



## Sacramento County

### Head Start and Early Head Start

# PROGRAM MONITORING TOOL 2009





Table of Contents

Introduction and Acknowledgment. . . . .	i
Scope and Limitation. . . . .	iii
Sacramento County Head Start Model for Monitoring, Planning and Evaluation. . . . .	v
Monitoring Process: Coming Together Full Circle. . . . .	vi
Health. . . . .	1
Nutrition. . . . .	9
Safe Environments. . . . .	17
Disabilities. . . . .	27
Mental Health. . . . .	35
Family and Community Partnerships. . . . .	39
Education and Early Childhood Development. . . . .	49
Program Design and Management. . . . .	63
Glossary of Terms. . . . .	73
Exhibit 1: Sample Monitoring Review Summary Feedback Report . . . . .	a-1
Exhibit 2: Sample Monitoring Response Form . . . . .	b-1
Health, Nutrition, Mental Health File Review Worksheet . . . . .	c-1

EHS Health, Nutrition, Mental Health File review Work Sheet .....	d-1
Safe Environment Work Sheet .....	e-1
Disabilities File Review Work Sheet .....	f-1
Family and Community Partnership File Review Work Sheet .....	g-1
Parent Information Check List & Adult Mental Health Work Sheet .....	h-1
Education & Early Childhood Development File Review Work Sheet .....	i-1
PDM – ERSEA File Review Work Sheet .....	j-1

## Introduction

This monitoring tool is the most updated instrument SETA Head Start has developed for use by the Grantee in monitoring its Delegates and SETA-Operated Programs. Although not mandated by the Grantee, delegates are encouraged to utilize this as a resource in developing or enhancing their current internal monitoring systems for program planning and evaluation. The intent of this instrument is to provide basic parameters and to establish a set of benchmarks for all programs. When these requirements are satisfactorily met, programs will be assured that they meet Head Start Performance Standards for providing comprehensive services as well as other county, state and federal regulations. Lastly, this tool will allow for quality and consistency throughout Head Start and Early Head Start programs in Sacramento County.

## Acknowledgment

SETA Head Start would like to express appreciation and gratitude to many committed staff and colleagues from the various delegate agencies who collectively worked on this project. Your dedication and passion to have a quality Head Start and Early Head Start program in Sacramento County is a gift to our community.

### Scope and Limitation

Using documents available to the Grantee, this tool follows an adapted format of the Office of Head Start (OHS) Monitoring Protocol (2008) and incorporates content material from the following sources: Head Start Performance Standards, county, state and federal guidelines, SETA Head Start Monitoring Tool 2000 (MT2K) and countywide program staff content expert consensus on best practices related to Education, Health, Nutrition, Mental Health, Disabilities, and Planning and Evaluation for children birth to 5 years old.

When used by the Grantee in monitoring its delegates, the monitoring staff takes into consideration the individual written services plan and agency procedures of the various delegate agencies. Programs will be monitored based on the strategies outlined in their written services plans that meet the requirements of the Performance Standards.

In the revision process, there was a significant discussion in the scope and format of the items and content that made the final copy of the Program Monitoring Tool. This tool utilizes a “Compliant: Yes/No” checklist format instead of a rating scale from poor to excellent, a deviation from the previous monitoring tool. A final “Yes” or “No” response for each monitoring item will be based on results from parent and staff interviews, review of children’s files and other documents, and class observation. A Monitoring Review Summary Feedback Report (See Exhibit 1) will be submitted to the delegate agency as part of the final report. This summary report will identify percentages of completion of any particular item reviewed from a number of children files reviewed. The higher percentage reported, the better rate of completion and therefore, closer to compliance. A 100% compliance is desired for all items. When programs consistently demonstrate a 100% or near 100% compliance, it is believed to be a quality program that meets the Head Start Performance Standards. The File Review Forms are used for documentation when children’s files are reviewed.

Qualitative strengths and unique features of the program that become evident at the time of the review will be shared as comments. Quality Head Start and Early Head Start programs do not only meet basic county, state and federal requirements but meet the needs and reflect the strengths and unique characteristics of the community it serves. However, items of qualitative nature that do not fit the chosen format of this tool will be reported as comments.

Sacramento County  
Head Start  
Model  
for Monitoring, Planning  
and Evaluation

**Yearly  
Planning  
& Evaluation  
Management**

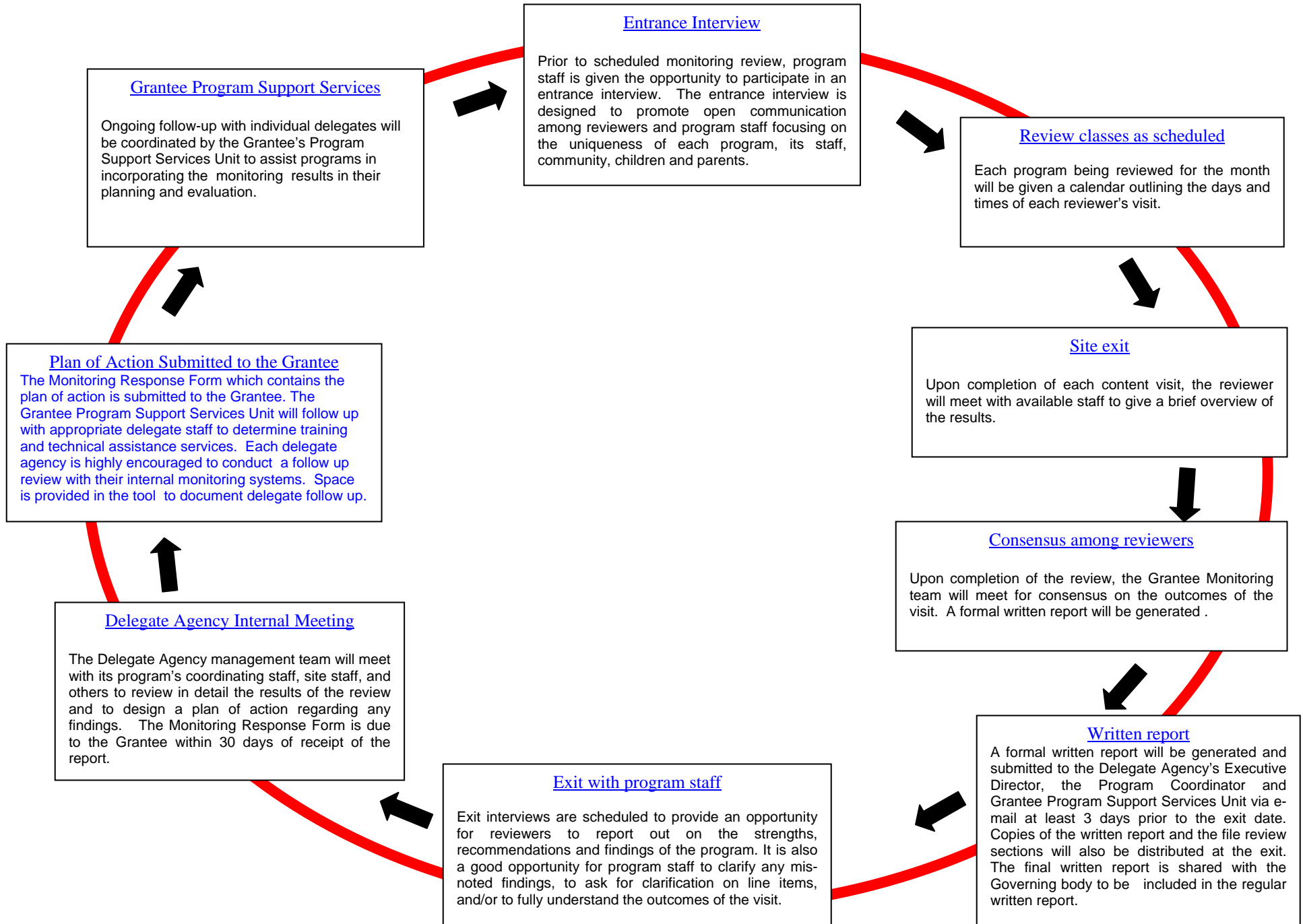
**Grantee Monitoring  
Review**  
State and Federal  
Regulations  
Grantee Staff

**Agency Internal Monitoring  
Systems**  
Governance    Education    Disabilities  
Mental Health    Health / Nutrition  
Family and Community Partnerships

**Quality Standards / Best Practices**  
Content Support Staff (Delegate and SOP)

**Individual Monitoring by Direct Services Employees**  
(Education, Mental Health, Disabilities, Health and Nutrition  
Governance, Family and Community Partnerships)  
**Child Plus / Policies & Procedures**  
**Personnel Policies & Procedures**  
Teachers & Support Staff

# Monitoring Process: *Coming Together Full Circle*



# **Health**

## **Program Design and Management**

- A. Staffing and Training
- B. Monitoring Procedures
- C. System

## **Providing Services**

### **Prevention and Early Intervention.**

- A. Health Screenings
- B. Determining Child's Health Status
- C. Health Procedures
- D. Hygiene – Hand Washing and Tooth Brushing

### **Health Care Tracking and Follow-up**

- A. Health
- B. Dental

**Program Design and Management**

**A. Staffing and Training**

1304.52(a)(2)(ii); 1304.52(d)(2) ;1304.52(k)(2); 1304.52(k)(3); 1306.23(a)

<u>Program Design and Management</u>	<u>Grantee Review Date:</u>		<u>Delegate Agency Follow-up Review Date:</u>		
	<u>Compliant</u>		<u>Compliant</u>		
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>	<u>Comments</u>
1.Are management functions for health services formally assigned to and adopted by a staff person or persons?					
2. Do the staff and consultants assigned to support health services have training and experience in public health, nursing, health education, maternal and child health, or health administration?					
3.Do the grantee and delegate provide opportunities for ongoing training and development for all staff who provide health services?					

**B. Monitoring Procedures**

1304.51(i)(2)

<u>Program Design and Management</u>	<u>Grantee Review Date:</u>		<u>Delegate Agency Follow-up Review Date:</u>		
	<u>Compliant</u>		<u>Compliant</u>		
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>	<u>Comments</u>
1.Can the grantee demonstrate that it has established and implemented procedures for ongoing monitoring of health services to ensure effective implementation of federal regulations?					

**C. System**

<u>Program Design and Management</u>	<u>Grantee Review Date:</u>		<u>Delegate Agency Follow-up Review Date:</u>		
	<u>Compliant</u>		<u>Compliant</u>		
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>	<u>Comments</u>
1.Does the program maintain a Written Service Plan for health services that serves as a working document to adequately reflect the services provided?					

REVIEW written service plans, policy and procedures manuals, etc.  
 INTERVIEW staff members

**Prevention and Early Intervention.**

**A. Health Screenings**

**1304.20 b 1**

<b><u>Prevention and Early Intervention</u></b>	<b>Grantee Review Date:</b>		<b>Delegate Agency Follow-up Review Date:</b>	
	<b>Compliant</b> Yes No	<b>Comments</b>	<b>Compliant</b> Yes No	<b>Comments</b>
1. Does program ensure that culturally, linguistically, and age appropriate screening procedures are performed or obtained, in collaboration with each child's parent, within 45 days of entry into the program to identify concerns regarding a child's developmental, sensory, behavioral, motor, language, social, cognitive, perceptual, and emotional skills?				
2. Does program familiarize parents with the use of and rationale behind health and developmental procedures administered through the program or by contract and obtain advance authorization for such procedures?				
3. Does program maintain written documentation when a parent or other legally responsible adult refuses to give authorization for health services?				
4. >95% 1 <sup>st</sup> year children received a hearing screening within 45 days of enrollment.				
5. >95% 2 <sup>nd</sup> year children received a hearing screening within 1 year of last screening. <i>(N/A permitted)</i>				
6. >95% 1 <sup>st</sup> year children received a vision screening within 45 days of enrollment. (visual observation for EHS)				
7. >95% 2 <sup>nd</sup> year children received a vision screening within 1 year of last screening. <i>(N/A permitted)</i>				
8. >95% Children received a developmental screening within 45 days of enrollment.				
9. >95% Children received a speech and language screening within 45 days of enrollment.				
10. >95% Children received a behavioral / social / emotional screening within 45 days of enrollment. <i>(For DECA users only-not before 30 days)</i>				
11. Is there evidence that all parents are informed of screening results?				
12. Do children receive a daily health check upon entering the center? <i>(N/A for Home Base)</i>				

Screenings will be considered complete if there is a documented refusal by the parent or doctor.  
REFER TO – Health and Education File Review

**B. Determining Child's Health Status**

1304.20 a 1, 1304.23 a 1, 2

Prevention and Early Intervention	Grantee Review Date:			Delegate Agency Follow-up Review Date:		
	Compliant Yes	No	Comments	Compliant Yes	No	Comments
1. Are all children are connected to a medical home?						
2. >95% heights and weights are taken within 45 days of enrollment. (also head circumference for EHS 0-23 months old)						
3. >95% heights and weights are graphed within 60 days of enrollment.						
4. >95% additional heights and weights are taken every 6 months. (N/A permitted)(follow CHDP guidelines for EHS)						
5. >95% additional heights and weights are graphed within 30 days. (N/A permitted)						
6. >95% blood pressures are recorded within 45 days of enrollment. (4 year olds only)						
7. >95% 2 <sup>nd</sup> year blood pressures are recorded within 1 year of last screening. (N/A permitted)						
8. Are all immunizations are up-to-date or complete according the EPSDT guidelines?						
9. Do all children (with age-appropriate recommendations for TB screens) have a TB screening (within one year prior to enrollment in the program)?						
10. Are all parent/volunteer TB's completed? (TB obtained every two years)						
11. *Are all required physical exams (Well Child Check for EHS) on file within 30 days of enrollment? (90 days for home based services)						
12. *Are all required 2 <sup>nd</sup> year physical exams on file within 30 days of expired 1 <sup>st</sup> year physical? (N/A permitted) (Up to date on Well Child Checks for EHS)						
13. *Are all hemoglobin results recorded within 45 days of enrollment? (According to periodicity table, N/A permitted)						
14.*Are all 2 <sup>nd</sup> year hemoglobin results recorded within 1 year of last screening? (follow CHDP guidelines for EHS) (N/A permitted)						
15. * > 90% 1 <sup>st</sup> year dental exams are completed. (N/A for EHS)						
16. > 90% subsequent dental exams are completed within one year. (N/A permitted)						
17. Are all health or prenatal health histories completed at placement registration? (within 45 days of enrollment for delegates)						
18. Are all nutrition histories completed at placement registration? (within 45 days of enrollment for delegates).						

\* Unless valid documentation as to why not. Valid documentation may include a child who has a valid reason for not being available to screen such as documented excused absence, etc.

**C. Health Procedures**

1304.22 a, b, c

<u>Prevention and Early Intervention</u>	<u>Grantee Review Date:</u>			<u>Delegate Agency Follow-up Review Date:</u>		
	<u>Compliant</u> Yes No	<u>Comments</u>		<u>Compliant</u> Yes No	<u>Comments</u>	
1. Do staff ensure that a child with a short term injury (that cannot be readily accommodated) or short term contagious illness is temporarily excluded from participating in program activities?						
2. Do staff ensure that children are not denied admission to the program or if already enrolled are not subjected to long term exclusion solely because of their health care needs or medication requirements unless reasonable accommodations cannot be made without fundamentally altering the nature of the program?						
3. Are written procedures established and maintained to ensure that individual records are maintained for all medications dispensed and that the records are regularly reviewed with the child's parents?						
4. Are medications properly labeled and/or expiration date not expired? (N/A permitted) *						
5. Are all medication forms completed? (N/A permitted) *						
6. Is medication stored under lock and key or is in a locked box if needing refrigeration?(N/A permitted)*						
7. Are all staff aware of medication policy and procedures?						
8. Are emergency plan(s) for children with special medical problems posted?(N/A permitted)*						
9. Are toxic chemicals stored out of the reach of children?*						
10. Is the MSDS book easily accessible and all staff are aware of MSDS? *						
11. Is diapering procedure posted in diapering area? (EHS/NA Permitted for HS if no enrolled child uses diapers)						
12. Is diapering procedure consistently followed.?(EHS only)						
13. Are emergency phone numbers and complete site addresses visible?						
14. Are all required emergency procedures posted in each classroom? (adult and child CPR, dental, and choking)						
15. Are all children and staff emergency cards complete, signed, and easily accessible to all staff? *						
16. Are fire drills (monthly) and disaster drills (every other month) posted and up-to-date?						

If any \* items are marked then immediate correction must take place  
**OBSERVE** – Classroom procedures and postings. **REVIEW** – Emergency Cards **INTERVIEW** – Staff

**D. Hygiene (Hand Washing and Tooth Brushing)**

**1304.22 e 1 & 2**

<b><u>Prevention and Early Intervention</u></b>	<b><u>Grantee Review Date:</u></b>		<b><u>Delegate Agency Follow-up Review Date:</u></b>	
	<b><u>Compliant</u></b> Yes No	<b><u>Comments</u></b>	<b><u>Compliant</u></b> Yes No	<b><u>Comments</u></b>
1. Do all adults wash their hands before food preparation, setting the table and/or eating?				
2. Do all children wash their hands under adult supervision before setting the table and eating?				
3. Is proper handwashing observed , after contact with blood or other bodily fluids, handling animals, treating a wound, and toilet use? (Blood borne pathogen procedure was followed if needed). <i>(N/A permitted)</i>				
4. Does tooth brushing occur in conjunction with meals? <i>(Preschool center based only)</i> Do staff promote effective dental hygiene among children in conjunction with meals. <i>(EHS)</i>				
5. Does effective supervision take place during the tooth brushing process?				
6. Are all toothbrushes clean and bristles are not frayed?				
7. Are all toothbrushes properly stored?				

*OBSERVE* – Hand washing and tooth brushing process occurs in conjunction with meals.

# Health Care Tracking and Follow-up

## A. Health

1304.20 a, c 1, 2, d, e, f

Health Care Tracking and Follow-up	Grantee Review Date:		Delegate Agency Follow-up Review Date:			
	Compliant Yes	No	Comments	Compliant Yes	No	Comments
1. Are Inadequate exclusion health letters for missing physicals or initial well child checks sent at 31 days of enrollment or there is a documented verified appointment.? (N/A permitted)						
2. (EHS) Are inadequate health letters for missing subsequent well child checks sent or there is a documented verified appointment in place ?(N/A Permitted)						
3. (EHS) Are exclusion letters for missing well child checks sent within 30 days of enrollment or there is a documented verified appointment in place? (only one allowed) (N/A Permitted)						
4. Is follow-up documented on all children missing a 30 day hgb/hct.? (45 day for EHS)(N/A permitted)						
5. Is follow-up documented on all children with abnormal blood pressure? (N/A permitted)						
6. Is follow-up documented on all parents/volunteers with expired TB's? (N/A permitted)						
7. Do children who are documented as not testable or identified needing a re-screen (vision, hearing and BP) re-tested within 30 days of the original test date and/or no later than 60 days of enrollment.? (N/A permitted, N/A with documentation i.e. IEP or letter from MD)(N/A for EHS)						
8. Is follow-up documented on all children with failed hearing or vision screenings or all EHS children with noted concerns on vision observation or hear kit? (Request for services are sent within two weeks after second failed screening date) (6 weeks for delegates) (N/A permitted)						
9. Are all data up-to-date on Child Plus within 60 days of enrollment and reflects content of file? (90 days for delegates) (N/A permitted)						
10. Is follow-up documented every 60 days on children needing a medical home.? (i.e. flyers, parent meetings, etc.) (N/A permitted)						
11. Are all health histories reviewed by staff (2 <sup>nd</sup> year signed by staff and parents)?						
12. Are all health concerns identified on the health history or physical (well child check for EHS) addressed and documented? (N/A permitted)						
REFER TO – Health File Review						

**B. Dental**

1304.20 a 1 iii, iv, c 3 i, ii, d, e

<b>Health Care Tracking and Follow-up</b>	<b>Grantee Review Date:</b>			<b>Delegate Agency Follow-up Review Date:</b>		
	<b>Compliant</b> Yes No	<b>Comments</b>		<b>Compliant</b> Yes No	<b>Comments</b>	
1. Is follow-up documented on all 1 <sup>st</sup> year children needing a dental exam? ( <i>Pre-school age</i> )						
2. Is follow-up documented on all 2 <sup>nd</sup> year children needing a dental exam? ( <i>Pre-school Age</i> )						
3. Is follow-up documented on all children needing dental treatment?						
4. Is treatment completed or in process on all children needing dental services? ( <i>N/A permitted</i> )						
5. Is follow-up documented on all children needing a dental home? ( <i>N/A permitted</i> )						
6. Is there evidence that all parents have been provided information on oral health and hygiene?						

