Subpart J Program Management and Quality Improvement

Policies and Procedures

Aligned with the 2016 Head Start Program Performance Standards

(Standards 1302.100 – 1302.103)

Table of Contents

SUBPART J – PROGRAM MANAGEMENT AND QUALITY IMPROVEMENT

PURPOSE (Standard 1302.100)

A program must provide management and a process of ongoing monitoring and continuous improvement for achieving program goals that ensures child safety and the delivery of effective, high-quality program services.

CSNT Head Start implements a program that provides continuous on-going monitoring of the program in all areas. See On-going Monitoring Plan and forms.

MANAGEMENT SYSTEMS (Standard 1302.101)

    (a) Implementation: A program must implement a management system that:

        (1) Ensures a program, fiscal, and human resource management structure that provides effective management and oversight of all program areas and fiduciary responsibilities to enable delivery of high-quality services in all of the program services described in subpart C, D, E, F, G, and H of this part;

        (2) Provides regular and ongoing supervision to support individual staff professional development and continuous program quality improvement;

        (3) Ensures budget and staffing patterns that promote continuity of care for all children enrolled, allow sufficient time for staff to participate in appropriate training and professional development, and allow for provision for the full range of services described in subparts C, D, E, F, G, and H of this part; and,

        (4) Maintains an automated accounting and record keeping system adequate for effective oversight.

PROCEDURES

1. See Agency Organizational Chart for management structure. The organizational structure for CSNT Head Start ensures effective management and oversight in all areas of the program.

2. All areas of the program are monitored on an on-going basis daily, weekly, monthly, and annually. See Monitoring Plan. Monitoring data is collected, analyzed, and reported to the Program Monitor. The Program Manager uses this data to plan and implement Professional Development Trainings for the staff. (See Monitoring Plan)
3. The organizational structure and staffing patterns for the program assure that children and families enrolled in the program receive high-quality care on a daily basis. See Head Start Training and Professional Development Plan. Staff are given time for professional development training including coaching/mentoring.
4. Technology is utilized within the Agency and the Head Start Program to efficiently and effectively oversee the program. The Fiscal accounting system is Abila Sage MIP, the program record keeping system is ChildPlus. Both of these systems allow the program to pull reports and track data on a regular basis.

(b)Coordinated approaches: (Standard 1302.101(b)) At the beginning of each program year, and on an on-going basis throughout the year, a program must design and implement program-wide coordinated approaches that ensure:

(1) The training and professional development system, as described in 1302.92, effectively supports the delivery and continuous improvement of high-quality services;

(2) The full and effective participation of children who are dual language learners and their families, by

(i)   Utilizing information from the program's community assessment about the language spoken throughout the program service area to anticipate child and family needs;

(ii)   Indemnifying community resources and establishing ongoing collaborative relationships and partnerships with community organizations consistent with the requirements in 1302.53(a); and,

(iii)   Systematically and comprehensively addressing child and family needs by facilitating meaningful access to program services, including, at a minimum, curriculum, instruction, staffing, supervision, and family partnerships with bilingual staff, oral language assistance and interpretation, or translation of essential program materials, as appropriate.

(3) The full and effective participation of children with disabilities, including but not limited to children eligible for services under IDEA, by providing services with appropriate families, program materials, curriculum, instruction, staffing, supervision, and partnerships, at a minimum, consistent with section 504 of the Rehabilitation Act and the Americans with Disabilities Act[18] , and,

(4) The management of program data to effectively support the availability, usability, integrity, and security of data. A program must establish procedures on data management, and have them approved by the governing body and policy council, in areas such as quality of data and effective use and sharing of data, while protecting the privacy of child records in accordance with Subpart C of part 1303 of this chapter and applicable federal, state, local, and tribal laws.

