



ADRIAN PUBLIC SCHOOLS

Tradition of Opportunities
Future of Possibilities

Agenda

Regular Meeting
Monday, October 25, 2021
6:00 p.m.

A. Call to Order

1. Pledge of Allegiance
2. Approval of Agenda
3. Mission Statement
4. Good News Reports
5. Communications
 - a. Resignation of Holly Cupp, Paraprofessional
 - b. Resignation of Madeline Gazarek, Head Start
 - c. Resignation of Jeremiah Davies, Director of Recreation/Communications
 - d. Resignation of Amaris Benschoter, Paraprofessional

B. Closed Session

- a. AESPA negotiation updates

C. Tentative Action

- a. AESPA tentative agreement

D. Recommended Action

1. Consent Agenda
 - a. Approval of Minutes from October 11, 2021, Regular Meeting
 - b. Approval of Minutes from October 11, 2021, Closed Session, hand out
 - c. Approval of Minutes from October 18, 2021, Special Meeting
 - d. Approval of Hire- Morgan Dufty, Paraprofessional
 - e. Termination of Employee
2. Business Requiring Board Action
 - a. Acceptance of Donations
3. Business Requiring Future Board Action
 - a. First reading to review bids for the track fence replacements
 - b. First reading to review the purchase of Michigan Virtual University courses for Springbrook Middle School and Adrian High School
 - c. First reading to review the purchase of Chromebooks and SMS and AHS

E. Board Workshop

1. Michigan Leadership Institute
 - a. Superintendent Search Planning

F. Reports from Superintendent and Staff

- a. Head Start Monthly report

G. Future Meetings and Business

1. Board Committee Reports
2. Board Member Comments
3. Meeting Dates and Upcoming Events
 - a. 6th Grade Orchestra, October 25, 2021, 7:00 p.m.
 - b. 7th-12th Grade Orchestra Concert, October 26, 2021, 7:00 p.m.
 - c. LCASB Dinner, November 2, 2021, 6:00 p.m.
 - d. Outstanding Teacher/Mentor, November 3, 2021
 - e. BOE Meeting, November 8, 2021, 6:00 p.m. B-100

H. Public Comment

I. Adjournment

In partnership with families and our community, Adrian Public Schools provides a quality education, challenging students to excel academically and inspiring them to become contributing citizens within our diverse, ever-changing society.

EXECUTIVE SUMMARY

DATE: October 25, 2021

CONTACT PERSON: Bob Behnke

PURPOSE:

The resignation of Holly Cupp

EXPLANATION:

Under Board Policy 4223, the Superintendent is authorized to accept employee resignations or retirements on behalf of the Adrian Board of Education. Holly has submitted her resignation from Adrian Public Schools effective October 22, 2021.

RECOMMENDATION:

It is the recommendation of the Superintendent that the Adrian Board of Education acknowledge the resignation of Holly Cupp effective October 22, 2021.

EXECUTIVE SUMMARY

DATE: October 25, 2021

CONTACT PERSON: Bob Behnke

PURPOSE:

The resignation of Madeline Gazarek.

EXPLANATION:

Under Board Policy 4223, the Superintendent is authorized to accept employee resignations or retirements on behalf of the Adrian Board of Education. Madeline has submitted her resignation from Adrian Head Start effective October 28, 2021.

RECOMMENDATION:

It is the recommendation of the Superintendent that the Adrian Board of Education acknowledge the resignation of Madeline Gazarek effective October 28, 2021.

EXECUTIVE SUMMARY

DATE: October 25, 2021

CONTACT PERSON: Bob Behnke

PURPOSE:

The resignation of Jeremiah Davies.

EXPLANATION:

Under Board Policy 4223, the Superintendent is authorized to accept employee resignations or retirements on behalf of the Adrian Board of Education. Jeremiah has submitted his resignation from Adrian Public Schools effective November 3, 2021.

RECOMMENDATION:

It is the recommendation of the Superintendent that the Adrian Board of Education acknowledge the resignation of Jeremiah Davies effective November 3, 2021.

EXECUTIVE SUMMARY

DATE: October 25, 2021

CONTACT PERSON: Bob Behnke

PURPOSE:

The resignation of Amaris Benschoter.