REFER TO Health File Review

# **Nutrition**

## **Program Design and Management**

- A.** Staffing and Training
- B.** Monitoring Procedures
- C.** System

## **Providing Services**

### **Prevention and Early Intervention.**

- A.** Menus
- B.** Special Diets
- C.** Meal Services
- E.** Food Sanitation
- D.** CACFP (SOP, WCIC)

### **Nutrition Tracking and Follow-up**

- A.** Nutrition

## **Tools**

Health and Nutrition File Review Sheets  
Overall Health and Nutrition Summary

Standards: 1304.20 a-f; 1304.20 c-f; 1304.18; 1304.21 c 1 iii; 1304.22 – 1304.24; 1304.40 f; 1304.41 a 2; 1304.41 b; 1304.53 a 6; 1304.53 a 8; 1304.53 a 10 I, iii, v-xvii; 1304.53; 1306.33 c 3; 1308.6; 1308.20

**Program Design and Management**

**A. Staffing and Training**

1304.52(a)(2)(ii); 1304.52(d)(3) ;1304.52(k)(2); 1304.52(k)(3); 1306.23(a)

<b><u>Program Design and Management</u></b>	<b><u>Grantee Review Date:</u></b>		<b><u>Delegate Agency Follow-up Review Date:</u></b>	
	<b><u>Compliant</u></b> Yes No	<b><u>Comments</u></b>	<b><u>Compliant</u></b> Yes No	<b><u>Comments</u></b>
1. Are management functions for nutritional services formally assigned to and adopted by a staff person or persons?				
2. Are nutritional services supported by staff or consultants who are registered dietitians or nutritionist?				
3. Does the grantee and delegate provide opportunities for relevant ongoing training and development for all staff who provide nutritional services?				

**B. Monitoring Procedures**

1304.51(i)(2)

<b><u>Program Design and Management</u></b>	<b><u>Grantee Review Date:</u></b>		<b><u>Delegate Agency Follow-up Review Date:</u></b>	
	<b><u>Compliant</u></b> Yes No	<b><u>Comments</u></b>	<b><u>Compliant</u></b> Yes No	<b><u>Comments</u></b>
1. Can the program demonstrate that it has established and implemented procedures for ongoing monitoring of nutritional services to ensure effective implementation of federal regulations?				

**C. System**

<b><u>Program Design and Management</u></b>	<b><u>Grantee Review Date:</u></b>		<b><u>Delegate Agency Follow-up Review Date:</u></b>	
	<b><u>Compliant</u></b> Yes No	<b><u>Comments</u></b>	<b><u>Compliant</u></b> Yes No	<b><u>Comments</u></b>
1. Does the program maintain a Written Service Plan for Nutrition Services that serves as a working document to adequately reflect the services provided?				

REVIEW written service plans, policy and procedures manuals, etc.  
INTERVIEW staff members

**Prevention and Early Intervention**

**A. Menus**

**1304.23 b 1, ii, iii, v, vi, vii, c 1, 4, 6**

<b>Prevention and Early Intervention</b>	<b>Grantee Review Date:</b>		<b>Delegate Agency Follow-up Review Date:</b>		
	<b>Compliant</b>		<b>Compliant</b>		
	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Comments</b>
1. Is there a variety of foods served throughout the month that broadens the child's food experience and has been approved by a registered dietician?					
2. Do menus contain a variety of cultural and ethnic foods that have been approved by a registered dietician?					
3. Are foods served low in salt, sugar, and fat?					
4. Are A.M. and full day children provided breakfast? <i>(N/A permitted if PM program)</i>					
5. Are children receiving appropriate meals and snacks that meet their nutritional needs (1/3-part day) (½-2/3 full day), following CACFP meal pattern?					
6. Are menus posted and current?					
7. Are the foods posted on the menu served and are staff given written notification of any changes? <i>(SOP only)</i>					
8. Are parents given a copy of the menu?					
9. Do home based programs provide appropriate snacks and meals to each child during group socialization activities? Are all snacks and meals approved by a registered dietician? <i>(Home Base option only)</i>					
10. Are infant/toddlers current feeding schedule, voiding patterns, and developmental changes in feeding shared with families regularly? <i>(EHS only)</i>					
11. Are infant/toddlers receiving food appropriate to their developmental readiness and feeding skills, and parents have been given the opportunity to provide input on the food served? <i>(EHS only)</i>					

*REVIEW* – Menus, daily schedules, and minutes from parent meetings.  
*INTERVIEW*- Staff and Parents

**B. Special Diets**

1304.23 b 1

<b>Prevention and Early Intervention</b>	<b>Grantee Review Date:</b>		<b>Delegate Agency Follow-up Review Date:</b>	
	<b>Compliant</b> Yes No	<b>Comments</b>	<b>Compliant</b> Yes No	<b>Comments</b>
1. Was the R.D. notified if special diets were identified prior to child receiving school meals.? (i.e. staffing took place if necessary)				
2. Was a special diet verification obtained by a licensed physician, nurse or physicians assistant?				
3. Are special diet forms completed and copies kept in the child's file?				
4. Are menu modifications developed and food substitutions approved by an R.D. ?				
5. Is the special diet menu followed and/or served?				
6. Are special diet foods reflected on the production records in the kitchen?				
7. Are special diet foods labeled with child's name?				
8. Are special diets labeled with child's name and modifications are posted near meal prep area?				

REFER TO – Health File Review

**C. Meal Service**

1304.23 c 2, 3, 4, 7

<b>Prevention and Early Intervention</b>	<b>Grantee Review Date:</b>		<b>Delegate Agency Follow-up Review Date:</b>		
	<b>Compliant</b> Yes No		<b>Comments</b>	<b>Compliant</b> Yes No	<b>Comments</b>
1. Do meals start by the appropriately scheduled time: a minimum of 3 hours between breakfast and lunch (AM only) and a minimum of 2 hours between a meal and a snack, and are infant/toddlers fed on demand?					
2. Are meals offered family style in a manner in which children serve themselves and are seated while eating?					
3. When family style is offered, do children participate in setting the table and are adequately supervised?					
4. Do adults sit at the same time as children, and eat the same foods (to the extent possible), serve as role models and supervise children at every meal?					
5. Are children encouraged, but not forced to try all foods?					
6. Is there sufficient time (approx. 30 minutes) for children to finish their meal and children are not rushed?					
7. Is there conversation during meals, centered around the children's interests and includes foods and nutrition?					
8. Do children clear their place from the table after meals?					
9. Are infants held while being fed and are not laid down to sleep with a bottle?					

*OBSERVE* – Meal and snack times  
*REVIEW* – Daily schedule, attendance, sign-in sheets, and meat count sheets.

**D. Food Sanitation**

**1304.23 e**

<b><u>Prevention and Early Intervention</u></b>	<b><u>Grantee Review Date:</u></b>		<b><u>Delegate Agency Follow-up Review Date:</u></b>	
	<b><u>Compliant</u></b> Yes No	<b><u>Comments</u></b>	<b><u>Compliant</u></b> Yes No	<b><u>Comments</u></b>
1. Are hot entrée food temperatures taken and recorded daily on menu or Quality Assurance sheets? <i>(N/A for delegates)</i>				
2. Are proper procedures followed when hot food temperature falls below 140° and are staff aware of the reheating procedures? <i>(N/A for delegates)</i>				
3. Are proper procedures for sanitizing all food contact surfaces followed (disinfectant is diluted properly and changed daily) and are refrigerators, warmers, carts, and microwaves clean?				
4. Is the sanitizing solution labeled and kept out of the reach of children at all times?				
5. Is all perishable leftover food labeled, dated and thrown away after 48 hours (no hot entrees are kept)?				
6. Are chemicals stored away from food?				

# Nutrition Tracking and Follow-up

## A. Nutrition

1304.20 a 1 iii, iv, c 1, 2, d, e

Nutrition Tracking and Follow-up	Grantee Review Date:		Delegate Agency Follow-up Review Date:	
	Compliant Yes	No	Compliant Yes	No
1. Is there follow-up documentation on all children not receiving WIC services with hgb 10.0-11.9 g/dl, hct 30-35%? (children ages 2-3 with hgb 11.2-11.9, hct 34-35.9%, and infants under 2 years with hgb 11.0-11.4, hct 33-34.9%. (nutrition education provided). <i>(N/A permitted)</i>				
2. Is there follow-up documentation on all children not receiving WIC services with hgb<10 g/dl, hct<30%. (children ages 2-3 with hgb <11.2, hct <34%, and infants under 2 years with hgb <11.0 or hct <33% (Request for Follow-Up Services to program RD within 60 days of enrollment). <i>(N/A permitted)</i>				
3. Is there follow-up documentation on all children not receiving WIC services and ht/wt is $\geq 95\%$ plus BMI $\geq 25$ (Request for Follow-Up Services to program RD within 60 days of enrollment). <i>(N/A permitted)</i> (EHS) Are BMI values documented on the height and weight graph for all children above the 95 <sup>th</sup> percentile and those who are 18 pounds and over?				
4. Is there follow-up documentation on all children not receiving WIC services and ht/wt is $\leq 5\%$ (Request for Follow-Up Services to program RD within 60 days of enrollment)? <i>(N/A permitted)</i>				
5. Are proper consent forms completed for nutrition referrals with parent signatures? <i>(N/A permitted)</i>				
6. Are all nutrition histories reviewed by staff (2 <sup>nd</sup> year signed by staff and parents)?				
7. Are all nutrition concerns identified on the nutrition history or physical addressed and documented? <i>(N/A permitted)</i>				

REFER TO – Health File Review



# **Safe Environments**

## **Program Design and Management**

- A. Monitoring Procedures
- B. System

## **Facilities, Materials, and Equipment.**

- A. Facilities Checklist Tool

## **Tools**

Monitoring Summary Sample

Standards: 1304.21 a 4 i, a 5-a 6; 1304.22 e 7; 1304.23 e; 1304.53 a 7, 9, 10 iv, xiv-xv, xvii, b; 1306.30 c; 1308.4 o 4, 6

**Program Design and Management**

**A. Monitoring Procedures**

**1304.51(i)(2)**

<b><u>Program Design and Management</u></b>	<b><u>Grantee Review Date:</u></b>		<b><u>Delegate Agency Follow-up Review Date:</u></b>	
	<b><u>Compliant</u></b> Yes No	<b><u>Comments</u></b>	<b><u>Compliant</u></b> Yes No	<b><u>Comments</u></b>
1. Can the program demonstrate that it has established and implemented procedures for ongoing monitoring of facilities, materials and equipment to ensure effective implementation of Federal regulations?				

**B. System**

<b><u>Program Design and Management</u></b>	<b><u>Grantee Review Date:</u></b>		<b><u>Delegate Agency Follow-up Review Date:</u></b>	
	<b><u>Compliant</u></b> Yes No	<b><u>Comments</u></b>	<b><u>Compliant</u></b> Yes No	<b><u>Comments</u></b>
1. Does the program maintain a Written Service Plan for Safe Environments that serves as a working document to adequately reflect the services provided? (may be included in the Child Health and Development Service Plan)				

# Facilities, Materials and Equipment

## Facilities Checklist Tool

1304.21 a 4 i, a 5-a 6; 1304.22 e 7; 1304.23 e; 1304.53 a 7, 9, 10 iv, xiv-xv, xvii, b; 1306.30 c; 1308.4 o 4, 6

<u>Site:</u>	<u>Grantee Review Date:</u>		<u>Delegate Agency Follow-up Review Date:</u>			
<u>Required Postings:</u>	<u>Compliant</u> Yes No		<u>Comments</u>	<u>Compliant</u> Yes No		<u>Comments</u>
1. Is the Facility License posted in a prominent place? (Licensing 101260)						
2. Is the Designation of Facility Responsibilities (Licensing 101312, form #306) available at the site?						
3. Are the evacuation routes (posted next to all exits) clearly marked so that exits to the outside are unmistakable? (1304.53 a 10 vii; 1304.22 a 3)						
4. Is the Tobacco-free policy sign/sticker posted and parent signatures obtained? 1304.53 a 8						
5. Are the Non-Discrimination Posters, CFR 45; 84.4, "And Justice For All" and Complaint Procedure/forms posted?						
6. Is the Personal and Parents Rights form (Licensing 101223) (Form #995) available?						
7. Has the center received any Type A deficiencies within the past 12 months?(N/A permitted)						
8. Is the Type A deficiency appropriately posted? (Must be posted for 30 days following violation)(N/A permitted)						
9. If yes on number 7, is there evidence in each child's file that the parent/guardian received a copy of the Type A deficiency (signature page provided by CL)?(N/A permitted)						
10. If yes on number 7, did each family enrolled within the past 12 months, receive a copy of the Type A deficiency (evidence in child's file)?(N/A permitted)						

<u>Site</u>	<u>Grantee Review Date:</u>			<u>Delegate Agency Follow-up Review Date:</u>		
<b><u>Disaster Preparedness</u></b>	<u>Compliant</u> Yes No		<u>Comments</u>	<u>Compliant</u> Yes No		<u>Comments</u>
1. Are the emergency disaster plan and non-ambulatory evacuation plan posted in each room? (Licensing form #610) 1304.22 a 3						
2. Are disaster supplies readily accessible and identified? (food and backpack – SOP). 1304.53 a 3						
3. Are exits clearly marked and unobstructed? 1304.22 a 3; 1304.53 a 10 vii						
4. Are lighted exit signs in working order at all times? (replace bulbs as needed).						
5. Does the facility have approved, regularly serviced, and readily available fire extinguishers.?1304.53						
5. Are there working smoke detectors in each classroom? 1304.53 a 10 vi						
6. Are the rooms well lit and emergency lighting or working flashlight available? (All bulbs are working). 1304.53 a 10 xi						
7. Is a well-supplied first aid kit accessible and conspicuous (in a cupboard, marked with a red+) and out of reach of children? Is the first aid manual nearby? 1304.23 f 1						
8. Are required staff certified in first aid and infant/child CPR with documentation in the site personnel file?						
9. Is a well-stocked first aid kit for field trips (backpack/fanny pack) identified and are emergency cards taken on field trips?						
10. Are staff emergency cards complete with all doctor information and staff is aware of where they are kept?						
11. Is there an onsite procedure on the evacuation of children in crib ? (EHS Only/N/A permitted)						

<u>Site</u>	<u>Grantee Review Date:</u>		<u>Delegate Agency Follow-up Review Date:</u>			
<u>Indoor Environment</u>	<u>Compliant</u> Yes No		<u>Comments</u>	<u>Compliant</u> Yes No		<u>Comments</u>
<b><i>Restrooms</i></b>						
1. Are bathroom facilities clean, free of odor, in good repair and easily reached by children?						
2. Are bathroom facilities separated from areas used for cooking, eating, or children's activities? 13043.53 a 10 xiv						
3. Is toilet paper located where children can reach it without having to get up from the toilet (age-appropriately accessible)?						
4. Are paper towels and liquid soap readily available at all sinks and within the reach of children (age-appropriately accessible)?						
5. Is there an identified adult bathroom?						
<b><i>Kitchens</i></b>						
6. Are the refrigerator, microwave, food warmers and carts clean?						
<b><i>Classrooms</i></b>						
7. Are the classrooms maintained at an adequate temperature (approx. 68° -85°)? 1304.53 a 10 xiv						
8. Are windows and glass doors constructed, adapted, or adjusted to prevent injury to children (they are sufficiently marked or they have sufficient barriers to prevent injury).? Are Bottom windows lockable? 1304.53 a 10 xii						
9. Can the windows not be opened more than 6 inches from the bottom (N/A Permitted).						
10. Do all windows have closed permanent screens? (N/A permitted)						
11. Are the windows, doors, ceilings and walls clean?						
12. Are flammable, dangerous materials or potential poisons, and cleaning supplies stored in cabinets (locked or out-of-reach of children) or storage facilities, and separate from stored medications and food? 1304.53 a 10 iii						
13. Are all decorative materials such as curtains, drapes, hangings, cardboard, canvas, plastic partitions/half walls or any other combustible decorative material flame retardant/treated? CFC 2501.5						
14. Do decorative materials or postings not block or conceal any exit door, exit lights, fire alarm, hose cabinet, or fire extinguisher, or electrical panel? CFC 2501.5						

Site	Grantee Review Date:			Delegate Agency Follow-up Review Date:		
	Compliant Yes No		Comments	Compliant Yes No		Comments
15. Is there a maximum of 25% of wall area used for decorative materials that are not flame retardant/treated? (If more than 25% of wall is used, all materials on the wall must be fire retardant treated.)						
16. Are classroom decorations, (bulletin boards children's art work, etc.) a minimum of four (4) feet away from the corner of any adjoining wall and from any exit?						
17. Is there no paper posted on exit doors?						
18. Are the garbage and trash covered (exception – mealtime) and stored and disposed of in a safe, sanitary manner? 1304.53 a 10 xvi						
19. Is the trash stored away from heaters or other heat sources?						
20. Are napping mats stored in a sanitary manner, not touching and bedding is laundered <u>weekly</u> ? (Licensing law)						
21. Are floors smooth and have nonskid surfaces? If there are rugs, are they skid-proof, nailed or taped down?						
22. Are there doors to places that children can enter, such as bathrooms, can be easily opened from the outside by a child or an adult?						
23. Do doors have slow closing devices and/or rubber gaskets on the edges to prevent finger pinching?						
24. Do walls and ceilings have no peeling paint and no cracked or falling plaster?						
25. Are electrical cords out of children's reach and placed away from doorways and traffic paths?						
26. Are extension cords not used in the site/facility?						
27. Are safety covers on all electrical outlets? 1304.53 a 10 xi						
28. Are the covers or guards for fans have openings small enough to keep children's fingers out?						
29. Are there no free-standing space heaters used in the site/facility?						
30. Are pipes and other hot surfaces not capable of being reached by children or are covered to prevent burns?						
31. Are there no smoking, lighted cigarettes, matches or lighters around children?						
32. Are drawers closed to prevent tripping or bumps?						

Site	Grantee Review Date:			Delegate Agency Follow-up Review Date:		
<b>Indoor Environment (Cont...)</b>	Compliant		Comments	Compliant		Comments
	Yes	No		Yes	No	
33. Do all exits /entry pathways maintain a minimum 3ft. clearance?						
34. Can adults easily view and supervise all areas used by children?						
35. Is the "Animals in the Classroom Policy" followed?						
36. Are poisonous plants not present in the site/facility?						
37. Are pull cords for blinds out of reach of children and knot-free?						
38. Are all adult handbags stored out of children's reach?						
39. Are stable step stools available where needed?						
40. Is there a child-accessible supply of drinking water?						
<b>EHS Only</b>						
41. Is the diaper changing area located away from areas used for cooking, eating, or children's activities? 1304.22 a 10xiv						
42. Are diapers being disposed of in a safe sanitary manner?1304.53 a 10 xiv						
43. Do infant sleeping arrangements use firm mattresses and soft bedding materials such as comforters, pillows, fluffy blankets or stuffed toys avoided? 1304.53 b 3						
44. Are cribs and cots at least three feet apart from each other? 1304.22 e 7						
45. Are infant toys made of non-toxic materials and are sanitized regularly?1304.53 b 2						
46. Are nonporous gloves available for use when dealing with bloody and other bodily fluids (mucus, feces, vomit)?1304.22 e 3						
47. Are toys, materials, and furniture safe, durable, and kept in good condition ? ? (e.g., materials free of sharp edges and loose pieces, balloons and/or plastic bags not used, no chocking hazards). 1304.53 b 1 vi						

Site	Grantee Review Date:			Delegate Agency Follow-up Review Date:		
Indoor Environment (Cont...) (EHS)	Compliant Yes No		Comments	Compliant Yes No		Comments
48. Do staff, volunteers and children wash their hands with soap and running water after diapering or toilet use; before food-related activities; whenever hands are contaminated with blood or other bodily fluids; and after handling pets or other animals? Do staff and volunteers also wash their hands with soap and running water before and after giving medications, before and after treating or bandaging a wound, and after assisting a child with toilet use? 1304.22 e						
49. Is a utility sink specifically used to clean portable potties? 1304.22 e 6 (N/A permitted)						
50. Is there an absence of highly flammable furnishings, decorations, or materials that emit toxic fumes? 1304.53 a 10 ii						
51. Are facilities available for a proper storage of breast milk and formula (with a thermometer)? Is breast milk/formula milk labeled? Is the milk temperature appropriate for safe consumption?						

<u>Site</u>	<u>Grantee Review Date:</u>		<u>Delegate Agency Follow-up Review Date:</u>			
<u>Outdoor Environment</u>	<u>Compliant</u> Yes No		<u>Comments</u>	<u>Compliant</u> Yes No		<u>Comments</u>
1. Are the outdoor premises cleaned daily and kept free of undesirable and hazardous materials (litter, etc.) and condition (no standing pools of water, sandbox free of debris, etc.)? 1304.53 a 10 viii						
2. Are outdoor areas arranged to prevent children from leaving premises or getting into unsafe or unsupervised areas? 1304.53 a 9						
3. Is the playground equipment in good repair and safe condition, the layout minimizes possibility of injury to children and is accessible to children with disabilities (e.g. adequately secured to the ground, free of sharp edges and/or splinters, soft falling surface, wheelchair accessible)? 1304.53 a 7, a 10 x; xvii						
4. Are exposed concrete or hard anchoring materials covered?						
5. Is soft material under playground equipment (sand, bark, etc.) a minimum of 12 inches deep.? If used, is the rubber surface installed by licensed professional?						
6. Are tree branches trimmed to ensure they do not intrude upon play area? (maintain 7ft clearance around play equipment)						
7. Do the playground slide have an enclosed section at the top for children to rest on and get into position?						
8. Do slides have a flat surface at the bottom to slow children down and bottom of slide is no more that 11 inches high?						
9. Do slide ladders have flat steps/rungs and a handrail on each side?						
10. Are the bike or trike riding areas separate from other equipment?						
11. Are sheds properly used and arranged? 1304.53 b 1 vii						
12. Are play areas free of trash and poisonous plants or berries?						
13. Are play areas free of tripping hazards( tree roots, holes, exposed equipment anchoring devices) >						
14. Are play areas easily viewed and supervised?						
15. Is there a source of drinking water accessible to children?						