PROCEDURES

1. Policies and Procedures are established to implement coordinated services throughout the program. (See Program Plans and Program Policies and Procedures)
2. Training and Professional Development implementation ensures that staff are able to deliver high-quality services.
3. The Community Assessment and Updates provide information to the program about languages spoken throughout the program service area so that the program can ensure that families have access to the services that they need.
4. The *Parent and Staff Handbook* lists the resources within the service area available to dual language children and families.
5. The program has ongoing collaborations/partnerships with public schools in the use of ESL/bi-lingual staff for children dually enrolled with the District and Head Start.
6. All curriculums/teaching materials used in the program are valid and reliable for dual language learners. There is also one management staff person who has experience/education in ESL/bi-lingual instruction. This person assists teaching staff with Dual Language Instruction.
7. At least one Family Service Worker (FSW) is bi-lingual in the second language most prominent in the program service area. This FSW is able to assist other staff with interpretations and translations, as appropriate. (See Family And Community Engagement/ERSEA Policies and Procedures)
8. Children with disabilities are enrolled in the Head Start Program and receive services through the Head Start Program, public school system, and the special education program within the service area. All

curriculums/materials used within the program are valid and reliable for children with disabilities. Wherever possible, the special education teacher will assist Head Start teaching staff in providing services to the children with special needs. (See Disabilities Content Area/ERSEA Policies and Procedures).

9. Program data is monitored for accuracy on a daily, weekly, and monthly basis. It is distributed, discussed and analyzed at monthly staff meetings through data reports. No personal identifiable information is listed on data reports. The program follows the Family Educational Rights and Privacy Act (FERPA) to safeguard child records. (See FINANCIAL AND ADMINISTRATIVE REQUIREMENTS- Subpart C – Protection for the Privacy of Child Records)

ACHIEVING PROGRAM GOALS (Standard 1302.102)

(a) **Establishing program goals: A program, in collaboration with the governing body and policy council, must establish goals and measurable objectives that include:**

(1) Strategic long-term goals for ensuring programs are and remain responsive to community needs as identified in their community assessment as described in subpart A of this part;

(2) Goals for the provision of educational, health, nutritional, and family and community engagement program services as described in the program performance standards to further promote the school readiness of enrolled children;

(3) School readiness goals that are aligned with the *Head Start Early Learning Outcomes Framework: Ages Birth to Five*, state and tribal learning standards, as appropriate, and requirements and expectations of schools Head Start children will attend, per the requirements of subpart B of part 1304 of this part; and,

(4) Effective health and safety practices to ensure children are safe at all times, per the requirements in 1302.47, 1302.90(b), 1302.92(c)(1), and 1302.94 and part 1303 subpart F, of this chapter.

PROCEDURES

1. Five-year program goals are established within the first year of the five-year grant period. (See Strategic Plan)

2. Program goals are aligned in Education, Parent, Family and Community Engagement, Health Services, and Program Design and Management.
3. The total number of program goals will range from (5) to (10). More than (10) goals can be difficult to track and implement.
4. All program goals have at least one objective and one outcome and are aligned with the PFCE and the School Readiness Goals.
5. Data from daily, weekly and monthly health and safety checks are analyzed when establishing goals in Health and Safety. Goals also encompass the implementation of all new or existing health and safety regulations.

(b) <u>Monitoring program performance</u>. (Standard 1302.102(b))

    (1) <u>Ongoing oversight and correction</u>: In order to ensure effective ongoing oversight and correction, a program must establish and implement a system of ongoing oversight that ensures effective implementation of the program performance standards, including ensuring child safety, and other applicable federal regulations as described in this part, and must:

        (i) Collect and use data to inform the process;

        (ii) Correct quality and compliance issues immediately, or as quickly as possible.

        (iii) Work with the governing body and the policy council to address issues during the ongoing oversight and correction process and during federal oversight; and,

        (iv) Implement procedures that prevent recurrence of previous quality and compliance issues, including previously identified deficiencies, safety incidents, and audit findings.

