<i>Office of Head Start Monitoring System Software</i>	<p>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 corrective action activities.</p>

Term	Definition
<p><i>Preliminary Area of Noncompliance (PANC)</i></p>	<p>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 OHS determines that the PANC has sufficient evidence and documentation.</p>
	<p>Related Terms: Area of Noncompliance, Citation, Determination, Grantee, and Head Start Review Report</p>
<p><i>Program Type</i></p>	<p>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.</p>
	<p>Related Terms: Early Head Start, Head Start, Early Head Start/Head Start Program</p>
<p><i>Protocol</i></p>	<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 a specific content area. In FY 2017, separate monitoring protocols focused on areas such as Eligibility, Recruitment, Selection, Enrollment, and Attendance (ERSEA) and Early Head Start-Child Care Partnership (EHS-CCP) grants. 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>
<p><i>Quality Improvement Plan (QIP)</i></p>	<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>
	<p>Related Terms: Deficiency, Determination, and Noncompliance</p>
<p><i>Review Decision</i></p>	<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>
	<p>Related Terms: Area of Noncompliance, Deficiency, Determination, Monitoring Reviews, and Noncompliance</p>

Term	Definition
<p><i>Reviewer</i></p>	<p>Member of a monitoring review team who, under the guidance of the monitoring Content Area Lead (CAL), gathers evidence through observations, interviews and document review to assess the performance of a Head Start grantee being reviewed.</p>
	<p>Related Terms: Content Area Lead and Monitoring Reviews</p>
<p><i>Targeted Review</i></p>	<p>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 Targeted review. Targeted reviews, unlike Environmental Health and Safety; Fiscal/Eligibility, Recruitment, Selection, Enrollment, and Attendance; Leadership, Governance, and Management Systems; Comprehensive Services and School Readiness; or Classroom Assessment Scoring System® reviews, are non-routine in nature.</p>
	<p>Related Terms: Follow-up Review, Monitoring Reviews, and Triennial Review</p>
<p><i>Triennial Review</i></p>	<p>In the previous Office of Head Start Monitoring System, Head Start grantees underwent monitoring reviews every three years. These types of reviews were referred to as “Triennial” reviews. Triennial reviews were implemented prior to FY 2015. Starting in FY 2015, OHS no longer conducted Triennial reviews and implemented the 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) across the first three years of a grantee’s 5-year grant cycle.</p>
	<p>Related Terms: Follow-up Review, Monitoring Reviews, and Targeted Review</p>

Appendix: Tables

The following appendix tables present the most frequently cited Head Start Program Performance Standards (HSPPS) for each review type. Please note that the HSPPS citations listed in these tables correspond to the updated HSPPS that went into effect on November 7, 2016.

ERSEA: Performance Standards Most Frequently Cited as Noncompliant			
Performance Standard	Standard Description	Grantees Reviewed with Noncompliant ERSEA Citations	
		n	%
640(d)(1)	Recruitment and Enrollment of Children with Disabilities	1	100%

EHS-CCP: Performance Standards Most Frequently Cited as Noncompliant			
Performance Standard	Standard Description	Grantees Reviewed with Noncompliant Fiscal/ERSEA Citations	
		n	%
1302.21 (b)(2)	Classroom Size and Staffing	1	11.1%
1302.21 (d)(2)	Physical Arrangements Consistent with the Health, Safety, and Developmental Needs of Children	1	11.1%
1302.31 (d)	Physical Arrangements Consistent with the Health, Safety, and Developmental Needs of Children	1	11.1%
1302.32 (a)(1)	Quality Standards, Curricula, and Assessment	1	11.1%
1302.42 (e)(1)	Allowable and Allocable Costs	1	11.1%
1302.44 (b)	Allowable and Allocable Costs	1	11.1%
1302.47 (b)(2)(iv)	Physical Arrangements Consistent with the Health, Safety, and Developmental Needs of Children	1	11.1%
1302.47 (b)(2)(v)	Maintenance, Repair, Safety, and Security of all Facilities, Materials, and Equipment	1	11.1%
1302.91 (e)(1)	Teacher Qualifications	1	11.1%