## **Disabilities**

### **Program Design and Management**

- A. Staffing and Training
- B. Monitoring Procedures
- C. Systems

### **Providing Services**

- A. Confidentiality and Screens
- B. Pre-Individualized Education Plan
- C. Individualized Education Plan
- D. Follow-up
- E. Classroom
- F. Environment

### **Tools**

Disabilities File Review  
Overall Disabilities Summary

Standards: 1304.20 c 4, f; 1304.21 a 1 ii; 1304.23 a 2; 1304.24 a 3 iii; 1304.41 a 4; 1304.53 a 10 xvii, b 1 iii; 1308

## Disabilities

### A. Staffing and Training

1304.52(a)(2)(ii); 1304.52(d)(2) ;1304.52(k)(2); 1304.52(k)(3); 1306.23(a)

<u>Program Design and Management</u>	<u>Grantee Review Date:</u>		<u>Delegate Agency Follow-up Review Date:</u>	
	<u>Compliant</u> Yes No		<u>Compliant</u> Yes No	
	<u>Comments</u>		<u>Comments</u>	
1. Are management functions for disabilities services formally assigned to and adopted by a staff person or persons?				
2. Do the staff and consultants assigned to support disabilities services have training and experience in public health, nursing, health education, maternal and child health, or health administration?				
3. Does the grantee and delegate provide opportunities for ongoing training and development for all staff who provide disabilities services?				

### B. Monitoring Procedures

1304.51(i)(2)

<u>Program Design and Management</u>	<u>Grantee Review Date:</u>		<u>Delegate Agency Follow-up Review Date:</u>	
	<u>Compliant</u> Yes No		<u>Compliant</u> Yes No	
	<u>Comments</u>		<u>Comments</u>	
1. Can the program demonstrate that it has established and implemented procedures for ongoing monitoring of disabilities services to ensure effective implementation of federal regulations?				

### C. Systems

<u>Program Design and Management</u>	<u>Grantee Review Date:</u>		<u>Delegate Agency Follow-up Review Date:</u>	
	<u>Compliant</u> Yes No		<u>Compliant</u> Yes No	
	<u>Comments</u>		<u>Comments</u>	
1. Is there an annually updated disabilities service plan (that includes parent input) that guides the program's efforts to meet the special needs of children with disabilities and include them and their families in the full range of Head Start activities and services.? (N/A for EHS)				
2. Is there an action plan to recruit children with a variety of disabilities? (As indicated in disabilities eligibility criteria; health, emotional/behavioral, speech/ language, mental retardation, hearing, orthopedic, learning disabilities, traumatic brain injury, other)				
3. Is there a written evidence of collaboration with other agencies, with a clear description of how and by				

whom services will be delivered? (Interagency agreements updated annually.)					
---	--	--	--	--	--

**Disabilities**

1304.20 c 4, f; 1304.21 a 1; 1304.23 a 2; 1304.24 a 3; 1304.41 a 4; 1304.53 a 10, b 1; 1308

**A. Confidentiality and Screens**

<b><u>Disabilities</u></b>	<b><u>Grantee Review Date:</u></b>		<b><u>Delegate Agency Follow-up Review Date:</u></b>	
	<b><u>Compliant</u></b> Yes No	<b><u>Comments</u></b>	<b><u>Compliant</u></b> Yes No	<b><u>Comments</u></b>
1. Is there a system (sign out log and a locked cabinet) to ensure confidentiality and is it implemented?				
2. * Are all developmental screens completed within 45 days of enrollment?				
3. * Do all subsequent developmental screens occur within 30 days of birthday? (SOP only). (N/A permitted)				
4. Are all children's ongoing assessments completed within given time frames? (EHS only)				
5. * Are all speech and language screens completed within 45 days of enrollment?				
6. * Are all behavioral/social/emotional screens completed within 45 days of enrollment?				
7. Are necessary re-screens completed in a timely manner? (As defined by program guidelines). (N/A permitted)				

\* Unless there is valid documentation as to why not. Valid documentation may include a child who has a valid reason for not being available to screen such as documented excused absence, etc.  
 REVIEW – Children's files

**B. Pre- Individualized Education Plan/Individualized Family Service Plan**

<b><u>Disabilities</u></b>	<b><u>Grantee Review Date:</u></b>		<b><u>Delegate Agency Follow-up Review Date:</u></b>	
	<b><u>Compliant</u></b> Yes No	<b><u>Comments</u></b>	<b><u>Compliant</u></b> Yes No	<b><u>Comments</u></b>
1. Are requests for (follow-up) services initiated in a timely manner (within 2 weeks for SOP) from re-screens, teacher observation, or parent request?				
2. Are all signed consent forms included with requests for (follow-up) services? (N/A permitted)				
3. Is there evidence that all requests for (follow-up) services processed to LEA (SCOE, ALTA for EHS) within a timely manner (20 calendar days for SOP)? (N/A permitted)				
4. Is there evidence of cross-content (health,				

nutrition, education, disabilities, etc.) integration and cooperation when necessary? (e.g. Full team reviews and or staffing, etc.). <i>(N/A permitted)</i>					

**Pre-Individualized Education Plan/Individualized Family Service Plan**

<b><u>Disabilities</u></b>	<b><u>Grantee Review Date:</u></b>			<b><u>Delegate Agency Follow-up Review Date:</u></b>		
	<b><u>Compliant</u></b> Yes	<b><u>No</u></b>	<b><u>Comments</u></b>	<b><u>Compliant</u></b> Yes	<b><u>No</u></b>	<b><u>Comments</u></b>
5. Is there documentation that the IEP/IFSP process and parents rights been explained to all parents by informed staff? (Interpreters are used when necessary). <i>(N/A permitted)</i>						
6. Are all parents notified of upcoming IEP/IFSP meetings or reviews (i.e. family contact log, meeting notifications, and/or signed IEPs)? <i>(N/A permitted)</i>						
7. Is there evidence that staff were notified of upcoming IEP/IFSP meetings (unless IEP/IFSP took place prior to enrollment).? (i.e. contact logs, meeting notification, staff signature)						

**C. Individualized Education Plan/ Individualized Family Service Plan**

<b><u>Disabilities</u></b>	<b><u>Grantee Review Date:</u></b>			<b><u>Delegate Agency Follow-up Review Date:</u></b>		
	<b><u>Compliant</u></b> Yes	<b><u>No</u></b>	<b><u>Comments</u></b>	<b><u>Compliant</u></b> Yes	<b><u>No</u></b>	<b><u>Comments</u></b>
1. Do all IEP's take place within 60 days of parent's signature on assessment form and IFSP's within 45 days (with legal exceptions)?						
2. Are there current, legible copies of the IEP in the child's file?						
3. Are all IEP/IFSPs complete including: present level of functioning, long and short term goals, persons responsible for delivery of services, projected dates for initiation and duration of services, review date, and parent signature? (components may vary with IFSP's)						
4. Do all IEP/IFSPs include Head Start staff signature (unless IEP/IFSP took place prior to enrollment or there is valid documentation as to why not)?						

**Individualized Education Plan/ Individualized Family Service Plan Continued**

<b>Disabilities</b>	<b>Grantee Review Date:</b>			<b>Delegate Agency Follow-up Review Date:</b>		
	<b>Compliant</b> Yes No	<b>Comments</b>		<b>Compliant</b> Yes No	<b>Comments</b>	
5. For children who entered Head Start/Early Head Start with an IEP/IFSP, were they completed within 2 months prior to enrollment, and did services begin within 2 weeks of enrollment (or valid documentation of attempts to begin services by Head Start staff)? (N/A permitted)						
6. Did multi-disciplinary staffing take place prior to the beginning of services (or immediately after, if applicable)? (N/A permitted)						
7. Was an interpreter in the family's preferred language available for all IEP/IFSP meetings or reviews? (N/A permitted)						

REVIEW – Fliers, minutes, posters, etc.; REFER TO – Parent and staff interviews

**D. Follow-up**

<b>Disabilities</b>	<b>Grantee Review Date:</b>			<b>Delegate Agency Follow-up Review Date:</b>		
	<b>Compliant</b> Yes No	<b>Comments</b>		<b>Compliant</b> Yes No	<b>Comments</b>	
1. Is there evidence of workshops and/or trainings provided for parents relating to any special needs of families at least once a year?						
2. Is there evidence of a transition plan into/out of Head Start/Early Head Start for children with disabilities (i.e. IFSP, staffing notes, etc.). (N/A permitted)						
3. Is special education information (i.e. Disabilities Profile/IEP/IFSP, speech/language/ developmental screens) accurately entered into ChildPlus (SOP only) and is up-to-date?						
4. Is there evidence of cross-content (health, nutrition, education, special education., etc.) integration and cooperation when necessary? (e.g. Full team reviews and or staffings, etc.). (N/A permitted)						
5. Have all special education and early intervention services started and is there evidence that they are ongoing? (N/A permitted)						

REVIEW – Children's files, parent meeting/training documentation, ChildPlus report

**E. Classroom**

<b><u>Disabilities</u></b>	<b><u>Grantee Review Date:</u></b>		<b><u>Delegate Agency Follow-up Review Date:</u></b>	
	<b><u>Compliant</u></b> Yes No	<b><u>Comments</u></b>	<b><u>Compliant</u></b> Yes No	<b><u>Comments</u></b>
1. Are IEP/IFSP goals/outcomes evident in lesson plans and is there consistent evidence of individualization according to these goals (how activities and classroom areas are adapted)? <i>(N/A permitted)</i>				
2. Do staff adapt small group, large group, and individual activities, with any necessary modifications to enhance physical, cognitive, and language development.? <i>(N/A permitted)</i>				
3. Do staff encourage children in the classroom, both typically developing and those with special needs, to engage with other children or adults (children are not by themselves in the classroom, moving about the room aimlessly, or sitting uninvolved or waiting)?				
4. Is there a written emergency evacuation procedure for children with disabilities (one staff person is assigned to each child needing assistance), and are staff aware of their assigned responsibilities? <i>(N/A permitted)</i>				
5. Are adequate adaptive equipment and utensils available for meal times? <i>(N/A permitted)</i>				
6. Are special procedures and dietary needs prominently posted and followed? <i>(N/A permitted)</i>				

REVIEW – Lesson plans, evacuation plan, meal plan;

OBSERVE – Classroom and activities

**F. Environment**

<b><u>Disabilities</u></b>	<b>Grantee Review Date:</b>		<b>Delegate Agency Follow-up Review Date:</b>					
	<b>Compliant Yes</b>	<b>No</b>	<b>Comments</b>		<b>Compliant Yes</b>	<b>No</b>	<b>Comments</b>	
1. Are the classroom and playground (of sites with a non-ambulatory license) accessible to staff, parents and children with disabilities (i.e. ramps in good repair, furnishings not blocking pathways, etc.)? <i>(N/A permitted)</i>								
2. Does the classroom adequately reflect disabilities awareness through posters, pictures, books, toys, etc.?								
3. Does the space and facilities help promote learning (i.e. surfaces support mobility and are sound absorbing etc.)?								
4. Are adequate adaptive furniture and classroom materials available and utilized (i.e. tables, communication devices, big knob puzzles, etc.)? <i>(N/A permitted)</i>								
5. Adequate adaptive outdoor equipment is available when necessary. (i.e. wagons, swings, etc.) and is utilized. <i>(N/A permitted)</i>								
6. Is classroom adapted to allow children with significant disabilities to participate in the full range of classroom activities (all areas adapted for exploring, creating, using a wide variety of materials, participating in field trips and meal times, etc.)? <i>(N/A permitted)</i>								
7. Do staff use activities and materials to promote and reflect inclusive awareness on an ongoing basis? (i.e. disability puzzles, books, posters, photos, toys, props, etc.).								
8. Does the parent area contain adequate information on Special Education?								

OBSERVE – Classroom, furnishings and equipment



## **Mental Health**

### **Program Design and Management**

- A. Staffing and Training
- B. Monitoring Procedures
- C. System

### **Providing Services**

- A. Implementation of Mental Health Services
- B. Child Mental Health
- C. Parent/Guardian Mental Health

### **Tools**

Child Mental Health File Review  
Adult Mental Health File Review  
Mental Health Summary

## Mental Health

### A. Staffing and Training

1304.52(a)(2)(ii); 1304.52(d)(2); 1304.52(k)(2); 1304.52(k)(3); 1306.23(a)

<u>Program Design and Management</u>	<u>Grantee Review Date:</u>		<u>Delegate Agency Follow-up Review Date:</u>		
	<u>Compliant</u>		<u>Compliant</u>		
	Yes	No	Yes	No	Comments
1. Are management functions for mental health services formally assigned to and adopted by a staff person or persons?					
2. Do the staff and consultants assigned to support Mental health services have training and experience in public health, nursing, health education, maternal and child health, or health administration?					
3. Do the grantee and delegate provide opportunities for ongoing training and development for all staff who provide mental health services?					

### B. Monitoring Procedures

1304.51(i)(2)

<u>Program Design and Management</u>	<u>Grantee Review Date:</u>		<u>Delegate Agency Follow-up Review Date:</u>		
	<u>Compliant</u>		<u>Compliant</u>		
	Yes	No	Yes	No	Comments
1. Can the program demonstrate that it has established and implemented procedures for ongoing monitoring of mental health services to ensure effective implementation of Federal regulations?					

### C. Systems

<u>Program Design and Management</u>	<u>Grantee Review Date:</u>		<u>Delegate Agency Follow-up Review Date:</u>		
	<u>Compliant</u>		<u>Compliant</u>		
	Yes	No	Yes	No	Comments
1. Does the program maintain a Written Service Plan for Mental Health that serves as a working document to adequately reflect the services provided? (may be included in the Child Health and Development Plan as well as the Family Partnership Plan)					

REVIEW written service plans, policy and procedures manuals, etc.  
INTERVIEW staff members

## Mental Health

### A. Implementation of Mental Health Services

1304.24(a)(2);

	Grantee Review Date:		Delegate Agency Follow-up Review Date:			
	Compliant Yes	No	Comments	Compliant Yes	No	Comments
1. Are there written policy and procedures on mental health referrals for children and families?						
2. Is there evidence of each classroom observation by mental health professional? (Minimum of 2 times/year (SETA/Sacramento County consensus for "regular/frequency")						
3. Is there evidence of meeting/case management with site staff to consult, provide guidance and discuss mental health issues?						
4. Is there evidence of utilizing outside mental health agencies?						
5. Does the program use a standardized social-emotional-behavioral screen on all children ?						
6. Is there policy and procedure for screening, identifying and following up on services needed for children?						

### B. Child Mental Health

<u>Mental Health</u>	Grantee Review Date:		Delegate Agency Follow-up Review Date:			
	Compliant Yes	No	Comments	Compliant Yes	No	Comments
1. Are referrals initiated within two weeks for children with mental health concerns? ( <i>N/A permitted</i> )						
2. Is there documentation if parents refused mental health services? ( <i>N/A permitted</i> )						
3. Are there copies of request for services form in file?						
4. Are there copies of consent for observation and assessment are in file?						
5. Is there evidence of communication between mental health professional, teaching staff and other appropriate staff on progress of child referred for services as seen on documentation of case, child's file, etc.?						

## Child Mental Health Cont...

<u>Mental Health</u>	<u>Grantee Review Date:</u>		<u>Delegate Agency Follow-up Review Date:</u>	
	<u>Compliant</u> Yes No	<u>Comments</u>	<u>Compliant</u> Yes No	<u>Comments</u>
6. Is mental health intervention in process on all children within 2 weeks from the request for services date and every 30 days thereafter?				
7. Is there evidence of written follow-up services to center staff every 30 days as to the progress of original request for services?				
8. Is mental health intervention documented on all children needing mental health services.? (i.e. social worker/consultant) <i>(N/A permitted)</i>				

## C. Parent/Guardian Mental Health

<u>Mental Health</u>	<u>Grantee Review Date:</u>		<u>Delegate Agency Follow-up Review Date:</u>	
	<u>Compliant</u> Yes No	<u>Comments</u>	<u>Compliant</u> Yes No	<u>Comments</u>
1. Are there adequate opportunities for parents to discuss mental health issues with program staff?				
2. Are phone numbers and hours of availability of Social Workers or mental health professionals clearly posted at the site?				
3. Is there evidence that parents are involved in planning and implementing mental health interventions for their children. (signed consent, Child Study Team Meetings, staffing meetings, etc.)? <i>(N/A permitted)</i>				
4. Do parent/sguardians who requested mental health services have referrals? <i>(N/A permitted)</i>				
5. Are there opportunities for parent education on maternal mental health needs of pregnant women? <i>(EHS programs only)</i>				

# **Family and Community Partnerships**

## **Program Design and Management**

- A. Staffing and Training
- B. Monitoring Procedures
- C. System

## **Providing Services**

### **Family Partnership Building**

- A. Family Partnership Agreements
- B. Family Partnership Agreements Follow-up

### **Parent Involvement**

- A. Parent Meetings and Trainings
- B. Parent Information Area
- C. Parent Volunteer Activities
- D. Transition

## **Community Partnerships**

- A. Site Implementation of Community Partnerships

## **Tools**

Family Partnership Agreements File Review

**Family and Community Partnerships**

**A. Staffing and Training**

1304.52(a)(2)(ii); 1304.52(d)(2) ;1304.52(k)(2); 1304.52(k)(3); 1306.23(a)

<b><u>Program Design and Management</u></b>	<b><u>Grantee Review Date:</u></b>		<b><u>Delegate Agency Follow-up Review Date:</u></b>		
	<b><u>Compliant</u></b> Yes No		<b><u>Compliant</u></b> Yes No		<b><u>Comments</u></b>
1. Are management functions for Family and Community Partnership services formally assigned to and adopted by a staff person or persons?					
2. Do the staff and consultants assigned to support Family and Community Partnership services have training and experience related to social services, human services, or family services?					
3. Do the grantee and delegate provide opportunities for ongoing training and development for all staff who provide Family and Community Partnership services?					

**B. Monitoring Procedures**

1304.51(i)(2)

<b><u>Program Design and Management</u></b>	<b><u>Grantee Review Date:</u></b>		<b><u>Delegate Agency Follow-up Review Date:</u></b>		
	<b><u>Compliant</u></b> Yes No		<b><u>Compliant</u></b> Yes No		<b><u>Comments</u></b>
1. Can the program demonstrate that it has established and implemented procedures for ongoing monitoring of Family and Community Partnership services to ensure effective implementation of federal regulations?					

**C. System**

<b><u>Program Design and Management</u></b>	<b><u>Grantee Review Date:</u></b>		<b><u>Delegate Agency Follow-up Review Date:</u></b>		
	<b><u>Compliant</u></b> Yes No		<b><u>Compliant</u></b> Yes No		<b><u>Comments</u></b>
1. Does the program maintain a Written Service Plan for Family and Community Partnerships that serves as a working document to adequately reflect the services provided?					

REVIEW written service plans, policy and procedures manuals, etc.  
INTERVIEW staff members

## Family and Community Partnerships

### A. Family Partnership Building

1304.20, e; 1304.21, a, 2; 1304.40; 1304.50, a, 1; 1308.19, j; 1308.21

<u>Family Partnerships</u>	<u>Grantee Review Date:</u>		<u>Delegate Agency Follow-up Review Date:</u>	
	<u>Compliant</u> Yes No	<u>Comments</u>	<u>Compliant</u> Yes No	<u>Comments</u>
1. Do families have a complete Family Partnership Agreement in the file within 90 days (unless there is valid documentation as to why not)? (Translators used when necessary).				
2. Do FPAs have dates and signatures (unless there is valid documentation as to why not)?				
3. Are the family's immediate needs identified on the FPA?				
4. Do FPAs have identified individualized strengths of families?(i.e. not all FPAs are identical in nature).				
5. Do FPAs have identified person(s) responsible for follow-up?				
6. Do FPAs reflect individualized goals that are respectful of the family's diversity and cultural background? (i.e. not all FPAs are identical in nature or are marked "No services needed at this time"				
7. Do FPAs reflect clear and obtainable strategies or steps to be used by staff to help families achieve noted goals? (Long term goals are broken down into some steps that are obtainable while the family is in Head Start)				
8. Do FPAs have appropriate timetables set by staff (timetables are broken down and obtainable within the program year)?				
9. Do FPA's adequately incorporate any pre-existing plans or agreements, within the program or from an outside agency? (N/A permitted)				

REVIEW – Family Partnership Agreements

**B. Family Partnership Agreements Follow-up**

<b><u>Family Partnerships</u></b>	<b><u>Grantee Review Date:</u></b>		<b><u>Delegate Agency Follow-up Review Date:</u></b>	
	<b><u>Compliant</u></b> Yes No		<b><u>Compliant</u></b> Yes No	
1. Do all Family Partnership Agreements show evidence of adequate staff follow-up on requests for immediate services and information.? <i>(N/A permitted)</i>				
2. Do all FPAs show adequate evidence of staff follow-up on family's stated goals and strategies? <i>(N/A permitted)</i>				
3. Do all FPAs show evidence of follow-up when families requested no services at the beginning of the year? (Minimum of every 4 months with documentation in the family contact log, FPA, etc.). <i>(N/A permitted)</i>				
4. Is there evidence of collaboration with outside agencies as a result of needs and goals noted on the FPA? <i>(N/A permitted)</i>				
5. Do families receive adequate follow-up to ensure that referrals (internal and/or to outside agencies) met their needs and expectations? <i>(N/A permitted)</i>				
6. Have staff helped all families set new goals when previous goals have been met or there is valid documentation as to why not? <i>(N/A permitted)</i>				
7. Are all needs and/or information requested by families addressed on other forms of communication? (e.g. Nutrition History, Health History, contact notes) .				