PROCEDURES

    1. See Monitoring Plan

    (2) <u>Ongoing assessment of program goals</u>: (Standard 1302.102(b)(2))   A program must effectively oversee progress towards program goals on an on-going basis and annually must:

        (i) Conduct a self-assessment that used program data including aggregated child assessment data, and professional development

and parent and family engagement data as appropriate, to evaluate the program's progress towards meeting goals established under paragraph (a) of this section, compliance with program performance standards throughout the program year, and the effectiveness of the professional development and family engagement systems in promoting school readiness;

(ii) Communicate and collaborate with the governing body and policy council, program staff, and parents of enrolled children when conducting the annual self-assessment; and,

(iii) Submit findings of the self-assessment, including information listed in paragraph (b)(2)(i) of this section to the responsible HHS official.

PROCEDURES

1. An internal program self-assessment is completed annually.
2. The program Self-Assessment Committee approves the assessment tool, sites, dates, and assigned assessment areas and the team leader for those areas. (Team Leaders cannot oversee the assessment of areas they are responsible for implementing.)
3. Team leaders select members for their team from currently employed staff, board members, policy council members, and community partners. Other members are assigned, as appropriate.
4. After completing the self-assessment, each team leader completes a strengths and weakness form for the area that they assessed.
5. The Head Start Director compiles the list of strengths and weaknesses for each area that was assessed. This creates the Program Self-Assessment Findings Document.
6. Program Improvement Plan (PIP) are created for each area where there was a weakness. The staff with implementation responsibility for that area are responsible for completing the Program Improvement Plan (PIP).
7. All PIPs are monitored and tracked for completion. All areas where there are obstacles in completing the SA PIP, require a meeting to discuss solutions to the obstacles. Efforts to find solutions are document.
8. The SA findings are brought back before the SA Committee for approval. Once the SA findings are approved, the document is sent to the Policy Council and Governing Board for approval.
9. The current SA findings are uploaded into the Head Start Enterprise System (HSES) as part of the grant application.

(c) Using data for continuous improvement. (Standard 1302.102(c))

(1) **A program must implement a process of using data to identify program strengths and needs, develop and implement plans that address program needs, and continually evaluate compliance with program performance standards and progress towards achieving program goals described in paragraph (a) of this section.**

(2) **This process must:**

    (i)   **Ensure data is aggregated, analyzed and compared in such a way to assist agencies in identifying risks and informing strategies for continuous improvement in all program service areas;**

    (ii)   **Ensure child-level assessment data is aggregated and analyzed at least three times a year, including for sub-groups, such as dual language learners and children with disabilities, as appropriate, except in programs operating fewer than 90 days, and used with other program data described in paragraph (c)(2)(ix) of this section to direct continuous improvement related to curriculum choice and implementation, teaching practices, professional development, program design, and other program decisions, including changing or targeting scope of services; and,**

    (iii)   **For programs operating fewer than 90 days . . . (Not Applicable)**

    (iv)   **Use information from ongoing monitoring and the annual self-assessment, and program data on teaching practice, staffing and professional development, child-level assessments, family needs assessments, and comprehensive services, to identify program needs, and develop and implement plans for program improvement; and,**

    (v)   **Use program improvement plans as needed to either strengthen or adjust content and strategies for professional development, change program scope and services, refine school readiness and other program goals, and adapt strategies to better address the needs of sub groups.**

PROCEDURES

1. CSNT Head Start uses several different sources of data to identify program strengths and weaknesses including child assessment data, family partnership goals, data reports created through Child Plus, On-going

Monitoring data, financial reports, budget monitoring/analyzing data, Monthly Progress Reports, Self-Assessment data, Program Information Report Monthly data, Maintenance Action Ticket/Supply Ticket data, CLASS Observations, Professional Development Plans/Performance Evaluations, etc.