Performance Standards Most Frequently Cited as Deficient			
Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
1302.90 (c)(1)(v)/ 1304.52(i)(1)(iv)	Ensure no child is left alone or unsupervised by staff, consultants, contractors, or volunteers while under their care.	28	16%
1302.90 (c)(1)(ii)(A)/ 1304.52(i)(1)(iv)	Use of corporal punishment.	26	15%
1302.90 (c)(1)(ii)(G)	Physical abuse of a child.	17	10%
1302.90 (c)(1)(ii)(H)	Use any form of verbal abuse, including profane, sarcastic language, threats, or derogatory remarks about the child or child's family.	5	3%
1303.72 (a)(3)/ 1310.10(g)	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, with the exception of transportation services to children served under a home-based option, there is at least one bus monitor on board at all times, with additional bus monitors provided as necessary.	5	3%
642(c)(1)(E)(i)	Legal and fiscal responsibility for administering and overseeing programs under this subchapter, including the safeguarding of Federal funds.	3	2%
1302.90 (c)(1)(ii)(F)/ 1304.52(i)(1)(iv)	Use any form of emotional abuse, including public or private humiliation, rejecting, terrorizing, extended ignoring, or corrupting a child;	3	2%
642(c)(2)(D)(vi)	Program personnel policies and decisions regarding the employment of program staff, consistent with paragraph, including standards of conduct for program staff, contractors, and volunteers and criteria for the employment and dismissal of program staff.	2	1%

Performance Standards Most Frequently Cited as Deficient			
Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
1302.101 (a)(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	2	1%
1303.55 (a)	A grantee must comply with all grants management regulations, including specific regulations applicable to transactions in excess of the current simplified acquisition threshold, cost principles, and its own procurement procedures, and must provide, to the maximum extent practical, open and full competition.	2	1%
1302.90 (c)(1)(ii)(D)	Use or withholding of food as a punishment or reward.	2	1%
1302.90 (c)(1)(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,	2	1%
75.405(a)(1)	Allocable cost incurred specifically for the Federal award.	2	1%
75.308(c)(2)	Change in a key person specified in the application or the Federal award.	2	1%
75.405(a)(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.	2	1%
1302.90 (c)(1)(ii)(B)	Use of isolation to discipline a child.	2	1%
642(c)(1)(E)(iii)	Responsibility for ensuring compliance with Federal laws and applicable State, tribal, and local laws.	2	1%

Performance Standards Most Frequently Cited as Deficient			
Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
75.302(b)(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.	2	1%
75.303(b)	Comply with Federal statutes, regulations, and the terms and conditions of the Federal awards.	2	1%
1303.72 (a)(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.	2	1%
1302.21 (b)(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.	1	1%
642(d)(2)(I)	Ensure the sharing of accurate and regular information of the program information reports.	1	1%
1302.47 (b)(1)(ii)	Clean and free from pests.	1	1%
1302.102 (d)(1)(ii)(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.	1	1%
642(c)(1)(E)(iv)(VII)(bb)	Annual approval of the operating budget of the agency.	1	1%
642(d)(2)(E)	Ensure the sharing of accurate and regular information of the financial audit.	1	1%
1302.102 (b)(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	1	1%

Performance Standards Most Frequently Cited as Deficient			
Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
	oversight that ensures effective implementation of the program performance standards, including ensuring child safety, and other applicable federal regulations as described in this part.		
1302.101 (b)(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.	1	1%
642(d)(2)(B)	Ensure the sharing of accurate and regular information of monthly program information summaries.	1	1%
75.430(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.	1	1%
75.405(d)	Direct cost allocation principles. If a cost benefits two or more projects or activities in proportions that can be determined without undue effort or cost, the cost must be allocated to the projects based on the proportional benefit. If a cost benefits two or more projects or activities in proportions that cannot be determined because of the interrelationship of the work involved, then, notwithstanding paragraph of this section, the costs may be allocated or transferred to benefitted projects on any reasonable documented basis. Where the purchase of	1	1%