REVIEW – Family Partnership Agreements, Revisions, and Family Contact Log

**Parent Involvement**

1304.20 e 4; 1304.23 d; 1304.24 a i; 1304.40 b-d; 1304.40 h; 1308.19 j; 1308.21,1310.21

**A. Parent Meetings and Training**

<b><u>Parent Involvement</u></b>	<b>Grantee Review Date:</b>			<b>Delegate Agency Follow-up Review Date:</b>		
	<b><u>Compliant</u></b> Yes No	<b>Comments</b>		<b><u>Compliant</u></b> Yes No	<b>Comments</b>	
1. Is there consistent documentation of regular parent meetings in one centralized location? (agendas, sign-in sheets and minutes)						
2. Is there a Parent Committee comprised of parents of enrolled children?						
3. Is there consistent, up-to-date documentation of parent trainings? (i.e. sign-in sheets, flyers, agendas, etc.)						
4. Are written methods of communication between families and staff ongoing and consistent?(i.e. regular newsletters, class calendars, announcements, etc.)						
5. Is the content of parent meetings and trainings reflective of the needs of the families as identified on the Family Partnership Agreements?						
6. Is Pedestrian Safety training provided for all families within the first 30 days of the program year?						
7. Is there evidence that staff provide information for families (parent meetings, trainings, workshops) on the following when requested:						
<i>Literacy</i>						
<i>Health, safety and dental</i>						
<i>Mental health/child abuse and neglect</i>						
<i>Transition</i>						
<i>Curriculum</i>						
<i>Nutrition</i>						
<i>Parenting and child development</i>						
<i>Disabilities</i>						

REVIEW – Parent meeting binders

**B. Parent Information Area**

<b><u>Parent Involvement</u></b>	<b><u>Grantee Review Date:</u></b>			<b><u>Delegate Agency Follow-up Review Date:</u></b>		
	<b>Compliant</b>			<b>Compliant</b>		
	<b>Yes</b>	<b>No</b>	<b>Comments</b>	<b>Yes</b>	<b>No</b>	<b>Comments</b>
1. Is there a well defined parent information area that is accessible to all parents?						
2. Is there up-to-date and accessible information on services available to children and families?						
3. Are there various opportunities for families to provide feedback on Head Start and other community services? (i.e. suggestion box, forms, parent meetings, etc.).						
4. Is there complete and up-to-date information in the parent area (i.e. parent board, binders, books, pamphlets, etc.) available in the language of the population served including:						
<i>Employment, literacy, and education</i>						
<i>Health, safety and dental</i>						
<i>Mental health/child abuse and neglect</i>						
<i>Transition</i>						
<i>Disabilities (including special education handbook)</i>						
<i>Nutrition</i>						
<i>Parenting and child development</i>						

REVIEW – Parent area at the site

**C. Parent Volunteer Activities**

<b><u>Parent Involvement</u></b>	<b>Grantee Review Date:</b>			<b>Delegate Agency Follow-up Review Date:</b>		
	<b>Compliant</b> Yes No	<b>Comments</b>		<b>Compliant</b> Yes No	<b>Comments</b>	
1. Is there a variety of opportunities for families to volunteer?						
2. Are there a variety of methods used for recruiting families as volunteers?						
3. Is there documentation of various strategies used to recruit parents for staff positions? (i.e. parent meeting agendas, job announcements posted in parent areas, etc.).						
4. Is there evidence of training for parent volunteers? (i.e. parent training agenda, sign-in sheet, etc.).						
5. Are all families greeted, treated with respect and made to feel welcome in the classroom/ center?						
6. Is the classroom/center environment welcoming to all families? (welcome sign, culturally relevant items displayed, etc.).						

**D. Transition**

<b>Parent Involvement</b>	<b>Grantee Review Date:</b>			<b>Delegate Agency Follow-up Review Date:</b>		
	<b>Compliant</b> Yes No		<b>Comments</b>	<b>Compliant</b> Yes No		<b>Comments</b>
1. Is there evidence that information has been shared with families on transition services at the site (i.e. flyers, school district requirements, IDPs, etc.). (minimum 3 times/program year)						
2. Is there evidence that families have been given support when transitioning from one program option to another ? (introducing staff, visiting location, parent meetings, FPAs, etc.). (N/A permitted)						
3. Is there evidence of communication at the site level between Head Start and school district staff? (PTA meetings, Back to School Night postings, parent meetings, etc.) (HS Only)						
4. Is there documentation that families have been provided the registration dates for their elementary school of attendance. (N/A permitted; HS Only)						
5. Is there documentation that transition materials (pertinent child files) are being provided for families when they transition to and from Head Start/Early Head Start?(originals left in file).						
6. Is there evidence that children with special needs have been provided with transition plans especially designed for them?						
7. Is there a transition plan in place for children that begins at 2 years 6 months old moving into Head Start or another preschool setting by age 3? (EHS Only)						

REVIEW – Site Transition Plan, minutes, fliers, staff interview, etc.

**Community Partnerships**

1304.20 a, b, d, f; 1304.21 a, c; 1304.23 b; 1304.40

**A. Site Implementation of Community Partnerships**

<b><u>Community Partnerships</u></b>	<b><u>Grantee Review Date:</u></b>		<b><u>Delegate Agency Follow-up Review Date:</u></b>		
	<b><u>Compliant</u></b> Yes No	<b><u>Comments</u></b>	<b><u>Compliant</u></b> Yes No	<b><u>Comments</u></b>	
1. During the program year, does teaching staff include classroom activities that utilize collaboration with other agencies? (e.g. visits from nurse, doctor, dentist, firefighter, field trips, etc.).					
2. Are all files of children requiring disability services reflect a continuing supportive relationship between the early intervention agencies/ LEA and Head Start/Early Head Start? (IEP/IFSPs are in files, a Head Start staff person attended the IEP/IFSP meeting, and service delivery is cooperative and ongoing). (N/A permitted)					
3. Are there opportunities for families and staff to meet with elementary school staff to facilitate continuity of services.?(HS Only)					
4. Is there evidence in the parent area, at parent meetings and trainings or as a result of needs or goals on Family Partnership Agreements of adequate collaboration between community agencies and parents in the following areas: (N/A permitted)					
<i>Nutrition ( WIC, etc.)</i>					
<i>Health Services (physicians, dentists, etc.)</i>					
<i>Mental Health providers (WEAVE, Child Protective Services, etc.)</i>					
<i>Elementary schools, libraries, museums, etc.</i>					
<i>Community providers of child care services (resource and referral organizations, public and private child care programs, etc.).</i>					
<i>Disability services</i>					

REVIEW – Lesson Plans, agendas, fliers, minutes, FPAs, parent areas, Health Binder



# **Education and Early Childhood Development**

## **Program Design and Management**

- A. Staffing and Training
- B. Monitoring Procedures
- C. Systems
- D. Classroom Group Size and Ratios

## **Providing Services**

### **Individualization**

- A. Screens and Assessments
- B. Written Implementation
- C. Classroom Implementation of Individualization

### **Curriculum**

- A. Daily Schedule
- B. Lesson Plans
- C. Indoor Environment – Space and Furnishings
- D. Indoor Environment – Materials and Displays
- E. Classroom Interactions – Cognitive & Language
- F. Classroom Interactions – Social & Emotional
- G. Outdoor Environment.

## **Tools**

Education File Review  
Overall Education Summary

**Program Design and Management**

**A. Staffing and Training**

**1304.52(a)(2)(ii); 1304.52(d)(2) 1304.52(e); 1304.52(k)(2); 1304.52(k)(3); 1306.23(a)**

<b><u>Program Design and Management</u></b>	<b><u>Grantee Review Date:</u></b>			<b><u>Delegate Agency Follow-up Review Date:</u></b>		
	<b><u>Compliant</u></b>		<b><u>Comments</u></b>	<b><u>Compliant</u></b>		<b><u>Comments</u></b>
	<b>Yes</b>	<b>No</b>		<b>Yes</b>	<b>No</b>	
1. Are management functions for childhood development and education services formally assigned to and adopted by a staff person or persons?						
2. Do the staff and consultants assigned to support education services have content area expertise and provide ongoing oversight?						
3. Do teachers have the required education, training and experience in accordance with the Head Start Act? (Minimum Teacher Permit)						
4. Do teachers who work with infants and toddlers have required education, training and experience? (Infant toddler units)						
5. Do home visitors have the required knowledge and experience? (EHS and Preschool)						
6. Is there a minimum of two paid staff assigned to each classroom? ( <i>Preschool only</i> )						
7. Are parent volunteers always supervised by paid teaching staff?						
8. Do the grantee and delegate provide opportunities for ongoing training and development for all staff who provide early childhood development services?						

**B. Monitoring Procedures**

**1304.51(i)(2)**

<b><u>Program Design and Management</u></b>	<b><u>Grantee Review Date:</u></b>			<b><u>Delegate Agency Follow-up Review Date:</u></b>		
	<b><u>Compliant</u></b>		<b><u>Comments</u></b>	<b><u>Compliant</u></b>		<b><u>Comments</u></b>
	<b>Yes</b>	<b>No</b>		<b>Yes</b>	<b>No</b>	
1. Can the program demonstrate that it has established and implemented procedures for ongoing monitoring of education services to ensure effective implementation of Federal regulations?						

**System**

**1303.51 (a)(2)**

<b>Program Design and Management</b>	<b>Grantee Review Date:</b>		<b>Delegate Agency Follow-up Review Date:</b>	
	<b>Compliant</b> Yes No	<b>Comments</b>	<b>Compliant</b> Yes No	<b>Comments</b>
1. Does the program maintain a Written Service Plan for Education and Early Childhood Development that serves as a working document to adequately reflect the services provided?				

**D. Classroom group size and Ratios**

**1306.32 a**

<b>Education and Early Childhood Development</b>	<b>Grantee Review Date:</b>		<b>Delegate Agency Follow-up Review Date:</b>	
	<b>Compliant</b> Yes No	<b>Comments</b>	<b>Compliant</b> Yes No	<b>Comments</b>
1. Are Head Start classrooms serving a group size of no more than 20 children when predominate age (more than half) of the children are 4 and 5 years old: no more than 17 children when predominate age of children is 3 years of age? (unless an ACF approved waiver is obtained for State Collaborations- no more than 24 with waiver) <i>(Preschool only)</i>				
2. Are Early Head Start classrooms serving a group size of no more than 8 infants/toddlers (physical barrier must separate groups) with 1 teacher having responsibility for no more than 4 infants/toddlers?				
3. For centers operating double session classes, when 1 teacher teaches two different groups of children (AM and PM), do they maintain a group size of no more than 17 children when predominate age is 4 and 5 years of age; group size of 15 when predominately 3 years of age? <i>(Preschool only)</i>				
4. Are large classrooms licensed for more than 20 children, maintain a physical barrier separating groups of 20 to ensure proper group size is maintained? (unless a waiver is obtained for State Collaborations- no more than 24 with waiver) <i>(Preschool only)</i>				
5. Is appropriate teacher/child ratio maintained at all times? Head Start 1:10 Early Head Start 1:4				
6. Are children within sight and sound of teaching staff at all times? Is teacher's attention focused on observing the children, not on other activities? (LIC)				

*OBSERVE* in the classroom  
*REVIEW* written service plans, policy and procedures manuals, class roster of children  
*INTERVIEW* staff members

**Individualization**

1304.20 a, b, d, f; 1304.21 a, c; 1304.23 b; 1304.40 a

**A. Screens and Assessments**

<b><u>Education and Early Childhood Development</u></b>	<b>Grantee Review Date:</b>			<b>Delegate Agency Follow-up Review Date:</b>		
	<b>Compliant</b>			<b>Compliant</b>		
	<b>Yes</b>	<b>No</b>	<b>Comments</b>	<b>Yes</b>	<b>No</b>	<b>Comments</b>
7. * Are developmental screens completed within 45 days of enrollment?						
8. *Do subsequent developmental screens occur within 30 days of birthday? (SOP HS only). (N/A permitted)						
9. *Are speech and language screens completed within 45 days of enrollment?						
10. *Are behavioral social/emotional screens completed within 45 days of enrollment? (DECA > than 30 days <45 days)						
11. Are appropriate request for services follow up and re-screens completed in a timely manner? (N/A permitted)						
12. * Do children have several dated, ongoing, objective observations linked to curriculum and assessments?						
13. *Are children's assessments completed within given time frames? (Time frames support ongoing assessment of children's progress used to plan activities)						
14.* Is assessment information used on a consistent basis to plan individualized activities for children?						

\* Valid documentation needed if screenings/assessments are not complete. Valid documentation may include a child who has a valid reason for not being available to screen such as documented excused absence, etc.

REVIEW – Children’s education files, screening and assessment tools

**B. Written Implementation**

<b>Education and Early Childhood Development</b>	<b>Grantee Review Date:</b>			<b>Delegate Agency Follow-up Review Date:</b>		
	<b>Compliant</b> Yes No		<b>Comments</b>	<b>Compliant</b> Yes No		<b>Comments</b>
15. Are Individual Development Plans (IDPs) completed within given time frames ?(unless there is valid documentation as to why not).						
16. Do DPs include some information in all developmental areas: cognitive, social/ emotional, and physical?						
17. Do IDPs include specific, individualized strengths, goals and strategies? Do the strategies and goals build on the child's noted strengths and/or developing skills?						
18. Is the information on the IDPs clearly consistent with observations and assessments?						
19. Do lesson plans show clear evidence of individualization according to IDPs, IEPs, children's interests and progress of groups of children? (classroom reports - HS).						
20. Is there clear and consistent evidence that parents are encouraged to contribute to observations (formally or informally), assessments or in planning (IDP) process?						
21. Are home visits/parent conferences up-to-date within given time frames to meet a minimum of 2 parent conferences and 2 home visits per program year (unless there is valid documentation as to why a conference substituted for a home visit or they are not completed on time)? ( <i>Center-based option only</i> )						
22. Are all home visits up to date ( one per week) or there is valid documentation as to why not? Minimum of 32 per year with 2 socializations that include activities for children and parents. ( <i>Home-based option only</i> )						
23. Is there evidence of daily communication between parents and staff. (i.e. daily information exchange.) ( <i>EHS center based only</i> )						
<p>REVIEW – Individual Development Plans, Lesson Plans</p>						
<p><b><u>C. Classroom Implementation of Individualization</u></b></p>						

<b>Education and Early Childhood Development</b>	<b>Grantee Review Date:</b>		<b>Delegate Agency Follow-up Review Date:</b>	
	<b>Compliant</b>		<b>Compliant</b>	
	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>
	<b>Comments</b>		<b>Comments</b>	
1. Do staff interactions with children vary clearly with the developmental level, home experiences, parent input, interests, temperament, learning style, language, IDP / IEP, IFSP, etc.?				
2. Are adults who speak the home language of all of the children readily available (minimum-by phone)?				
3. Are children often encouraged to explore, make choices and learn by investigation, in a rich, stimulating environment?				
4. Is there a variety of developmental activities offered that enable all children to develop emerging skills and practice existing skills, as reflected in IDPs / IEPs, IFSP's etc.?				
5. Is the daily schedule flexible in response to children's individual or group needs.?( <i>Center-based option only</i> )				
6. Do staff demonstrate overall understanding of how the program individualizes for children and families?				

*OBSERVE* – Classroom environment and staff – child interactions; Refer to the IDP's of children

# Curriculum

1304.21; 1304.40 e-f; 1304.23 b, c; 1308.4

**NOTE: The following section will be used for Head Start Pre-school - EHS will use the Infant/Toddler Rating Scale.**

## A. Daily Schedule

<u>Education and Early Childhood Development</u>	<u>Grantee Review Date:</u>		<u>Delegate Agency Follow-up Review Date:</u>	
	<u>Compliant</u>		<u>Compliant</u>	
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>
	<u>Comments</u>		<u>Comments</u>	
1. Is a daily schedule posted, available to parents and generally followed?				
<b><u>Do the daily schedule and classroom activities reflect:</u></b>				
2. A planned balance of large group (large group time length is appropriate to the developmental level of the children), small group and individual activities indoors and out?				
3. A balance of adult directed and child initiated activities throughout the day (numerous opportunities for children to make choices)?				
4. Adequate time (minimum ½ hr. outside time) for large and small motor activities throughout the day (indoors and out)?				
5. Variations made in schedule to allow for spontaneous learning experiences and to meet individual needs or interests of children, (i.e. shorter group time for child with short attention span; child working on project allowed to continue past scheduled time; slow eater may finish at own pace)?				
6. Routines and transitions are timely, (enough time is allowed for clean up, etc.), predictable, consistent, and smooth, with minimal waiting times. Children are given notice about changes and know what will happen next?				
7. Nap/rest time is appropriately scheduled and relaxing (e.g. shoes off, soft toys, music, quiet, dim lights, cots placed for privacy)? Do staff attempt to comfort children who need help relaxing? (N/A permitted)				

REVIEW –Lesson Plans  
OBSERVE in the classroom

## **B. Lesson Plans**

<b><u>Education and Early Childhood Development</u></b>	<b><u>Grantee Review Date:</u></b>		<b><u>Delegate Agency Follow-up Review Date:</u></b>			
	<b><u>Compliant</u></b> Yes No		<b><u>Comments</u></b>	<b><u>Compliant</u></b> Yes No		<b><u>Comments</u></b>
1. Are current lesson plans posted and/or visible in the classroom (and generally followed)? Are all previous lesson plans available for current year?						
<b><u>Do lesson plans and classroom activities reflect:</u></b>						
2. Activities that are consistent, varied, and developmentally appropriate to the children in the classroom?						
3. Clear written evidence of individualization according to IDPs, IEPs, children's interests, etc. ? (Some system of identifying how group and/or individual needs are met through planned activities).						
4. Evidence of various opportunities for parent input into planning and implementation of curriculum?						
5. A variety of opportunities for creative self expression (art, dramatic play, music and movement, writing)?						
6. Consistent inclusion of health and safety, mental health, and nutrition activities (i.e. books, music, dramatic play, cooking/food prep, disaster, fire, non-smoking, etc.)?						
7. Clear and consistent inclusion of a variety of literacy activities (books, rhymes, finger plays, different methods of story telling, etc.)?						
8. Clear and consistent inclusion of a variety of numeracy, science and social studies activities?						
9. Activities that prepare children to transition into <u>and</u> out of Head Start, or from one program to another (i.e. field trip to local kindergarten, increasing length and types of activities, etc.)?						
10. Identified curriculum goals and objectives to be emphasized during the week?						
11. Evidence of required transportation and pedestrian safety education of children and parents are being provided within the first thirty days of the program year and as needed for new enrollees?						

REVIEW – Individual Development Plans, Lesson Plans

### **C. Indoor Environment – Space and Furnishings**

<b>Education and Early Childhood Development</b>	<b>Grantee Review Date:</b>			<b>Deleqate Agency Follow-up Review Date:</b>		
	<b>Compliant</b>		<b>Comments</b>	<b>Compliant</b>		<b>Comments</b>
	<b>Yes</b>	<b>No</b>		<b>Yes</b>	<b>No</b>	
1. Is the space reasonably clean and well maintained (i.e. floors mopped, trash covered and emptied regularly, restrooms clean and free of odor, etc.)?						
2. Are there sufficient furnishings and equipment that are attractive, child sized, clean and in good repair?						
3. Is there adequate space organized into at least 5 functional areas, clearly defined by low furniture and shelves and easily recognizable by children? (Art, block, housekeeping, manipulative, and reading/writing area, minimum).						
4. Are activity areas logically located (near necessary resources, noisy areas separated from quiet)?						
5. Does the location of activity areas encourage compatible play (i.e. house area is close to block area, etc.)?						
6. Do traffic patterns discourage running, yet allow children to move easily from one activity to another? Are all areas easily supervised?						
7. Is open shelving accessible to children, neat, consistently labeled and organized for independent use by children.? Are storage areas orderly?						
8. Are several soft (clean and fire proofed) elements included in the environment such as floor coverings, cushions, non-poisonous plants and table cloths?						
9. Is there adequate space available for all children's personal belongings?						

*OBSERVE* – Classroom environment

## D. Indoor Environment – Materials & Displays

<b>Education and Early Childhood Development</b>	<b>Grantee Review Date:</b>		<b>Delegate Agency Follow-up Review Date:</b>			
	<b>Compliant</b> Yes No		<b>Comments</b>	<b>Compliant</b> Yes No		<b>Comments</b>
1. Do classroom displays (posters, pictures) and materials (dolls, books, etc.) reflect diverse cultures, different family compositions, genders, abilities and languages of children?						
2. Is there adequate, developmentally varied (range from simple to complex), and relevant materials and supplies so that all children have choices and numerous opportunities for success?						
3. Do equipment and materials support both large (easels, block, dress-up clothes) and small motor activities?						
4. Are there adequate classroom displays (posters, pictures) and materials (books, games, puzzles) that reflect health, mental health and nutrition?						
5. Are there opportunities for children to see and use functional print (labeling, signs, captions, etc.), in most areas of the classroom, with some reflecting children's home languages?						
6. Do materials offer numerous opportunities to sort, classify, sequence, count, compare, and learn functions of objects?						
7. Are there numerous reading and writing materials available, and are accessible and relevant, (journals, books, writing pads, etc.), and in more than one area of the classroom?						
8. Is there a variety of materials accessible that encourage children's communication (small figures and animals in block area, puppets, phones, tape recorders, etc.)?						
9. Is children's art work (one and two dimensional) displayed at children's level? (some posted by children)						
10. Are books, materials and displays consistently rotated to maintain interest, meet progressing developmental levels and reflect current themes?						
11. Are all interest areas available for children to independently investigate and utilize materials in them?						
12. Are there designated storage areas that are separate from the children's work areas?						