2. Data is aggregated at least monthly through Program Progress Reports and On-going Monitoring Reports.
3. Program Improvements plans are implemented where there are identified program weaknesses. These plans are tracked/monitored for progress towards improvement.
4. Information from data reports, improvement plans, and assessments are used to guide the program in change of scope and services, plan upcoming professional development, realign program school readiness goals, family partnership goals, and/or strategic program goals.

(d) Reporting. (Standard 1302.102(d))

   (1) A program must submit:

   (i) Status reports, determined by ongoing oversight data, to the governing body and policy council, at least semi-annually;

   (ii) Reports, as appropriate, to the responsible HHS official immediately or as soon as practicable, related to any significant incidents affecting the health and safety of program participants, circumstances affecting the financial viability of the program, breaches of personally Identifiable Information, or program involvement in legal proceedings, any matter of which notification or a report to state, tribal, or local authorities is required by applicable law, including at a minimum:

   1. Any reports regarding agency staff or volunteer compliance with federal, state, tribal, or local laws addressing child abuse and neglect or laws governing sex offenders;

   2. Incidents that require classrooms or centers be closed for any reasons;

   3. Legal proceedings by any party that are directly related to program operations; and,

4. **All conditions required to be reported under 1304.12, including disqualification from the Child and Adult Care Food Program (CACFP) and license revocation.**

(2) Annually, a program must publish and disseminate a report that complies with section 644(a)(2)[30] of the Act and includes a summary of a program's most recent community assessment, as described in 1302.11(b), consistent with privacy protection in subpart C of part 1303 of this chapter.

(3) If a program has had a deficiency identified, it must submit, to the responsible HHS official, a quality improvement plan as required in section 644(a)(2)[31] of the Act.

PROCEDURES

1. CSNT Head Start provides status reports to the governing board and the policy council with oversight data monthly. Governing board and policy council reports include Head Start Director's Report, Finance Report, Child Assessment Reports, CLASS Reports, Self-Assessment Reports, Program Information Reports, Human Resources Reports, Support Services Reports, and Progress on attaining Program Goals, School Readiness Goals, Family Partnership Goals with Progress, and CLASS Reports. (Program Goals, School Readiness Goals, and Family Partnership Goals will be tracked for progress at least (3) times per year.)

2. The Agency completes an Annual Report after the conclusion of the audit each year. The Annual Report discloses information listed under 644(a)(2) of the Act and includes a summary of the most recent community assessment.

3. The Agency submits to the responsible HHS official, a quality improvement plan for any deficiencies identified as required in section 641A(e)(2) of the Act.

IMPLEMENTATION PERFORMANCE STANDARDS (Standard 1302.103)

(a) A current program as of November 7, 2016, must implement a program wide approach for the effective and timely implementation of the changes to the program performance standards, including the purchase of materials and allocation of staff time, as appropriate.

(b) A program's approach to implement the changes included in parts 1304 of this chapter must ensure adequate preparation for effective and timely service delivery to children and families including, at a minimum, review of

community assessment data to determine any changes in the number of children who can be served, as necessary, the purchase of and training on any curriculum, assessment, or other materials, as needed, assessment of the program-wide professional development needs, assessment of staffing patterns, the development of coordinated approaches described in 1302.101(b) and the development of appropriate protections for data sharing; and children enrolled in the program November 7, 2016 are not displaced during a program year and that children leaving Early Head Start or Head Start at the end of the program year following November 7, 2016 as a result of any slot reduction received services described in 1302.70 and 1302.72 to facilitate successful transitions to other programs.

PROCEDURES

1. CSNT Head Start implements a Head Start Performance Standards Implementation Plan for any new and/or updated standards.
2. Head Start Performance Standard Implementation Plans will include the objective of the plan, oversight areas (or areas to be addressed), action steps, timeframe, responsibilities, documentation, and date to be completed.
3. After the completion of the plan, two administrative signatures are required to verify that each task listed within the plan has been completed.
4. Implementation plans is monitored for progress regularly.
5. The plan provides adequate preparation for effective implementation of the plan.

(Insert Organizational Chart Here)