Performance Standards Most Frequently Cited as Deficient			
Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
	equipment or other capital asset is specifically authorized under a Federal award, the costs are assignable to the Federal award regardless of the use that may be made of the equipment or other capital asset involved when no longer needed for the purpose for which it was originally required. See also 75.317 through 75.323 and 75.439.		
642(c)(1)(E)(ii)	Adopt practices that assure active, independent, and informed governance of the Head Start agency, including practices consistent with subsection, and fully participate in the development, planning, and evaluation of the Head Start programs involved.	1	1%
642(c)(1)(E)(iv)(VI)	Developing procedures for how members of the policy council are selected.	1	1%
642(c)(2)(D)(viii)	Recommendations on the selection of delegate agencies and the service areas for such agencies.	1	1%
75.405(a)(3)	Is necessary to the overall operation of the non-Federal entity and is assignable in part to the Federal award in accordance with the principles in this subpart.	1	1%
75.404(e)	Whether the non-Federal entity significantly deviates from its established practices and policies regarding the incurrence of costs, which may unjustifiably increase the Federal award's cost.	1	1%
642(c)(2)(D)(vii)	Developing procedures for how members of the policy council of the Head Start agency will be elected.	1	1%
642(c)(1)(E)(iv)(V)(bb)	Agency's progress in carrying out the programmatic and fiscal provisions in such agency's grant application, including implementation of corrective actions.	1	1%
75.404(d)	Whether the individuals concerned acted with prudence in the circumstances considering their responsibilities to the non-Federal entity, its employees, where applicable its	1	1%

Performance Standards Most Frequently Cited as Deficient			
Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
	students or membership, the public at large, and the Federal Government.		
75.404(b)	The restraints or requirements imposed by such factors as: Sound business practices; arm's-length bargaining; Federal, state, local, tribal, and other laws and regulations; and terms and conditions of the Federal award.	1	1%
642(d)(2)(A)	Ensure the sharing of accurate and regular information of the monthly financial statements, including credit card expenditures.	1	1%
75.414	Indirect costs.	1	1%
642(c)(1)(E)(iv)(VII)(aa)	Approval of all major financial expenditures of the agency.	1	1%
642(c)(2)(D)(v)	Bylaws for the operation of the policy council.	1	1%
75.403(a)	Be necessary and reasonable for the performance of the Federal award and be allocable thereto under these principles.	1	1%
642(d)(2)(C)	Program enrollment reports, including attendance reports for children whose care is partially subsidized by another public agency.	1	1%
1302.102 (a)(1)	Strategic long-term goals for ensuring programs are and remain responsive to community needs as identified in their community assessment as described in subpart A of this part.	1	1%
642(c)(1)(E)(iv)(IX)	Approving personnel policies and procedures, including policies and procedures regarding the hiring, evaluation, compensation, and termination of the Executive Director, Head Start Director, Director of Human Resources, Chief Fiscal Officer, and any other person in an equivalent position with the agency.	1	1%

Performance Standards Most Frequently Cited as Deficient			
Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
642(c)(2)(D)(iv)	Budget planning for program expenditures, including policies for reimbursement and participation in policy council activities.	1	1%
75.308(c)(1)	Change in the scope or the objective of the project or program.	1	1%
1302.102 (d)(1)(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.	1	1%
642(d)(2)(G)	The communitywide strategic planning and needs assessment of the Head Start agency, including any applicable updates.	1	1%
1302.21 (b)(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.	1	1%
642(c)(1)(E)(iv)(VII)(cc)	Selection of independent financial auditors who shall report all critical accounting policies and practices to the governing body.	1	1%
1302.47 (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 http://www.acf.hhs.gov/sites/default/files/ecl/caring_for_our_children_basics.pdf , for additional information to	1	1%