OBSERVE – Classroom environment

**E. Classroom Interactions – Cognitive and Language**

<b><u>Education and Early Childhood Development</u></b>	<b>Grantee Review Date:</b>		<b>Delegate Agency Follow-up Review Date:</b>			
	<b>Compliant</b> Yes No		<b>Comments</b>	<b>Compliant</b> Yes No		<b>Comments</b>
1. Is staff consistently interacting with children, using materials creatively and asking open-ended questions, to encourage children to talk through and extend their thinking, reasoning, problem solving, and decision making?						
2. Does staff sustain and expand children’s home language, while supporting the continued development of English? Does staff demonstrate a minimum knowledge and use of a few words of child’s home language, invite family members or someone from the community to share language and culture, etc. ? <i>(N/A permitted)</i>						
3. Does staff use a variety of methods, language, movement, music, dramatic play, drawing, writing and/or other art media to encourage children to interpret and represent their experiences, and ideas?						
4. Do staff promote interaction and language use between children (remind children to talk to and listen to one another, take turns talking, etc.)?						
5. Are children regularly encouraged to share experiences and give longer, more complex answers by staff asking “what,” “where” and “how” types of questions?						
6. Are children given numerous opportunities to link their spoken words with written language (i.e. dictation, labeling, drawings, etc.)?						
7. Is creativity promoted by encouraging children to use materials in innovative ways, make up words to songs and rhymes, etc.? Are primarily open-ended activities used?						

OBSERVE – Classroom interactions

**F. Classroom Interactions – Social and Emotional**

<b>Education and Early Childhood Development</b>	<b>Grantee Review Date:</b>			<b>Delegate Agency Follow-up Review Date:</b>		
	<b>Compliant</b> Yes No		<b>Comments</b>	<b>Compliant</b> Yes No		<b>Comments</b>
1. On arrival, is each child warmly greeted at their level and in their home language (includes receiving a brief health check)?						
2. Is diversity appropriately included as part of daily routines and activities (i.e. foods, dramatic play props, music, etc.)? Are parents encouraged to share family customs and holidays, relevant to children in classroom?						
3. Are there clear, consistent, age appropriate classroom rules and expectations, staff anticipate and prevent problems whenever possible and remind children about making positive choices?						
4. Does staff effectively handle discipline problems by stopping dangerous behavior, acknowledging feelings, helping children to explore solutions, understand consequences, encourage expression of feelings in appropriate ways, and redirecting when necessary?						
5. Does staff consistently and effectively acknowledge children's efforts, get on child's level and take time to listen? Are they aware of children's social/emotional needs and support their development in a positive way?						
6. Are there many opportunities throughout the day for children to develop self help skills (i.e. set tables, dress, clean up, etc. by themselves; environment supports independent choices and clean up )?						
7. Does staff consistently encourage and model pro-social behaviors, such as cooperating, helping and turn-taking?						
8. Does staff consistently encourage children to listen to and understand each other's feelings and rights and provide assistance with appropriate expression of emotions?						
<b>OBSERVE – Classroom interactions</b>						

## G. Outdoor Environment

Education and Early Childhood Development	Grantee Review Date:		Delegate Agency Follow-up Review Date:		
	Compliant Yes No	Comments	Compliant Yes No	Comments	Comments
1. Are playground surfaces checked daily for unsafe conditions, litter, etc., before children are allowed to go outside?					
2. Does staff supervise all areas (especially high risk areas such as climbing equipment), and consistently interact with children, expanding and enhancing learning opportunities during outside time? Are children regularly reminded of safety rules?					
3. Are staff-child ratios observed at all times outdoors? Are children within sight and sound of staff at all times?					
4. Does staff consistently rotate equipment and materials (water, paint, and bubbles, occasionally take "indoor" playthings outdoors) to provide activities that extend children's interests or support the curriculum goals/theme during outside time?					

All other aspects of Outdoor Environment will be reviewed by the Safe Environments Monitor.



## **Program Design and Management**

- A. Program Governance and Shared Decision-Making
- B. Self Assessment
- C. Ongoing Monitoring
- D. Eligibility, Enrollment, Attendance
- E. Planning
- F. Communication
- G. Record-Keeping and Reporting
- H. Human Resources

## **Program Design and Management**

### **A. Program Governance and Shared Decision-Making**

<b><u>Program Design and Management</u></b>	<b><u>Grantee Review Date:</u></b>		<b><u>Delegate Agency Follow-up Review Date:</u></b>	
	<b><u>Compliant</u></b>		<b><u>Compliant</u></b>	
	<b><u>Yes</u></b>	<b><u>No</u></b>	<b><u>Yes</u></b>	<b><u>No</u></b>
	<b><u>Comments</u></b>		<b><u>Comments</u></b>	
1. Do written policies exist that define governing body members' roles and responsibilities?				
2. Does the governing body receive monthly program reports that can readily be interpreted for them to ensure their program oversight function?				
3. Does at least 51 percent of Policy Council and Policy Committee membership comprise parents of children currently enrolled? 1304.50(b)(2)				
4. Have the Policy Council, Policy Committees, and parent committees been properly established in terms of election and service and as early in the program year as possible? 1304.50(a)(3); 1304.50(b)(4); 1304.50(b)(5)				
5. Are members of policy groups limited to a combined total of three 1 year terms of service? 1304.50(b)(5)				
6. Are parent committees established at every center or equivalent committees for other program options, and do they comprise parents of enrolled children exclusively? ( Consult FCP monitor)				
7. Do grantee Policy Councils and delegate Policy Committees serve as a link to the parent committees and governing bodies? 1304.50(d)(2)(i)				
8. Have each grantee and delegate's policy groups jointly established and approved written procedures for resolving internal disputes between the governing body and such policy groups, including impasse procedures?1304.50(h)				
9. Do the grantee and delegate provide ongoing training opportunities for staff and training for governing body members? 1304.52(k)(2); 1304.52(k)(3); 1304.52(k)(4); 1306.23(a)				

**A. Program Governance and Shared Decision-Making Continued**

<b>Program Design and Management</b>	<b>Grantee Review Date:</b>			<b>Delegate Agency Follow-up Review Date:</b>		
	<b>Compliant</b> Yes No	<b>Comments</b>		<b>Compliant</b> Yes No	<b>Comments</b>	
<b>10. Do policy groups, governing body members, and key management staff each contribute to development, review, and approval or disapproval of the following:</b>						
11. Funding and refunding applications before submission to the Administration for Children and Families (ACF)? 1304.50(c); 1304.50(d)(1)(i)						
13. Procedures describing how the governing body and appropriate policy group implement shared decision-making? 1304.50(d)(1)(ii)						
14. Procedures for program planning . 45 CFR Part 1305.3? 1304.50(d)(1)(iii)						
15. The program's philosophy and long and short range program goals and objectives? 1304.50(d)(1)(iv)						
16. Composition of policy groups and procedures by which members are chosen? 1304.50(d)(1)(vi)						
17. Criteria for defining recruitment, selection, and enrollment priorities. 1304.50(d)(1)(vii)						
18. HS program personnel policies and subsequent changes to those policies? 1304.50(c); 1304.50(d)(1)(ix)						
19. Decisions to hire or terminate any person who works primarily for the grantee or delegate's EHS or HS program? 1304 50(c); 1304.50(d)(1)(xi)						

REVIEW – Board and Policy Committee Minutes and Bylaws

**B. Self-Assessment**

<b>Program Design and Management</b>	<b>Grantee Review Date:</b>			<b>Delegate Agency Follow-up Review Date:</b>		
	<b>Compliant</b> Yes No	<b>Comments</b>		<b>Compliant</b> Yes No	<b>Comments</b>	
1. Do the grantee and delegate conduct an annual self assessment of HS program effectiveness and progress in meeting local program goals and in implementing Federal requirements? 1304.51(i)(1)						
2. Are parents included in the self assessment process?						
3. Does the Policy Council/Policy Committee and Governing body, review and approve/disapprove the annual self assessment?						
4. Has the grantee or delegate agency developed a program improvement plan to address the findings of the annual self assessment?						
5. Does the grantee and delegate periodically review progress in meeting program improvement goals?						

REVIEW- Self Assessment Results and Program Improvement Plan; Review Board Minutes

**C. Ongoing Monitoring Procedures 1304.51(i)(2)**

<b>Program Design and Management</b>	<b>Grantee Review Date:</b>			<b>Delegate Agency Follow-up Review Date:</b>		
	<b>Compliant</b> Yes No	<b>Comments</b>		<b>Compliant</b> Yes No	<b>Comments</b>	
1. Can the program demonstrate that it has established and implemented procedures for ongoing monitoring of program operations, and eventual follow up for program improvement to ensure effective implementation of Federal regulations? * Consult with Service Area Monitors.						
2. Are governing bodies informed of deficiencies in operations identified in the monitoring review?						

REVIEW- Planning procedures; Board and PC minutes; Written Service Plans and Community Assessment  
INTERVIEW Staff

### D. Eligibility, Enrollment, and Attendance

<u>Program Design and Management</u>	<u>Grantee Review Date:</u>			<u>Delegate Agency Follow-up Review Date:</u>		
	<u>Compliant</u> Yes No	<u>Comments</u>		<u>Compliant</u> Yes No	<u>Comments</u>	
1. Do all files contain a completed and signed application? (Parent and staff signatures)						
2. Is there evidence of recruitment to encourage potential families to apply for Head Start (i.e. recruitment log, interview staff, recruitment fliers on parent board)?						
3. Are there recruitment materials available in the languages of the community served?						
4. Is there a current waiting list that is ranked according to the current selection criteria (official waiting list form in binder)? Waiting list can be for either site or program.						
5. Were children enrolled according to the current selection criteria?						
6. Do all families who need assistance filling out application forms receive help including translation services?						
7. Is there a minimum of ten percent (10%) of children with diagnosed disability enrolled?						
8. Is the maximum of ten percent (10%) of children enrolled who are over income (130% of poverty level) observed?						
9. Is the maximum of thirty-five percent (35%) of children enrolled are within 100- 130% of poverty observed?						
10. Are all families whose income exceeds eligibility guidelines have signed waivers on file?(Waivers approved prior to enrollment).						
11. Do all files of families with no income contain a Declaration of Income? (N/A permitted)						
12. Are all children who are over or under age have signed waivers on file? (Waivers approved prior to enrollment). (N/A permitted)						
13. Have all applications been data entered into Child Plus (SOP only). (N/A permitted)						
14. Is there documentation on file for children receiving more than six hours of service, showing that the family and child qualify for full day services?						
15. Are TB results including dates read obtained upon enrollment? (Center- based option)						

**D. Eligibility, Enrollment, and Attendance continued**

<b>Program Design and Management</b>	<b>Grantee Review Date:</b>		<b>Delegate Agency Follow-up Review Date:</b>	
	<b>Compliant</b> Yes No	<b>Comments</b>	<b>Compliant</b> Yes No	<b>Comments</b>
<b>Enrollment</b>				
1. Is enrollment date present on all applications?				
2. Is the CACFP Enrollment Application For Centers with no meal charge completed for all children enrolled (current within each program year)? <i>N/A Permitted</i>				
3. Do all enrollment dates match within all required areas as applicable? (Child Plus health file, application, teacher's records, CCFP date, family contact form).				
4. Is the Head Start Eligibility Verification form completed for all children enrolled?				
4. Is the method of income verification filled in and signed by staff on all applications?				
5. Is the method of birth verification filled in and signed by staff on all applications?				
6. Do all files contain a completed and signed application? (Parent and staff signatures)				
7. Do all files contain signed Parent Rights, Personal Rights, Child Abuse Prevention forms and Admissions Policy?				
8. Were all vacancies filled in a timely manner?				
9. Is there documentation in the file for children who transfer from one program to another within Head Star? (Change of Status form SOP) <i>(N/A permitted)</i>				
<b>Attendance</b>				
10. Are attendance records accurately recorded and the sign in sheets match monthly attendance records for the past 30 days?				
11. Do meal counts match monthly attendance records and sign-in sheets for the past 30 days? (SOP Only)				
12. Is there consistent evidence of contact with families whose child has exceeded 4 consecutive days of absences? (documentation of home visit(s), telephone calls and/or letters).				
13. Has an attendance tracking form been started for a child after 4 days of absence without contact with family or when there is irregular attendance? (SOP) <i>(N/A permitted)</i>				

REVIEW- Child Files, Attendance Records, ERSEA Records at administration office

## E. Planning

<b>Program Design and Management</b>	<b>Grantee Review Date:</b>		<b>Delegate Agency Follow-up Review Date:</b>	
	<b>Compliant</b> Yes No	<b>Comments</b>	<b>Compliant</b> Yes No	<b>Comments</b>
1. Does the program have a written planning procedure that has been approved by the governing body?				
2. Has the program developed a written plan or plans for implementing services in early childhood development and health, family and community partnerships, and program design and management? (Consult with content service reviewers) 1304.51(a)(1)(iii); 1304.51(a)(2); 1304.51(a)(1)(ii)				
3. Are grantee and delegate Written Service Plans reviewed and updated annually?				
4. Are grantee and delegate Written Service Plans reviewed and approved annually by the Policy Council or Policy Committee?				
5. Does grantee and delegate planning use and incorporate information from the Community Assessment in the planning process? 1305.3(d)(1); 1305.3(d)(2); 1305.3(d)(3); 1305.3(d)(4); 1305.3(d)(5); 1305.3(d)(6)				

## F. Communication

<b>Program Design and Management</b>	<b>Grantee Review Date:</b>		<b>Delegate Agency Follow-up Review Date:</b>	
	<b>Compliant</b> Yes No	<b>Comments</b>	<b>Compliant</b> Yes No	<b>Comments</b>
1. Do the grantee and delegate ensure that communication with parents is carried out in the parents' primary or preferred language or through an interpreter, to the extent feasible? 1304.51(c)(2)				
2. Have the grantee and delegate established and implemented systems to ensure that timely and accurate information is provided to parents, policy groups, staff, and the general community? 1304.51(b)				
3. Do the grantee and delegate provide regular communication with governing bodies and policy groups? 1304.51(d)(1); 1304.51(d)(2); 1304.51(d)(3); 1304.51(d)(4)				

*REVIEW-* Planning procedures; Board and PC minutes; Written Service Plans and Community Assessment  
*INTERVIEW* Staff

## G. Record-Keeping and Reporting

<u>Program Design and Management</u>	<u>Grantee Review Date:</u>		<u>Delegate Agency Follow-up Review Date:</u>			
	<u>Compliant</u> Yes No		<u>Comments</u>	<u>Compliant</u> Yes No		<u>Comments</u>
1. Are monthly financial status reports provided to the governing body, policy groups, and staff to advise them, control program quality, and maintain program accountability? 1304.51(h)(1)						
2. Are monthly program operations reports provided to grantee and delegate governing bodies, policy groups, and staff to advise them, to control program quality, and maintain program accountability? 1304.51(h)(1)						
3. Do the grantee and delegate establish and maintain a recordkeeping system that provides accurate and timely information regarding children, families, and staff and ensure appropriate confidentiality of this information? 1304.51(g) (Consult with Content service reviewers about center file systems)						

REVIEW- Planning procedures; Board and PC minutes; Written Service Plans and Community Assessment

## H. Human Resources

<b>Program Design and Management</b>	<b>Grantee Review Date:</b>		<b>Delegate Agency Follow-up Review Date:</b>		
<b>Staffing and Training</b>	<b>Compliant</b>		<b>Compliant</b>		<b>Comments</b>
	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	
1. Are management functions for program services formally assigned to and adopted by a staff person or persons? (Consult with content reviewers)					
2. Do staff and consultants in program content areas have the required credentials, qualifications, and experience? 1304.52(d)(1); 1304.52(d)(2); 1304.52(d)(3); 1304.52(d)(4); 1304.52(d)(5); 1304.52(d)(6); 1304.52(d)(7); 1304.52(d)(8); 1304.52(e); 1304.52(f)					
3. Do the grantee and delegate have a system to ensure that staff and consultants have the knowledge, skills, and experience needed to perform their assigned functions, fulfill their job responsibilities, and implement Head Start Performance Standards? 1304.52(b)(1); 1304.52(b)(2); 1304.52(b)(3); 1304.52(b)(4)					
4. Do the grantee and delegate conduct annual performance reviews on all staff? 1304.52(i)					
5. Can the grantee and delegate demonstrate that a state or national criminal record check is conducted for all employees and that an employee is not considered permanent until the check has been completed? 1301.31(b)(1)(iii)					
6. Does the grantee and delegate have a written code of conduct for its staff?					
7. Do the grantee and delegate ensure that teaching staff meet the minimum educational requirements mandated by the Head Start Act?					

REVIEW- Personnel Policies and Procedures



## Glossary of Terms and Acronyms Used

**Accepted Enrollment Date** (as it appears on the Sacramento County Head Start Application Form)- Official acceptance of a family by the program and completion of all procedures necessary for a child and family to begin receiving services; This date is used for the 30-day clock for enrollment starts and time to declare vacancy.

**Attendance Entry Date** (as it appears on the Sacramento County Head Start Application Form)-Attendance means the actual presence and participation in the program; This is the date used for 45-day clock for screenings.

**Medical Home** - Primary care that is accessible, continuous, comprehensive, family centered, compassionate, and culturally effective.

**Dental Home**- Ongoing relationship between the dentist and the patient, inclusive of all aspects of oral health care delivery in a comprehensive, continuously accessible, coordinated and family-centered way.

**FPA**- Family Partnership Agreement

**IEP**- Individualized Education Plan/Program- A written statement which describes the specially designed instruction and services needed to meet the individual needs of the special education student.

**IFSP**- Individualized Family Service Plan-A written plan for providing early intervention services to an eligible child (under the age of three years) and the child's family.

**HS**- Head Start

**EHS**- Early Head Start

**PC**- Policy Council

**IDP**- Individualized Development Plan

**MSDS**- Material Safety Data Sheet (MSDS) is a document that contains information on the potential health effects of exposure to chemicals, or other potentially dangerous substances, and on safe working procedures users should adhere to when handling chemical products.



# Monitoring Review Feedback Report

**Program:**

**Date:**

**Funded Enrollment:**

**Files Reviewed:**

**Overall Program Summary:**

---

SAMPLE

# Monitoring Review Feedback Report

**Program:**

**Date:**

**Funded Enrollment:**

**Files Reviewed:**

**Overall Program Summary:**

## *Health/Nutrition/Mental Health*

In	Of	Total	%Complete	
38	of	38	100%	Children's files locked and sign-out sheet available.
38	of	38	100%	1st year consent forms signed and in file.
12	of	12	100%	2nd year consent forms signed and in file.
33	of	38	87%	Developmental screening done within 45 days of enrollment. Speech and language screening done within 45 days of enrollment.
33	of	38	87%	Behavior/social/emotional screening done within 45 days of enrollment
31	of	38	82%	Referrals initiated within 2 weeks for children with mental health concerns.
2	of	12	17%	Copies of request for follow-up services are in the file.
1	of	12	8%	Have documentation for parents refusing mental health services.
1	of	11	9%	Copies of Consent for Observation and Assessment are in file.
1	of	2	50%	Mental health intervention in process within 2 weeks from the Request for Follow-Up Services date and every 30 days thereafter.
1	of	1	100%	Have evidence of written follow-up services to center staff every 30 days as to the progress of the original Request for Follow-Up Services.
1	of	1	100%	1st Height and weight recorded within 45 days of enrollment.
34	of	38	89%	1st Height and weight graphed within 60 days of enrollment.
29	of	38	76%	Additional heights and weights recorded every 6 months.
15	of	16	94%	Additional heights and weights graphed every 6 months, within 30 days of recording.
14	of	15	93%	Follow-ups documented on children not receiving WIC services and ht/wt is ≥95%
4	of	4	100%	Follow-ups documented on children not receiving WIC services and ht/wt is ≤5%
0	of	0	N/A	1st year hearing screening done within 45 days of enrollment. Additional hearing screenings done within 1 year of last screening.
30	of	37	81%	
10	of	11	91%	Follow-ups documented within 2 weeks of 1st failed hearing screen. (6 weeks for delegates)
1	of	1	100%	Follow-ups documented within 2 weeks of additional failed hearing screens. (6 weeks for delegates)
0	of	0	N/A	1st year vision screening done within 45 days of enrollment. Additional vision screenings done within 1 year of last
31	of	37	84%	
10	of	12	83%	

# Monitoring Review Feedback Report

**Program:**

**Date:**

**Funded Enrollment:**

**Files Reviewed:**

**Overall Program Summary:**

1	of	1	100%	screening.
0	of	0	N/A	Follow-ups documented within 2 weeks of 1st failed vision screen. (6 weeks for delegates)
38	of	38	100%	Follow-ups documented within 2 weeks of second failed vision screen. (6 weeks for delegates)
37	of	38	97%	Show evidence of screen results given to parents.
11	of	16	69%	1st year physical exam complete within 30 days of enrollment. Additional physical exams complete within 30 days of expired 1st year exam.
0	of	1	0%	Inadequate exclusion health letters for missing 1st year physicals sent out within 31 days of enrollment and there is no verified appointment.
0	of	4	0%	Inadequate exclusion health letters for missing additional physicals sent out within 31 days of expired physical.
9	of	9	100%	1st year blood pressure recorded within 45 days of enrollment. Additional blood pressures recorded within 1 year of last screening.
0	of	1	0%	Follow-up documented on children with abnormal 1st year blood pressure.
0	of	0	N/A	Follow-up documented on children with abnormal additional blood pressures.
0	of	0	N/A	Follow-up documented on children not receiving WIC services and hgb<10 g/dl, hct<30%.
35	of	38	92%	Child T.B. tests complete prior to entry.
8	of	15	53%	Immunizations are up to date.
0	of	1	0%	Follow-ups documented on children not receiving WIC services and hgb 10.0-11.9 g/dl, hct 30-35%
0	of	1	0%	Follow-ups documented within 60 days on children needing a medical home.
0	of	1	0%	Follow-ups documented every 60 days on children needing a dental home.
38	of	38	100%	Health histories completed at placement (within 45 days of enrollment for delegates).
38	of	38	100%	Health histories reviewed by staff. (2nd year signed by staff and parents)
13	of	13	100%	Health concerns identified on health histories or physical addressed and documented.
10	of	10	100%	Nutrition histories completed at placement (within 45 days of enrollment for delegates).
38	of	38	100%	Nutrition histories reviewed by staff (2nd year signed by staff and parents).
13	of	13	100%	

# Monitoring Review Feedback Report

**Program:**

**Date:**

**Funded Enrollment:**

**Files Reviewed:**

**Overall Program Summary:**

0	of	0	N/A	Nutrition concerns identified on the nutrition history or physical are addressed and documented.
3	of	3	100%	Special diet verifications completed by a physician, physician assistant, or nurse.
3	of	3	100%	Special diet forms are completed and in file.
3	of	3	100%	Menu modifications are developed by an R.D
28	of	38	74%	1st year dental exams completed.
11	of	15	73%	Subsequent dental exams completed within one year.
11	of	11	100%	Follow-ups documented every 45 days on 2nd year children needing a dental exam. (and every 60 days thereafter)
6	of	6	100%	Follow-ups documented on children needing dental treatment. (and every 60 days thereafter)

*Comments:*

**Education-**  
*Individualization*

*Screens and Assessments*

33	of	38	87%	developmental screens completed within 45 days of enrollment
33	of	38	87%	speech screens completed within 45 days of enrollment
31	of	38	82%	behavioral screens completed within 45 days of enrollment (DECA screen must also be done after 30 days)
38	of	38	100%	parents notified of screener results
29	of	37	78%	first assessment done within 60 days of enrollment
31	of	38	82%	anecdotes in file
35	of	38	92%	Assessment date in file

SAMPLE

# Monitoring Review Feedback Report

**Program:**

**Date:**

**Funded Enrollment:**

**Files Reviewed:**

**Overall Program Summary:**

26	of	38	68%	assessments done on schedule
----	----	----	-----	------------------------------

*Written Implementation*

34	of	38	89%	1st home visit done within 45 days (30 days for SOP)
31	of	37	84%	Two Home Visits and Two Parent Conferences indicated During the Year
17	of	37	46%	home visits/parent conferences done on schedule
30	of	35	86%	IDP's dated
30	of	35	86%	IDP's have information in all three developmental areas
30	of	35	86%	IDP's have individualized strengths, goals, and strategies
30	of	35	86%	IDP's are consistent with screens, anecdotes, and DRDP+
28	of	34	82%	IDP's have evidence of parent input

*Classroom Implementation of Individualization*

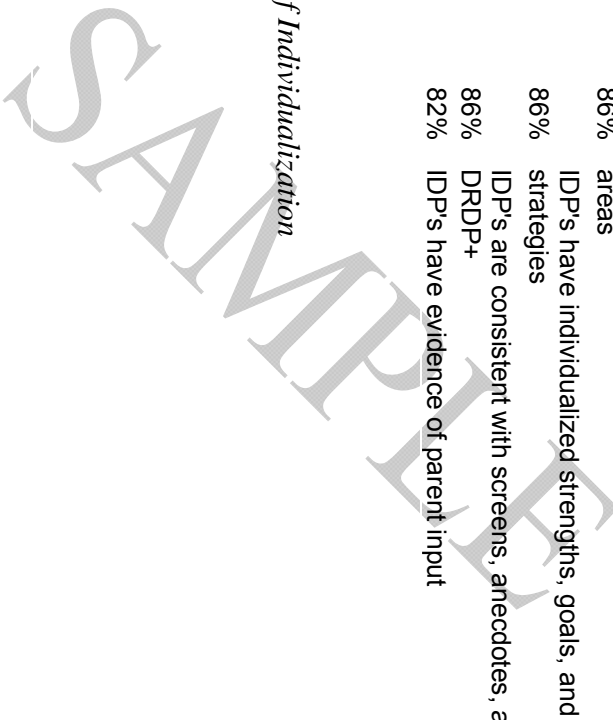
*Comments:*

**Curriculum** -

*Lesson Plans*

*Indoor Environment-Space and Furnishings*

*Indoor Environment-Materials & Displays*



# Monitoring Review Feedback Report

**Program:**

**Date:**

**Funded Enrollment:**

**Files Reviewed:**

**Overall Program Summary:**

*Outdoor Environment*

*Comments:*

**Disabilities**

*Comments:*

**Family Community Partnerships -**

***Family Partnership Building***

In	Total	%Complete	
18	31	58%	F.P.A. completed within 90 days of enrollment?
27	31	87%	All dates and signatures on file.
30	30	100%	Immediate needs identified.
26	26	100%	Needs are identified.
28	31	90%	Strengths identified.
22	30	73%	Individualized goals.
16	26	62%	Realistic Timetables Set (Staff).
16	25	64%	Clear Strategies/Steps (Staff).
24	29	83%	Staff Responsible Identified.
0	10	0%	Pre-Existing Plans Incorporated.
10	17	59%	Referred to Outside Agencies.

***Family Partnership Agreement Follow-up***

In	Total	%Complete	
16	27	59%	Follow-up documentation for services requested.
18	19	95%	Follow-up documentation for immediate needs.
22	23	96%	Follow-up documentation for needs.
13	28	46%	Follow-up Documentation by Staff Responsible.
5	11	45%	Follow-up Documentation on Referrals.

# Monitoring Review Feedback Report

**Program:**

**Date:**

**Funded Enrollment:**

**Files Reviewed:**

**Overall Program Summary:**

*Comments:*

**Parent Involvement-**

*Parent Meetings and Trainings*

*Parent information Area*

*Parent Volunteer Activities*

*Comments:*

**ERSEA (Eligibility, Recruitment, Selection, Enrollment, Attendance)**

*Eligibility, Recruitment and, Selection*

In	Total	%Complete	
12	13	92%	Signed income verification
9	13	69%	Meets income eligibility
2	4	50%	Signed waiver on file if over income
8	11	73%	Documentation if qualified for full day services
13	13	100%	Meets age eligibility
0	0	#DIV/0!	Signed waiver on file if over/under age

*Enrollment*

In	Total	%Complete	
13	13	100%	Application has enrollment date
8	13	62%	Family contact has enrollment date
13	13	100%	Teacher's record has enrollment date
5	13	38%	All enrollment dates match
13	13	100%	Method of income verification identified
13	13	100%	Method of birth verification identified

# Monitoring Review Feedback Report

**Program:**

**Date:**

**Funded Enrollment:**

**Files Reviewed:**

**Overall Program Summary:**

11	of	12	92%	Complete enrollment form on file
13	of	13	100%	Complete enrollment information on file, signed by parent

*Comments:*

**Safe Environments**

**In Of Total %Complete**

**Required Postings**

7	of	7	100%	1. Facility License (posted in a prominent place). (Licensing 101260)
7	of	7	100%	2. Designation of Administrative Responsibilities (Licensing 101312, form #306) available at site.
7	of	7	100%	3. Evacuation routes (posted next to all exits) are clearly marked so that exits to the outside are unmistakable.
7	of	7	100%	4. Tobacco free policy sign/sticker is posted and parent signatures are obtained. 1304.53 a 8
7	of	7	100%	5. Non-Discrimination Posters, CFR 45; 84.4, "And Justice For All" and Complaint Procedure are posted.
7	of	7	100%	6. Personal and Parents Rights (Licensing 101223) (from #995)
1	of	7	14%	7. Has the center received any Type A deficiencies within the past 12 months?
1	of	1	100%	8. If so, is the Type A deficiency appropriately posted? (Must be posted for 30 days following violation).
0	of	1	0%	9. Is there evidence in each child's file that the parent/guardian received a copy of the Type A deficiency (signature page provided by CL)?
0	of	0	N/A	10. For each family enrolled within the past 12 months, did they receive a copy of the Type A deficiency (evidence in child's file)?

**Indoor Environment**

**Restrooms**

7	of	7	100%	11. Bathroom facilities are clean, free of odor, in good repair and easily reached by children.
---	----	---	------	---

# Monitoring Review Feedback Report

**Program:**

**Date:**

**Funded Enrollment:**

**Files Reviewed:**

**Overall Program Summary:**

7	of	7	100%	12. Bathroom facilities are separated from areas used for cooking, eating, or children's activities. 1304.3.53 a 10 xiv
7	of	7	100%	13. Toilet paper is located where children can reach it without having to get up from the toilet.
7	of	7	100%	14. Paper towels and liquid soap are readily available at all sinks and are within the reach of children.
7	of	7	100%	15. There is an identified adult bathroom.

### Kitchens

6	of	6	100%	16. Refrigerator, microwave, food warmers and carts are clean.
---	----	---	------	--

### Classrooms

7	of	7	100%	17. There is an isolation area with a mat or cot available for ill children. (Licensing 10136.2)
7	of	7	100%	18. Classrooms are maintained at an adequate temperature (approx. 68° -85°). 1304.53 a 10 xiv
7	of	7	100%	19. Windows and glass doors are constructed, adapted, or adjusted to prevent injury to children (they are sufficiently marked or they have sufficient barriers to prevent injury). Bottom windows are lockable. 1304.53 a 10 xii
7	of	7	100%	20. Windows cannot be opened more than 6 inches from the bottom.
7	of	7	100%	21. All windows have closed, permanent screens.
7	of	7	100%	22. Pull cords for blinds are out of reach of children and knot-free.
7	of	7	100%	23. Windows, doors, ceilings and walls are clean.
7	of	7	100%	24. Walls and ceilings have no peeling paint and no cracked or falling plaster.
7	of	7	100%	25. Flammable, dangerous materials or potential poisons, and cleaning supplies are stored in cabinets (locked or out-of-reach of children) or storage facilities, separate from stored medications and food. 1304.53 a 10 iii
7	of	7	100%	26. Garbage and trash are covered (exception – mealtime) and stored and disposed of in a safe, sanitary manner. 1304.53 a 10 xvi
7	of	7	100%	27. Trash is stored away from heaters or other heat sources.
5	of	5	100%	28. Napping mats are stored in a sanitary manner, not touching and bedding is laundered weekly. (Licensing law)
7	of	7	100%	29. Materials and toys are stored in a safe and orderly fashion when not in use (e.g. in their assigned places, not out where people can trip over them) and storage areas are well organized. 1304.53 b 1 vi
7	of	7	100%	30. Floors are smooth and have nonskid surfaces. Rugs are skid-proof, nailed or taped down.

# Monitoring Review Feedback Report

**Program:**

**Date:**

**Funded Enrollment:**

**Files Reviewed:**

**Overall Program Summary:**

7	of	7	100%	31. Doors to places that children can enter, such as bathrooms, can be easily opened from the outside by a child or an adult.
7	of	7	100%	32. Doors have slow closing devices and/or rubber gaskets on the edges to prevent finger pinching.
7	of	7	100%	33. Electrical cords are out of children's reach and placed away from doorways and traffic paths.
5	of	5	100%	34. Covers or guards for fans have openings small enough to keep fingers out.
7	of	7	100%	35. No free-standing space heaters are used.
7	of	7	100%	36. Pipes and other hot surfaces cannot be reached by children or are covered to prevent burns.
7	of	7	100%	37. There is no smoking, lighted cigarettes, matches or lighters around children.
7	of	7	100%	38. Drawers are closed to prevent tripping or bumps.
7	of	7	100%	39. Adults can easily view and supervise all areas used by children.
2	of	3	67%	40. "Animals in the Classroom Policy" is followed.
7	of	7	100%	41. Poisonous plants are not present.
7	of	7	100%	42. All adult handbags are stored out of children's reach.
7	of	7	100%	43. Stable step stools are available where needed.
6	of	7	86%	44. Safety covers are on all outlets. 1304.53 a 10 xi
7	of	7	100%	45. All decorative materials such as curtains, drapes, hangings, cardboard, canvas, plastic partitions/half walls or any other combustible decorative material is flame retardant/treated. CFC 2501.5
7	of	7	100%	46. Decorative materials or postings do not block or conceal any exit door, exit lights, fire alarm, hose cabinet, or fire extinguisher, or electrical panel. CFC 2501.5
7	of	7	100%	47. A maximum of 25% of wall area is used for decorative materials that are not flame retardant/treated. (If more than 25% of wall is used, all materials on the wall must be fire retardant treated.)
7	of	7	100%	48. Classroom decorations, (bulletin boards children's art work, etc.) is a minimum of four (4) feet away from the corner of any adjoining wall and from any exit.
6	of	6	100%	49. There is no paper on exit doors.
7	of	7	100%	50. Extension cords are not used in facility.
7	of	7	100%	51. All exits/entry pathways maintain a minimum 3ft. clearance.
7	of	7	100%	52. There is a child accessible supply of drinking water.

**Emergency Preparedness**

# Monitoring Review Feedback Report

**Program:**

**Date:**

**Funded Enrollment:**

**Files Reviewed:**

**Overall Program Summary:**

7	of	7	7	100%	53. Emergency disaster plan is posted in each room. (Licensing form #610) 1304.22 a 3
6	of	7	7	86%	54. Disaster supplies are readily accessible and identified (food and backpack – SOP). 1304.53 a 3
7	of	7	7	100%	55. Exits are clearly marked and unobstructed. 1304.22 a 3; 1304.53 a 10 vii
6	of	7	7	86%	56. Lighted exit signs are in working order at all times (replace bulbs as needed).
7	of	7	7	100%	57. The facility has approved, regularly serviced and readily available fire extinguishers. 1304.53
7	of	7	7	100%	58. There are working smoke detectors in each classroom. 1304.53 a 10 vi
7	of	7	7	100%	59. Room is well lit and emergency lighting or working flashlight is available. (All bulbs are working). 1304.53 a 10 xi
7	of	7	7	100%	60. A well-supplied first aid kit is accessible and conspicuous (in a cupboard, marked with a red+) and out of reach of children. First aid manual is nearby. 1304.23 f 1
7	of	7	7	100%	61. Identified a well-stocked first aid kit for field trips (backpack/fanny pack). Emergency cards are taken on field trips.
7	of	7	7	100%	62. Required staff are certified in first aid and infant/child CPR with documentation in site personnel file.
7	of	7	7	100%	63. Staff emergency cards are complete with all doctor information and staff are aware of where they are kept.
<b><u>EHS Only</u></b>					
0	of	0	0	N/A	64. The diaper changing area is located away from areas used for cooking, eating, or children's activities.
0	of	0	0	N/A	65. A utility sink is specifically used to clean portable potties.
0	of	0	0	N/A	66. Diapers are disposed in a safe, sanitary manner.
0	of	0	0	N/A	67. Non-porous gloves are available for use when dealing with bodily fluids.
0	of	0	0	N/A	68. Staff, volunteers, and children wash their hands with soap and water after diapering or toilet use; before food-related activities; when ever hands are contaminated with blood or other bodily fluids; and after handling pets or other animals; etc.
0	of	0	0	N/A	69. Infant sleeping arrangements use firm mattresses and avoid soft bedding materials such as comforters, pillows, fluffy blankets, or stuffed toys.
0	of	0	0	N/A	70. Cribs are at least three feet apart from each other.

# Monitoring Review Feedback Report

**Program:**

**Date:**

**Funded Enrollment:**

**Files Reviewed:**

**Overall Program Summary:**

0	of	0	N/A	71. Infant toys are made of non-toxic materials and are sanitized regularly.
0	of	0	N/A	72. Toys, materials, and furniture are safe, durable, and kept in good condition. Materials free of sharp edges and loose pieces, balloons and/or other plastic bags not used, no choking hazards.
0	of	0	N/A	73. Facilities are available for the proper storage and handling of breast milk and formula.
0	of	0	N/A	74. There is an absence of highly flammable furnishings, decorations, or materials that emit toxic fumes. 1304.53 a 10 ii
<b><u>Outdoor Environment</u></b>				
7	of	7	100%	75. The outdoor premises are cleaned daily and kept free of undesirable and hazardous materials (litter, etc.) and conditions (no standing pools of water, sandbox free of debris, etc.). 1304.53 a 10 viii
7	of	7	100%	76. Play areas are free of trash and poisonous plants or berries.
7	of	7	100%	77. Outdoor areas arranged to prevent children from leaving premises or getting into unsafe or unsupervised areas. 1304.53 a 9
7	of	7	100%	78. Play area is easily viewed and supervised.
7	of	7	100%	79. Play areas are free of tripping hazards. (e.g. tree roots, holes, exposed equipment anchoring devices).
7	of	7	100%	80. Exposed concrete or hard anchoring materials are covered.
7	of	7	100%	81. The playground equipment is in good repair and safe condition, layout minimizes possibility of injury to children and is accessible to children with disabilities (e.g. adequately secured to the ground, free of sharp edges and/or splinters, soft falling surface, wheelchair accessible).
7	of	7	100%	82. Soft material under playground equipment (sand, bark, etc.) is a minimum of 12 inches deep. Rubber surface was installed by licensed professional.
7	of	7	100%	83. Bike or trike riding areas are separate from other equipment.
7	of	7	100%	84. Slides have an enclosed at the top for children to rest on and get into position.
7	of	7	100%	85. Slides have a flat surface at the bottom to slow children down and bottom of slide is no more than 11 inches high.
6	of	6	100%	86. Slide ladders have flat steps/rungs and a handrail on each side.
4	of	4	100%	87. Sheds are properly used and arranged. 1304.53 b 1 viii

# Monitoring Review Feedback Report

**Program:**

**Date:**

**Funded Enrollment:**

**Files Reviewed:**

**Overall Program Summary:**

---

7	of	7	100%	88. Tree branches are trimmed to ensure they do not intrude upon play area. (maintain 7ft clearance around play equipment).
7	of	7	100%	89. There is a source of drinking water accessible to children.

**Comments:**

SAMPLE

# Monitoring Review Feedback Report

**Program:**

**Date:**

**Funded Enrollment:**

**Files Reviewed:**

**Overall Program Summary:**

---

SAMPLE

**SETA Operated Program  
QUARTERLY MONITORING RESPONSE FORM**

Centers Reviewed: \_\_\_\_\_

Months Covered: \_\_\_\_\_

Findings	Plan of Action and Person(s) Responsible	Projected Date of Completion

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Due to Brenda Campos and/or Melanie Nicolas within 30 days of receipt of Monitoring Report.



### Health/Nutrition File Review

KEY	Center	Location ID#	Reviewer	Date Reviewed	
-----	--------	--------------	----------	---------------	--

*File/Fail*

	Guidance and C.F.R.#	Child 1	Child 2	Child 3	Child 4	Child 5			
1 =Complete/Pass									
* =Not Applicable									
Date of Birth									
Age of Child									
1st Enrollment Date									
1st Entry Date									
2nd Enrollment Date									
2nd Entry Date									
Confidentiality of Records	Files locked and sign-out sheet available							of	Children's files locked and sign-out sheet available.
1st Year Consent Forms Signed								of	1st year consent forms signed and in file.
2nd Year Consent Forms Signed								of	2nd year consent forms signed and in file.
Developmental Screen Type									
Developmental Screen Date									
Days Between Entry									
Developmental Screen Within 45 Days								of	Developmental screening done within 45 days of enrollment.
Developmental Screen Result									
Speech Screen Type									
Speech Screen Date									
Days Between Entry									
Speech Screen Within 45 Days								of	Speech and language screening done within 45 days of enrollment.
Speech Screen Result									
Social/Emotional Screen Type									
Social/Emotional Screen Date									
Days Between Entry									
Social/Emotional Within 45 Days	Some screeners require after 30 days and before 45 days.							of	Behavior/social/emotional screening done within 45 days of enrollment
Social Emotional Screen Result									
Mental Health Referrals Done	Within 2 weeks of failed test							of	Referrals initiated within 2 weeks for children with mental health concerns.
Request for Follow-Up Services in File								of	Copies of request for follow-up services are in the file.
Documentation of Parents Refusing Mental Health Services								of	Have documentation for parents refusing mental health services.
Copies of Consent for Observation on File	For children referred for mental health services							of	Copies of Consent for Observation and Assessment are in file.