Performance Standards Most Frequently Cited as Deficient			
Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
	develop and implement adequate safety policies and practices described in this part.		
642(d)(3)	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.	1	1%
1302.47 (b)(1)(iii)	Free from pollutants, hazards and toxins that are accessible to children and could endanger children's safety.	1	1%
75.303(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.	1	1%
1302.90 (c)(2)	Personnel policies and procedures must include appropriate penalties for staff, consultants, and volunteers who violate the standards of conduct.	1	1%
75.302(b)(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	1%
642(c)(2)(D)(ii)	Program recruitment, selection, and enrollment priorities.	1	1%

Performance Standards Most Frequently Cited as Deficient			
Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
75.302(b)(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	1%
1302.90 (c)(1)(ii)(E)	Use toilet learning/training methods that punish, demean, or humiliate a child.	1	1%
642(c)(1)(E)(iv)(III)	Reviewing all applications for funding and amendments to applications for funding for programs under this subchapter.	1	1%
648A(g)(3)(A)	A State, tribal, or Federal criminal record check covering all jurisdictions where the grantee provides Head Start services to children.	1	1%
642(c)(2)(D)(i)	Activities to support the active involvement of parents in supporting program operations, including policies to ensure that the Head Start agency is responsive to community and parent needs.	1	1%
648A(f)	Professional Development Plans- Each Head Start agency and program shall create, in consultation with an employee, a professional development plan for all full-time Head Start employees who provide direct services to children and shall ensure that such plans are regularly evaluated for their impact on teacher and staff effectiveness. The agency and	1	1%

Performance Standards Most Frequently Cited as Deficient			
Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
	the employee shall implement the plan to the extent feasible and practicable.		
1302.47 (b)(7)(v)	Maintaining procedures and systems to ensure children are only released to an authorized adult.	1	1%
642(c)(2)(D)(iii)	Applications for funding and amendments to applications for funding for programs under this subchapter, prior to submission of applications described in this clause.	1	1%
1302.93 (a)	A program must ensure each staff member has an initial health examination and a periodic re-examination as recommended by their health care provider in accordance with state, tribal, or local requirements that include screeners or tests for communicable diseases, as appropriate. The program must ensure staff do not, because of communicable diseases, pose a significant risk to the health or safety of others in the program that cannot be eliminated or reduced by reasonable accommodation, in accordance with the Americans with Disabilities Act and section 504 of the Rehabilitation Act.	1	1%
1302.47 (b)(5)(iv)	Only releasing children to an authorized adult.	1	1%
642(g)	Funded Enrollment; Waiting List- Each Head Start agency shall enroll 100 percent of its funded enrollment and maintain an active waiting list at all times with ongoing outreach to the community and activities to identify underserved populations.	1	1%
1302.47 (b)(5)(i)	Reporting of suspected or known child abuse and neglect, including that staff comply with applicable federal, state, local, and tribal laws; Reporting of suspected or known child abuse and neglect, including that staff comply with applicable federal, state, local, and tribal laws.	1	1%

Performance Standards Most Frequently Cited as Deficient			
Performance Standard	Standard Description	Grantees Reviewed with Deficient Citations	
		n	%
1302.47 (b)(1)(ix)	Safety through an ongoing system of preventative maintenance.	1	1%
640(d)(1)	The Secretary shall establish policies and procedures to assure that, for fiscal year 2009 and thereafter, not less than 10 percent of the total number of children actually enrolled by each Head Start agency and each delegate agency will be children with disabilities who are determined to be eligible for special education and related services, or early intervention services, as appropriate, as determined under the Individuals with Disabilities Education Act , by the State or local agency providing services under section 619 or part C of the Individuals with Disabilities Education Act.	1	1%
642(c)(1)(E)(iv)(II)	Establishing procedures and criteria for recruitment, selection, and enrollment of children.	1	1%
642(c)(1)(E)(iv)(X)(bb)	Establishing, adopting, and periodically updating written standards of conduct that establish standards and formal procedures for disclosing, addressing, and resolving complaints, including investigations, when appropriate.	1	1%
642(f)(3)(C)	Each Head Start agency shall implement a research-based early childhood curriculum that is comprehensive and linked to ongoing assessment, with developmental and learning goals and measurable objectives.	1	1%
1302.47 (b)(1)(iv)	Facilities are 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.	1	1%