### Health/Nutrition File Review

KEY	Center	Location ID#	Reviewer	Date Reviewed		
-----	--------	--------------	----------	---------------	--	--

File/Fail

	Guidance and C.F.R.#	Child 1	Child 2	Child 3	Child 4	Child 5			
1 =Complete/Pass									
<b>Mental Health Intervention in Process</b>	Within 2 weeks of referral, and every 30 days thereafter							of	Mental health intervention in process within 2 weeks from the Request for Follow-Up Services date and every 30 days thereafter.
<b>Evidence of Written Follow-Up to Center Staff on the Progress of Mental Health Requests for Follow-Up Services</b>	Every 30 days							of	Have evidence of written follow-up services to center staff every 30 days as to the progress of the original Request for Follow-Up Services.
<b>Verified WIC Services</b>									
<b>1st Height/Weight Date</b>									
<b>Days Between Entry</b>									
<b>1st Ht./Wt. Recorded Within 45 Days</b>	≤45 days of entry							of	1st Height and weight recorded within 45 days of enrollment.
<b>1st Ht./Wt. Graph Date</b>	Within 60 days of entry								
<b>Days Between Entry</b>									
<b>1st Ht./Wt. Graphed Within 60 Days</b>	Within 60 days of entry							of	1st Height and weight graphed within 60 days of enrollment.
<b>Additional Ht/Wt Recorded Every 6 Months</b>	Every 6 months assess and refer 1304.23							of	Additional heights and weights recorded every 6 months.
<b>Additional Ht/Wt Graphed Every 6 Months</b>	Every 6 months within 30 days of recording 1304.24							of	Additional heights and weights graphed every 6 months, within 30 days of recording.
<b>All Follow-Up Complete for ≥95%</b>	Not required if receiving WIC							of	Follow-ups documented on children not receiving WIC services and ht/wt is ≥95%
<b>All Follow-Up Complete for ≤5%</b>	Not required if receiving WIC							of	Follow-ups documented on children not receiving WIC services and ht/wt is ≤5%
<b>1st Hearing Screen Date</b>	≤45 days of entry								
<b>Days Between Entry</b>									
<b>1st Hearing Screen Done Within 45 Days</b>	≤45 days of entry							of	1st year hearing screening done within 45 days of enrollment.
<b>Additional Hearing Screens Done Every Year</b>	Within 1 year of last screen							of	Additional hearing screenings done within 1 year of last screening.
<b>Hearing Screen Results</b>	Refer within 14 days (42 days for delegates) 1304.20 b1; 1308.5								
<b>1st Hearing Follow-Up Completed</b>								of	Follow-ups documented within 2 weeks of 1st failed hearing screen. (6 weeks for delegates)
<b>Additional Hearing Screen Follow-Up Completed</b>								of	Follow-ups documented within 2 weeks of additional failed hearing screens. (6 weeks for delegates)
<b>1st Vision Screen Date</b>	≤45 days of entry								
<b>Days Between Entry</b>									
<b>1st Vision Screen Within 45 Days</b>	≤45 days of entry							of	1st year vision screening done within 45 days of enrollment.

### Health/Nutrition File Review

<b>KEY</b>	<b>Center</b>	<b>Location ID#</b>	<b>Reviewer</b>	<b>Date Reviewed</b>	
------------	---------------	---------------------	-----------------	----------------------	--

File/Fail

	Guidance and C.F.R.#	Child 1	Child 2	Child 3	Child 4	Child 5			
1 =Complete/Pass									
<b>Additional Vision Screens Completed Every Year</b>	Within 1 year of last screen							of	Additional vision screenings done within 1 year of last screening.
<b>Vision Screen Results</b>	Refer in 14 days (42 days for delegates) after second failed screen.								
<b>1st Vision Follow-Up Completed</b>								of	Follow-ups documented within 2 weeks of 1st failed vision screen. (6 weeks for delegates)
<b>Additional Vision Screen Follow-Up Completed</b>								of	Follow-ups documented within 2 weeks of second failed vision screen. (6 weeks for delegates)
<b>Evidence Of Screen Results Shared With Parents</b>								of	Show evidence of screen results given to parents.
<b>1st Physical Exam Date</b>									
<b>Days Between Entry</b>									
<b>1st Physical Within 30 Days</b>	Within 1 year prior to entry, or 30 days after entry, or documented/verified appointment Scheduled							of	1st year physical exam complete within 30 days of enrollment.
<b>Additional Physical Exams Done Every Year</b>	Within 30 days of expired 1st physical							of	Additional physical exams complete within 30 days of expired 1st year exam.
<b>Exclusion Letter Sent For Missing 1st Year Physical</b>	sent <31 days + follow-up							of	Inadequate exclusion health letters for missing 1st year physicals sent out within 31 days of enrollment and there is no verified appointment.
<b>Exclusion Letter Sent For Missing Additional Physicals</b>	sent <31 days + follow-up							of	Inadequate exclusion health letters for missing additional physicals sent out within 31 days of expired physical.
<b>Age of Child at Enrollment</b>	Bp for ≥ 4 years old only.								
<b>1st Blood Pressure Date</b>	≤45 days of entry								
<b>Days Between Entry</b>									
<b>1st Blood Pressure Within 45 Days</b>	≤45 days of entry							of	1st year blood pressure recorded within 45 days of enrollment.
<b>Additional Blood Pressures Done Every Year</b>	Within 1 year of last screen							of	Additional blood pressures recorded within 1 year of last screening.
<b>Blood Pressure Results</b>	Refer within 90 days if systolic is ≥111								
<b>1st Blood Pressure Follow-Up</b>								of	Follow-up documented on children with abnormal 1st year blood pressure.
<b>Additional Blood Pressures Follow-Up</b>								of	Follow-up documented on children with abnormal additional blood pressures.
<b>1st Hgb./Hct. Date</b>	≤45 days of entry								
<b>Days Between Entry</b>									
<b>1st Hgb./Hct. Within 45 Days</b>	≤45 days of entry							of	1st year Hemoglobin recorded within 45 days of enrollment.
<b>Additional Hgb./Hct. Within 1 Year</b>	Within 1 year of last screen							of	Additional hemoglobin recorded within 1 year of last screening.

### Health/Nutrition File Review

KEY	Center	Location ID#	Reviewer	Date Reviewed	
-----	--------	--------------	----------	---------------	--

File/Fail

		Child 1	Child 2	Child 3	Child 4	Child 5			
1 =Complete/Pass	Guidance and C.F.R.#								
	Follow-up documented within 60 days of entry if hgb./hct. Is <11.9 or <34% and no WIC								
<b>Hgb./Hct. Result</b>									
<b>Follow-Up (Nutrition Education Provided) For Hgb 10.0-11.9 g/dl, hct 30-35%</b>								of	Follow-ups documented on children not receiving WIC services and hgb 10.0-11.9 g/dl, hct 30-35%
<b>Follow-Up (Refer to RD or Parent Refusal) For hgb&lt;10 g/dl, hct&lt;30%</b>								of	Follow-ups documented on children not receiving WIC services and hgb<10 g/dl, hct<30%.
<b>Child T.B. Test Date Read</b>	Within 1 year prior to entry, must have result and initial								
<b>Date Of Entry</b>									
<b>Child T.B. Complete Prior to Enrollment</b>								of	Child T.B. tests complete prior to entry.
<b>Immunizations are Up-To-Date</b>	1304.20 A							of	Immunizations are up to date.
<b>Medical Home Identified</b>									
<b>Follow-Up for No Medical Home</b>	Ongoing follow-up every 45 days 1304.20 a 1 l; e 4							of	Follow-ups documented within 60 days on children needing a medical home.
<b>Dental Home Identified</b>									
<b>Follow-Up for No Dental Home</b>	Ongoing follow-up every 45 days 1304.20 a 1 l; e 4							of	Follow-ups documented every 60 days on children needing a dental home.
<b>Child Health History Completed</b>								of	Health histories completed at placement (within 45 days of enrollment for delegates).
<b>2nd Year Health History Reviewed by Staff and Parent</b>	Staff and parent signature for 2nd year 1304.20 a 1 l, b 1							of	Health histories reviewed by staff. (2nd year signed by staff and parents)
<b>Health Problems Identified</b>									
<b>Follow-Up for Health Problems</b>								of	Health concerns identified on health histories or physical addressed and documented.
<b>Child Nutrition History Completed</b>	≤45 days of entry (SOP required at placement)							of	Nutrition histories completed at placement (within 45 days of enrollment for delegates).
<b>2nd Year Nutrition History Reviewed by Staff and Parent</b>	Parent and staff review signature for 2nd year 1304.23 a, 2							of	Nutrition histories reviewed by staff (2nd year signed by staff and parents).
<b>Nutrition Problems Identified</b>									
<b>Follow-Up for Nutrition Problems</b>	Nutrition assessment in process ≥90 days of entry 1304.22 b 3							of	Nutrition concerns identified on the nutrition history or physical are addressed and documented.

### Health/Nutrition File Review

<b>KEY</b>	<b>Center</b>	<b>Location ID#</b>	<b>Reviewer</b>	<b>Date Reviewed</b>		
------------	---------------	---------------------	-----------------	----------------------	--	--

*File/Fail*

	Guidance and C.F.R.#	Child 1	Child 2	Child 3	Child 4	Child 5			
<b>1 =Complete/Pass</b>									
<b>Special Diet Identified</b>	Type identified (special diet/religious)							of	
<b>Special Diet Verification Obtained by an M.D.</b>	Physician assistant or nurse also acceptable.							of	Special diet verifications completed by a physician, physician assistant, or nurse.
<b>Special Diet Forms Complete and In File</b>	Referred to R.D., Dr. verification, sent to kitchen 1304.23 c 6							of	Special diet forms are completed and in file.
<b>Menu Modifications Developed By R.D.</b>	Not required for religious preference.							of	Menu modifications are developed by an R.D
<b>1st Year Dental Exam Completed</b>								of	1st year dental exams completed.
<b>Additional Dental Exams Complete</b>	Within 1 year of last Exam							of	Subsequent dental exams completed within one year.
<b>Follow-Up if Needing Dental Exam</b>	Missing exam followed up every 45 days 1304.20 c 3 ii, d							of	Follow-ups documented every 45 days on 2nd year children needing a dental exam. (and every 60 days thereafter)
<b>Follow-Up if Needing Dental Treatment</b>	Treatment needed followed up every 45 days 1304.20 c 3 ii, d							of	Follow-ups documented on children needing dental treatment. (and every 60 days thereafter)

#### Notes

1	
2	
3	
4	
5	

<b>Health/Nutrition File Review</b>						
-------------------------------------	--	--	--	--	--	--

<i>KEY</i>	Center	Location ID#	Reviewer	Date Reviewed		
------------	--------	--------------	----------	---------------	--	--

<i>File/Fail</i>						
------------------	--	--	--	--	--	--

<i>1 =Complete/Pass</i>	Guidance and C.F.R.#	Child 1	Child 2	Child 3	Child 4	Child 5				
-------------------------	-------------------------	---------	---------	---------	---------	---------	--	--	--	--

<b>Health/Nutrition File Review EHS</b>						
<b>KEY</b>	<b>Center</b>	<b>Location ID#</b>	<b>Reviewer</b>	<b>Date Reviewed</b>		

<i>0 =Incomplete/Not In File/Fail</i>										
<b>1 =Complete/Pass</b>	Guidance and C.F.R.#	Child 1	Child 2	Child 3	Child 4	Child 5				
<i>* =Not Applicable</i>										
<b>Date of Birth</b>										
<b>Age of Child</b>										
<b>1st Enrollment Date</b>										
<b>1st Entry Date</b>										
<b>2nd Enrollment Date</b>										
<b>2nd Entry Date</b>										
<b>Confidentiality of Records</b>	Files locked and sign-out sheet available							of		Children's files locked and sign-out sheet available.
<b>1st Year Consent Forms Signed</b>								of		1st year consent forms signed and in file.
<b>2nd Year Consent Forms Signed</b>								of		2nd year consent forms signed and in file.
<b>Ages and Stages Date Screened</b>										
<b>Days Between Entry</b>										
<b>Ages and Stages Within 45 Days</b>								of		Developmental screening done within 45 days of enrollment.
<b>Ages and Stages Notes</b>										
<b>Social/Emotional Screen Date</b>										
<b>Days Between Entry</b>										
<b>Social/Emotional Within 45 Days</b>	Some screeners require after 30 days and before 45 days.							of		Behavior/social/emotional screening done within 45 days of enrollment
<b>Social Emotional Screen Result</b>										
<b>Request for Follow-Up Services in File</b>	Within 2 weeks of failed test							of		Referrals on file initiated within 2 weeks for children with mental health concerns.
<b>Documentation of Parents Refusing Mental Health Services</b>								of		Have documentation for parents refusing mental health services.
<b>Copies of Consent for Observation on File</b>	For children referred for mental health services							of		Copies of Consent for Observation and Assessment are in file.
<b>Evidence of Parent Input</b>	In planning and implementation							of		Evidence of parent input on file for mental health intervention.
<b>Mental Health Intervention in Process</b>	Within 2 weeks of referral, and every 30 days thereafter							of		Mental health intervention in process within 2 weeks from the Request for Follow-Up Services date and every 30 days thereafter.
<b>Evidence of Written Follow-Up to Center Staff on the Progress of Mental Health Requests for Follow-Up Services</b>	Every 30 days							of		Have evidence of written follow-up services to center staff every 30 days as to the progress of the original Request for Follow-Up Services.
<b>First Height/Weight/Head Circumference Date</b>										
<b>Days Between Entry</b>										
<b>1st Ht/Wt/HC Recorded Within 45 Days</b>	≤45 days of entry							of		1st Height and weight recorded within 45 days of enrollment.

<b>Health/Nutrition File Review EHS</b>						
KEY	Center	Location ID#	Reviewer	Date Reviewed		

<i>0 =Incomplete/Not In File/Fail</i>						
<b>1 =Complete/Pass</b>	Guidance and C.F.R.#	Child 1	Child 2	Child 3	Child 4	Child 5
<i>* =Not Applicable</i>						
<b>1st Ht/Wt/HC Graph Date</b>	Within 60 days of entry					
<b>Days Between Entry</b>						
<b>1st Ht/Wt/HC Graphed Within 60 Days</b>	Within 60 days of entry				of	1st Height and weight graphed within 60 days of enrollment.
<b>Additional Ht/Wt/HC Recorded</b>	HC needed until two years old.				of	Additional heights and weights recorded every 6 months.
<b>Additional Ht/Wt/HC Graphed</b>					of	Additional heights and weights graphed every 6 months, within 30 days of recording.
<b>All Follow-Up Complete for Ht/Wt/HC</b>	1304.20 a 1 A, B; d				of	Follow-ups documented on children not receiving WIC services and ht/wt is ≥95%
<b>1st Hearing Screen Date</b>	≤45 days of entry					
<b>Days Between Entry</b>						
<b>1st Hearing Screen Done Within 45 Days</b>	≤45 days of entry				of	1st year hearing screening done within 45 days of enrollment.
<b>Hearing Screen Results</b>	Refer within 14 days (42 days for delegates) 1304.20 b1; 1308.5					
<b>1st Hearing Follow-Up Completed</b>					of	Follow-ups documented within 2 weeks of 1st failed hearing screen. (6 weeks for delegates)
<b>1st Vision Screen Date</b>	≤45 days of entry					
<b>Days Between Entry</b>						
<b>1st Vision Screen Within 45 Days</b>	≤45 days of entry				of	1st year vision screening done within 45 days of enrollment.
<b>Vision Screen Results</b>	Refer in 14 days (42 days for delegates) after second failed screen.					
<b>1st Vision Follow-Up Completed</b>					of	Follow-ups documented within 2 weeks of 1st failed vision screen. (6 weeks for delegates)
<b>First Well Child Check Date</b>						
<b>1st Well Child Check Within 30 Days</b>	Within 1 year prior to entry, or 30 days after entry.				of	1st year well child exam complete within 30 days of enrollment.
<b>Additional Well Child Checks Done on Schedule</b>					of	Additional well child checks completed on schedule.
<b>Exclusion Letter Sent For Missing 1st Well Child Exam</b>	sent within 45 days or verified appointment.				of	Inadequate exclusion health letters for missing 1st year well child check sent out within 31 days of enrollment and there is no verified appointment.
<b>Follow-Up for Missing Additional Well Child Checks</b>					of	Follow-up for missing additional well child exams.
<b>Hgb./Hct. Done on Schedule</b>					of	Hemoglobin recorded on schedule.
<b>Hgb./Hct. Result</b>						

**Health/Nutrition File Review EHS**

KEY	Center	Location ID#	Reviewer	Date Reviewed						
0 =Incomplete/Not In File/Fail										
1 =Complete/Pass	Guidance and C.F.R.#	Child 1	Child 2	Child 3	Child 4	Child 5				
* =Not Applicable										
Follow-Up (Nutrition Education Provided) For Hgb 10.0-11.5 g/dl, hct 30-35%									of	Follow-ups documented on children not receiving WIC services and hgb 10.0-11.9 g/dl, hct 30-35%
Follow-Up (Refer to RD or Parent Refusal) For hgb<10 g/dl, hct<30%									of	Follow-ups documented on children not receiving WIC services and hgb<10 g/dl, hct<30%.
Child T.B. Complete at One Year Old									of	Child T.B. tests complete at one year old.
Immunizations are Up-To-Date	1304.20 A								of	Immunizations are up to date.
Medical Home Identified										
Follow-Up for No Medical Home	Ongoing follow-up every 45 days 1304.20 a 1 i; e 4								of	Follow-ups documented within 60 days on children needing a medical home.
Dental Home Identified										
Follow-Up for No Dental Home	Ongoing follow-up every 45 days 1304.20 a 1 i; e 4								of	Follow-ups documented every 60 days on children needing a dental home.
Child Health History Completed									of	Health histories completed at placement (within 45 days of enrollment for delegates).
2nd Year Health History Reviewed by Staff and Parent	Staff and parent signature for 2nd year 1304.20 a 1 i, b 1								of	Health histories reviewed by staff. (2nd year signed by staff and parents)
Health Problems Identified										
Follow-Up for Health Problems									of	Health concerns identified on health histories or physical addressed and documented.
Prenatal History Completed									of	Prenatal history completed.
Child Nutrition History Completed	≤45 days of entry (SOP required at placement)								of	Nutrition histories completed at placement (within 45 days of enrollment for delegates).
2nd Year Nutrition History Reviewed by Staff and Parent	Parent and staff review signature for 2nd year 1304.23 a, 2								of	Nutrition histories reviewed by staff (2nd year signed by staff and parents).
Nutrition Problems Identified										
Follow-Up for Nutrition Problems	Nutrition assessment in process ≥90 days of entry 1304.22 b 3								of	Nutrition concerns identified on the nutrition history or physical are addressed and documented.
Special Diet Identified	Type identified (special diet/religious)									
Special Diet Verification Obtained by an M.D.	Physician assistant or nurse also acceptable.								of	Special diet verifications completed by a physician, physician assistant, or nurse.

<b>Health/Nutrition File Review EHS</b>						
<i>KEY</i>	Center	Location ID#	Reviewer	Date Reviewed		

<i>0 =Incomplete/Not In File/Fail</i>										
<i>1 =Complete/Pass</i>	Guidance and C.F.R.#	Child 1	Child 2	Child 3	Child 4	Child 5				
<i>* =Not Applicable</i>										
<b>Special Diet Forms Complete and In File</b>	Referred to R.D., Dr. verification, sent to kitchen 1304.23 c 6							of		Special diet forms are completed and in file.
<b>Menu Modifications Developed By R.D.</b>	Not required for religious preference.							of		Menu modifications are developed by an R.D
<b>Follow-Up if Needing Dental Treatment</b>	Treatment needed followed up every 30 days 1304.20 c 3 ii, d							of		Follow-ups documented on children needing dental treatment. (and every 60 days thereafter)

<b>Notes</b>										
1										
2										
3										
4										
5										

## Safe Environments Checklist

**Site:**

**Date:**

**Reviewer:**

1 = Yes 0 = No \* = Not Applicable

**Required Postings**

	<u>Meets Requirement?</u>	<u>Comments</u>
1. Facility License (posted in a prominent place). (Licensing 101260)		
2. Designation of Administrative Responsibilities (Licensing 101312, form #306) available at site.		
3. Evacuation routes (posted next to all exits) are clearly marked so that exits to the outside are unmistakable. 1304.53 a 10 vii; 1304.22 a 3		
4. Tobacco free policy sign/sticker is posted and parent signatures are obtained. 1304.53 a 8		
5. Non-Discrimination Posters, CFR 45: 84.4, "And Justice For All" and Complaint Procedure are posted.		
6. Personal and Parents Rights (Licensing 101223) (from #995)		
7. Has the center received any Type A deficiencies within the past 12 months?		
8. If so, is the Type A deficiency appropriately posted? (Must be posted for 30 days following violation).		
9. Is there evidence in each child's file that the parent/guardian received a copy of the Type A deficiency (signature page provided by CL)?		
10. For each family enrolled within the past 12 months, did they receive a copy of the Type A deficiency (evidence in child's file)?		

**Indoor Environment**

**Restrooms**

11. Bathroom facilities are clean, free of odor, in good repair and easily reached by children.		
12. Bathroom facilities are separated from areas used for cooking, eating, or children's activities. 13043.53 a 10 xiv		
13. Toilet paper is located where children can reach it without having to get up from the toilet.		

14. Paper towels and liquid soap are readily available at all sinks and are within the reach of children.

15. There is an identified adult bathroom.

**Kitchens**

16. Refrigerator, microwave, food warmers and carts are clean.

**Classrooms**

17. There is an isolation area with a mat or cot available for ill children. (Licensing 10136.2)

18. Classrooms are maintained at an adequate temperature (approx. 68° -85°). 1304.53 a 10 xiv

## Safe Environments Checklist

**Site:**

**Date:**

**Reviewer:**

1 = Yes 0 = No * = Not Applicable		
19. Windows and glass doors are constructed, adapted, or adjusted to prevent injury to children (they are sufficiently marked or they have sufficient barriers to prevent injury). Bottom windows are lockable. 1304.53 a 10 xii		
20. Windows cannot be opened more than 6 inches from the bottom.		
21. All windows have closed, permanent screens.		
22. Pull cords for blinds are out of reach of children and knot-free.		
23. Windows, doors, ceilings and walls are clean.		
24. Walls and ceilings have no peeling paint and no cracked or falling plaster.		
25. Flammable, dangerous materials or potential poisons, and cleaning supplies are stored in cabinets (locked or out-of-reach of children) or storage facilities, separate from stored medications and food. 1304.53 a 10 iii		
26. Garbage and trash are covered (exception – mealtime) and stored and disposed of in a safe, sanitary manner. 1304.53 a 10 xvi		
27. Trash is stored away from heaters or other heat sources.		
28. Napping mats are stored in a sanitary manner, not touching and bedding is laundered weekly. (Licensing law)		
29. Materials and toys are stored in a safe and orderly fashion when not in use (e.g. in their assigned places, not out where people can trip over them) and storage areas are well organized. 1304.53 b 1 vi		
30. Floors are smooth and have nonskid surfaces. Rugs are skid-proof, nailed or taped down.		
31. Doors to places that children can enter, such as bathrooms, can be easily opened from the outside by a child or an adult.		
32. Doors have slow closing devices and/or rubber gaskets on the edges to prevent finger pinching.		
33. Electrical cords are out of children's reach and placed away from doorways and traffic paths.		
34. Covers or guards for fans have openings small enough to keep fingers out.		
35. No free-standing space heaters are used.		
36. Pipes and other hot surfaces cannot be reached by children or are covered to prevent burns.		
37. There is no smoking, lighted cigarettes, matches or lighters around children.		
38. Drawers are closed to prevent tripping or bumps.		
39. Adults can easily view and supervise all areas used by children.		
40. "Animals in the Classroom Policy" is followed.		

## Safe Environments Checklist

**Site:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Reviewer:** \_\_\_\_\_

1 = Yes 0 = No * = Not Applicable		
41. Poisonous plants are not present.		
42. All adult handbags are stored out of children's reach.		
43. Stable step stools are available where needed.		
44. Safety covers are on all outlets. 1304.53 a 10 xi		
45. All decorative materials such as curtains, drapes, hangings, cardboard, canvas, plastic partitions/half walls or any other combustible decorative material is flame retardant/treated. CFC 2501.5		
46. Decorative materials or postings do not block or conceal any exit door, exit lights, fire alarm, hose cabinet, or fire extinguisher, or electrical panel. CFC 2501.5		
47. A maximum of 25% of wall area is used for decorative materials that are not flame retardant/treated. (If more than 25% of wall is used, all materials on the wall must be fire retardant treated.)		
48. Classroom decorations, (bulletin boards children's art work, etc.) is a minimum of four (4) feet away from the corner of any adjoining wall and from any exit.		
49. There is no paper on exit doors.		
50. Extension cords are not used in facility.		
51. All exits/entry pathways maintain a minimum 3ft. clearance.		
52. There is a child accessible supply of drinking water.		
<b>Emergency Preparedness</b>		
53. Emergency disaster plan is posted in each room. (Licensing form #610) 1304.22 a 3		
54. Disaster supplies are readily accessible and identified (food and backpack – SOP). 1304.53 a 3		
55. Exits are clearly marked and unobstructed. 1304.22 a 3; 1304.53 a 10 vii		
56. Lighted exit signs are in working order at all times (replace bulbs as needed).		
57. The facility has approved, regularly serviced and readily available fire extinguishers. 1304.53		
58. There are working smoke detectors in each classroom. 1304.53 a 10 vi		
59. Room is well lit and emergency lighting or working flashlight is available. (All bulbs are working). 1304.53 a 10 xi		
60. A well-supplied first aid kit is accessible and conspicuous (in a cupboard, marked with a red+) and out of reach of children. First aid manual is nearby. 1304.23 f 1		

## Safe Environments Checklist

**Site:**

**Date:**

**Reviewer:**

1 = Yes 0 = No * = Not Applicable		
61. Identified a well-stocked first aid kit for field trips (backpack/fanny pack). Emergency cards are taken on field trips.		
62. Required staff are certified in first aid and infant/child CPR with documentation in site personnel file.		
63. Staff emergency cards are complete with all doctor information and staff are aware of where they are kept.		

### EHS Only

64. The diaper changing area is located away from areas used for cooking, eating, or children's activities.		
65. A utility sink is specifically used to clean portable potties.		
66. Diapers are disposed in a safe, sanitary manner.		
67. Non-porous gloves are available for use when dealing with bodily fluids.		
68. Staff, volunteers, and children wash their hands with soap and water after diapering or toilet use; before food-related activities; when ever hands are contaminated with blood or other bodily fluids; and after handling pets or other animals; etc.		
69. Infant sleeping arrangements use firm mattresses and avoid soft bedding materials such as comforters, pillows, fluffy blankets, or stuffed toys.		
70. Cribs are at least three feet apart from each other.		
71. Infant toys are made of non-toxic materials and are sanitized regularly.		
72. Toys, materials, and furniture are safe, durable, and kept in good condition. Materials free of sharp edges and loose pieces, balloons and/or other plastic bags not used, no choking hazards.		
73. Facilities are available for the proper storage and handling of breast milk and formula.		
74. There is an absence of highly flammable furnishings, decorations, or materials that emit toxic fumes. 1304.53 a 10 ii		

### Outdoor Environment

75. The outdoor premises are cleaned daily and kept free of undesirable and hazardous materials (litter, etc.) and conditions (no standing pools of water, sandbox free of debris, etc.). 1304.53 a 10 viii		
76. Play areas are free of trash and poisonous plants or berries.		
77. Outdoor areas arranged to prevent children from leaving premises or getting into unsafe or unsupervised areas. 1304.53 a 9		

## Safe Environments Checklist

<b>Site:</b>		<b>Date:</b>	<b>Reviewer:</b>
1 = Yes 0 = No * = Not Applicable			
78.	Play area is easily viewed and supervised.		
79.	Play areas are free of tripping hazards. (e.g. tree roots, holes, exposed equipment anchoring devices).		
80.	Exposed concrete or hard anchoring materials are covered.		
81.	The playground equipment is in good repair and safe condition, layout minimizes possibility of injury to children and is accessible to children with disabilities (e.g. adequately secured to the ground, free of sharp edges and/or splinters, soft falling surface, wheelchair accessible).		
82.	Soft material under playground equipment (sand, bark, etc.) is a minimum of 12 inches deep. Rubber surface was installed by licensed professional.		
83.	Bike or trike riding areas are separate from other equipment.		
84.	Slides have an enclosed at the top for children to rest on and get into position.		
85.	Slides have a flat surface at the bottom to slow children down and bottom of slide is no more than 11 inches high.		
86.	Slide ladders have flat steps/rungs and a handrail on each side.		
87.	Sheds are properly used and arranged. 1304.53 b 1 vii		
88.	Tree branches are trimmed to ensure they do not intrude upon play area. (maintain 7ft clearance around play equipment).		
89.	There is a source of drinking water accessible to children.		
<b>Additional Comments</b>			

## Safe Environments Checklist

<b>Site:</b>	<b>Date:</b>	<b>Reviewer:</b>
1 = Yes 0 = No * = Not Applicable		

Disabilities File Review						
	Center	Location ID#	Reviewer	Date Reviewed	Type of License	
<i>KEY</i>						
<i>0 = Fail/Incomplete/Not In File</i>						
<i>1 = Pass/Complete</i>	Guidance	Child 1	Child 2	Child 3	Child 4	Child 5
<i>* =Not Applicable</i>						
Date Of Birth						
Age Of Child						
Date Of Entry						
System To Ensure Confidentiality in Place and Implemented	Sign out log, locked cabinet					Systems in place and implemented to ensure confidentiality.
Screens						
Developmental Screen Type						
Developmental Screen Date						
Days Between Entry and Developmental Screen						
Developmental Screen In 45 Days					of	Developmental screens done within 45 days of enrollment.
Developmental Screen Result						
Developmental Rescreen Date	Rescreen if failed first screen					
Developmental Rescreen Result						
Speech Screen Type						
Speech Screen Date						
Days Between Entry and Speech Screen						
Speech Screen in 45 Days					of	Speech screens done within 45 days of enrollment.
Speech Screen Result						
Behavioral Screen Type						
Behavioral Screen Date						
Days Between Entry and Behavioral Screen						
Behavioral Screen in 45 Days	After 30 days and before 45 days for DECA screener				of	Behavioral screens done within 45 days of enrollment (and after 30 days for DECA).
Behavioral Screen Result						
Necessary Re-Screens Done According to Program Guidelines					of	Necessary re-screens done according to program guidelines.
Pre-Individual Education Plan						
Date Need Suspected	Screening, teacher observation, parent request, etc.					
Type Of Need Suspected						
Date Request For Follow Up Services Sent						
Request for Follow-Up Services Sent in Timely Manner	Within 2 weeks for SOP				of	Request for follow-up services sent in timely manner.
Origin Of Request	Parent, teacher, etc.					
All Consent Forms are Included with Requests for Follow-Up Services					of	All consent forms are included with requests for follow-up services.
Date Request For Follow Up Services Processed						
Days Between Request for Follow-Up Sent and Processed						
Request for Follow-Up Services are Processed in a Timely Manner	20 Days for SOP				of	Request for follow-up services processed in a timely manner.
Evidence of Cross-Component Integration and Cooperation					of	Evidence of cross-component integration and cooperation before IEP.
Evidence That IEP Process and Parent Rights are Explained to Parents by Informed Staff	Interpreters used when necessary				of	Evidence that IEP process and parent rights are explained to parents by informed staff.

Disabilities File Review						
	Center	Location ID#	Reviewer	Date Reviewed	Type of License	
<i>KEY</i>						
<i>0 = Fail/Incomplete/Not In File</i>						
<i>1 = Pass/Complete</i>						
<i>* =Not Applicable</i>						
	Guidance	Child 1	Child 2	Child 3	Child 4	Child 5
<b>Parents Notified of Up-Coming IEP Meetings and Reviews.</b>	Family Contact Log, Meeting Notifications, and/or signed IEP's					
<b>Staff Notified of Up-Coming IEP Meetings</b>	Unless IEP is prior to enrollment					
<b>Assessment, C.S.T., or S.S.T. Date Child Has been previously diagnosed</b>						
<b>Individual Education Plan</b>						
<b>Categorical Diagnosis</b>	Speech, developmental, etc.					
<b>IEP Date</b>						
<b>Days Between Assessment and IEP</b>						
<b>IEP Within 60 Days of Parent Signature on Assessment</b>	Legal Exceptions Allowed					
<b>Current, Legible Copies of IEP in Child's File</b>						
<b>Statement of the Child's Present Level of Performance</b>						
<b>Statement of the Annual Goals and Objectives</b>						
<b>Statement of the Special Education and Related Services to be Used</b>						
<b>Identification of the Persons Responsible for Delivery of Services</b>						
<b>Review Date is Documented</b>						
<b>Parent Signature</b>						
<b>Head Start Staff Signature</b>	Unless IEP is prior to enrollment					
<b>Multi-Disciplinary Staffing Took Place Prior to the Beginning of Services</b>	Or immediately after, if applicable					
<b>An Interpreter in the Family's Preferred Language was Available for All IEP Meetings/Reviews</b>						
<b>Individual Education Plan Follow-Up</b>						
<b>There is Evidence of a Transition Plan In/Out of Head Start for Children with Disabilities</b>	i.e. IFSP, staffing notes, etc					
<b>All Special Education Services Have Begun and There is Evidence That They are Ongoing</b>						
<b>Notes</b>						

Family Partnership Agreements File Review										
KEY	Center	Location ID#	Reviewer	Date Reviewed						
0 = No/Incomplete										
1 =Yes/Complete	Guidance	Child 1	Child 2	Child 3	Child 4	Child 5				
* =Not Applicable										
Date of Birth										
Age of Child		0	0	0	0	0				
Enrollment Date										
Services Requested										
Follow-up Documentation for Services Requested	Every 4 months minimum						0	of	0	Follow-up documentation for services requested.
F.P.A. Completion Date										
Days Between Enrollment and F.P.A. Completion		0	0	0	0	0				
F.P.A. Completed Within 90 Days							0	of	0	F.P.A. completed within 90 days of enrollment?
All Dates and Signatures on File							0	of	0	All dates and signatures on file.
Immediate Needs Identified	Or information requested on FPA						0	of	0	Immediate needs identified.
Follow-up Documentation on Immediate Needs							0	of	0	Follow-up documentation for immediate needs.
Needs Identified	Or information requested on						0	of	0	Needs are identified.
Follow-up Documentation on Needs								of		Follow-up documentation for needs.
Strengths Identified								of		Strengths identified.
Individualized Goals	Score 0, 2, or 4							of		Individualized goals.
Realistic Timetables Set (Staff)	Score 0, 2, or 4							of		Realistic Timetables Set (Staff).
Clear Strategies/Steps (Staff)	Score 0, 2, or 4							of		Clear Strategies/Steps (Staff).
Staff Responsible Identified								of		Staff Responsible Identified.
Follow-up Documentation by Staff Responsible	Score 0, 2, or 4; Every 4 months							of		Follow-up Documentation by Staff Responsible.
Pre-Existing Plans Incorporated								of		Pre-Existing Plans Incorporated.
Referred to Outside Agencies								of		Referred to Outside Agencies.
Follow-up Documentation on Referrals								of		Follow-up Documentation on Referrals.
<b>Notes/Comments</b>										
1										
2										
3										
4										
5										







Education File Review						
	Center	Location ID#	Reviewer	Date Reviewed		
<i>KEY</i>						
<i>0 = Fail/No/Incomplete</i>						
<i>1 = Pass/Yes/Complete</i>						
<i>* = Not Applicable</i>						
Date of Birth						
Age of Child						
Initial Entry Date						
2nd Year Entry Date						
Initial Orientation Date						
2nd Year Orientation Date						
Developmental Screen Date						
Developmental Screen Result						
Days Between Enrollment and Developmental Screen						
Developmental Completed Within 45 Days of Enrollment Screen						of developmental screens not completed within 45 days of enrollment
Subsequent Developmental Screens	Within 2 weeks of birthday, SOP only.					
Speech/Language Screen Date						
Speech/Language Screen Result						
Days Between Enrollment and Speech Screen						
Speech/Language Screen Within 45 Days of Enrollment						of speech screens not completed within 45 days of enrollment
Behavioral/Social/Emotional Screen Date						
Behavioral/Social/Emotional Screen Result						
Days Between Enrollment and Behavioral Screen						
Behavioral/Social/Emotional Screen Within 45 Days of Enrollment						of behavioral screens not completed within 45 days of enrollment (and after 30 days if using DECA)
Follow-up For Screeners	Re-screens or request for follow up services if needed					
Parents Notified of Screener Results 1st Home Visit/Parent Conference Date						of parents not notified of screener results
Days From Enrollment Within 45 Days of Enrollment (30 days for SOP)						of 1st home visit not done within 45 days (30 days for SOP)
2nd Home Visit/Parent Conference Date						
Within 8 Weeks of 1st Visit/Conference (8 weeks SOP; 8--10 weeks for Delegates) (12 weeks EHS)						
IDP Date						
IDP is Dated						
Information In all 3 Developmental Areas						
Individualized Strengths, Goals, and Strategies						
Consistent with Screens, Anecdotes, and DRDP assessment						
Evidence of Parent Input						
Anecdotes						
Assessment Date						
Days Between Assessment and Enrollment						
Assessment Within 60 Days of Enrollment						

Education File Review						
	Center	Location ID#	Reviewer	Date Reviewed		
<i>KEY</i>						
<i>0 = Fail/No/Incomplete</i>						
<i>1 = Pass/Yes/Complete</i>						
<i>* = Not Applicable</i>						
3rd Home Visit/Parent Conference Date	Guidance/C.F.R.#	Child 1	Child 2	Child 3	Child 4	Child 5
Within 8 Weeks of 2nd Visit/Conference						
IDP Date						
IDP is Dated						
Information In all 3 Developmental Areas						
Individualized Strengths, Goals, and Strategies						
Consistent with Screens, Anecdotes, and DRDP assessment						
Evidence of Parent Input						
Anecdotes						
Assessment Date						
Assessment Done Mid Year						
4th Home Visit/Parent Conference Date						
Within 8 Weeks of 3rd Visit/Conference						
IDP Date						
IDP is Dated						
Information In all 3 Developmental Areas						
Individualized Strengths, Goals, and Strategies						
Consistent with Screens, Anecdotes, and DRDP assessment						
Evidence of Parent Input						
Anecdotes						
Assessment Date						
Assessment Done Mid Year						
5th Home Visit/Parent Conference Date						
Within 8 Weeks of 4th Visit/Conference						
IDP Date						
IDP is Dated						
Information In all 3 Developmental Areas						
Individualized Strengths, Goals, and Strategies						
Consistent with Screens, Anecdotes, and DRDP assessment						
Evidence of Parent Input						
Anecdotes						
Assessment Date						
Assessment Done Mid Year						
6th Home Visit/Parent Conference Date						
Within 8 Weeks of 5th Visit/Conference						
IDP Date						
IDP is Dated						
Information In all 3 Developmental Areas						
Individualized Strengths, Goals, and Strategies						

Education File Review						
	Center	Location ID#	Reviewer	Date Reviewed		
<i>KEY</i>						
<i>0 = Fail/No/Incomplete</i>						
<i>1 = Pass/Yes/Complete</i>						
<i>* = Not Applicable</i>						
	Guidance/C.F.R.#	Child 1	Child 2	Child 3	Child 4	Child 5
Consistent with Screens, Anecdotes, and DRDP assessment						
Evidence of Parent Input						
Anecdotes						
Assessment Date						
Assessment Done at End of Year						
Two Home Visits and Two Parent Conferences Done During the Year						of Two Home Visits and Two Parent Conferences Indicated During the Year
All Home Visit/Parent Conferences Done on Schedule						of home visits/parent conferences not done on schedule
All Anecdotes In File						of anecdotes not in file
All Assessments Dated						of missing an assessment date
All Assessments Done On Schedule						of assessments not done on schedule
All IDP's Dated						of IDP's not dated
All IDP's Have Information In All Three Developmental Areas						of IDP's do not have information in all three developmental areas
All IDP's Have Individualized Strengths, Goals, and Strategies						of IDP's do not have individualized strengths, goals, and strategies
All IDP's Consistent with Screens, Anecdotes, and DRDP assessment						of IDP's are not consistent with screens, anecdotes, and DRDP+
All IDP's Have Evidence of Parent Input						of IDP's do not have evidence of parent input
	<b>Notes</b>					
1						
2						
3						
4						
5						
6						
7						
8						
9						

<b>Education File Review</b>						
	<b>Center</b>	<b>Location ID#</b>	<b>Reviewer</b>	<b>Date Reviewed</b>		
<i>KEY</i>						
<i>0 = Fail/No/Incomplete</i>						
<i>1 = Pass/Yes/Complete</i>	<b>Guidance/C.F.R.#</b>	<b>Child 1</b>	<b>Child 2</b>	<b>Child 3</b>	<b>Child 4</b>	<b>Child 5</b>
<i>* =Not Applicable</i>						

### Eligibility/Recruitment/Selection/Enrollment/Attendance File Review

KEY	Center	Location ID#	Reviewer	Date Reviewed						
<i>0 = No/Incomplete</i>										
<i>1 =Yes/Complete</i>	Guidance	Child 1	Child 2	Child 3	Child 4	Child 5				
<i>* =Not Applicable</i>										
<b>Accepted Enrollment Date</b>										
<b>Attendance Entry Date</b>							0	of	0	missing enrollment dates on application?
<b>Family Contact Enrollment Date</b>							0	of	0	missing enrollment dates in family contact?
<b>Teacher's Attendance Entry Date</b>							0	of	0	missing enrollment dates in teacher's records?
<b>All Enrollment Dates Match</b>							0	of	0	# of enrollment dates per file not matching?
<b>Signed Income Verification</b>	Staff signature						0	of	0	missing signed income verification?
<b>Method of Income Verification</b>							0	of	0	missing method of income verification?
<b>Meets Income Eligibility</b>							0	of	0	does not meet income eligibility?
<b>Signed Wavier if Over Income</b>							0	of	0	missing signed waiver for over income?
<b>Documentation if Qualified for Full Day Services</b>	Certificates, verification of work/school schedule						0	of	0	missing doc that show qualification for full day services?
<b>Method of Birth Verification</b>							0	of	0	missing method of birth verification?
<b>Date of Birth</b>										
<b>Age of Child</b>		0	0	0	0	0				
<b>Meets Age Eligibility</b>	Turns 3 but not >5 by December 2nd						0	of	0	does not meet age eligibility?
<b>Signed Waiver if Over/Under Age</b>							0	of	0	missing waiver for over/under age?
<b>Complete Enrollment Form</b>	All signatures, dates, etc.						0	of	0	enrollment form not complete?
<b>Comments on Enrollment Form</b>										
<b>CACFP Enrollment Application with no meal charge checked **</b>										
<b>HS Eligibility Verification Form *</b>										
<b>Complete Enrollment Form Comments on Enrollment Information</b>	Admissions policy, parents rights, personal rights, child abuse receipt.						0	of	0	missing enrollment form info?
	<b>Notes/Comments</b>									
1										
2										
3										
4										
5										
*Available at site or admin. office										
**Available at administrative office										