EXPLANATION:

Under Board Policy 4223, the Superintendent is authorized to accept employee resignations or retirements on behalf of the Adrian Board of Education. Amaris has submitted her resignation from Adrian Public Schools effective October 22, 2021.

RECOMMENDATION:

It is the recommendation of the Superintendent that the Adrian Board of Education acknowledge the resignation of Amaris Benschoter effective October 22, 2021.

MINUTES OF THE REGULAR MEETING OF THE ADRIAN BOARD OF
EDUCATION, MONDAY, OCTOBER 11, 2021, ADRIAN HIGH SCHOOL B-100.

**MEETING CALLED TO
ORDER**

The meeting of the Adrian Board of Education was called to order by President
Ferguson at 6:00 p.m.

Pledge of Allegiance was recited.

PLEDGE RECITED

PRESENT: President Ferguson, Trustees: Baucher, Ballard, Buku, Henagan, and
Marks

ABSENT: Trustee Flores

Moved by Vice President Baucher, supported by Trustee Marks, that the Adrian Board
of Education approve the agenda.

AGENDA APPROVED

Motion carried by a 6-0 vote.

Trustee Henagan recited the District's mission statement as a reminder of the
purpose and direction of the District.

**MISSION
STATEMENT**

Superintendent Behnke recognized the Outstanding Citizens for October. The
following students were recognized for their Maple productivity. Jaceyone Fite
from Alexander, Violet Adams from Lincoln, Legendary Linley from Michener,
Sophia Scharer from Prairie, Rylee Lahring from Springbrook Middle School,
and Aiden Bell from Adrian High School.

**GOOD NEWS
REPORTS**

Amanda Wedgewood presented the 2020-21 financial audit. It was an
unmodified "clean" opinion. There were no material weaknesses, significant
deficiencies, or other matters identified. The fund balance has increased over
the years. The District is at a 21% total fund balance.

COMMUNICATIONS

The District acknowledged the resignations of Ryan Sondergeld, Danielle Grisham,
Jackie Depew, Katrina Green, Kelsey Seegert, and Greg Boxer.

Moved by Trustee Henagan, supported by Trustee Ballard, that the Adrian Board of
Education approve the consent agenda.

CONSENT AGENDA

The Consent Agenda contained the following items:

1. Approval of Minutes from September 13, 2021, Regular Meeting.
2. Treasurer's Report ending September 2021 with a balance of \$1,261,508.66.
3. Approval of Hire- Lisa Parisien, Mari Jones, Danielle Grisham, Kristina Kidney,
Isaiah Cavin, Emily Bisco, Rowan Celestino, and Fall Coaches.

Motion carried by a 6-0 vote.

Moved by Vice President Baucher, supported by Trustee Buku, that the Adrian Board
of Education approve the financial audit for the 2020-21 fiscal year.

AUDIT REPORT

Motion carried by a 6-0 vote.

Moved by Trustee Buku, supported by Trustee Henagan, that the Adrian Board of
Education approve the additional course offerings at the four elementary schools and
Springbrook Middle School.

COURSE OFFERINGS

Motion carried by a 6-0 vote.

Moved by Trustee Ballard, supported by Vice President Baucher, that the Adrian Board of Education approve the summer tax resolution. Kathy Westfall explained that 50% of the taxes are collected in the summer and 50% are collected in the winter. This is the summer tax resolution.

**SUMMER TAX
COLLECTION**

Motion carried by a 6-0 vote.

Moved by Trustee Henagan, supported by Trustee Marks, that the Adrian Board of Education approve the proposal from Dura Edge in the amount of \$48,045 to resurface the baseball and softball fields. This will be paid from bond funds.

**RESURFACING
BASEBALL/SOFTBALL
FIELDS**

Motion carried by a 6-0 vote.

Moved by Trustee Ballard, supported by Trustee Marks, that the Adrian Board of Education approve the proposal from Vertex in the amount of \$33,750 for irrigation at the baseball and softball fields, to be paid from bond funds.

**IRRIGATION OF
BASEBALL/SOFTBALL
FIELDS**

Motion carried by a 6-0 vote.

Moved by Vice President Baucher, supported by Trustee Marks, that the Adrian Board of Education accept donations from Walmart, Great Lakes Ace Hardware, an anonymous donor, the City of Adrian, the National Society of the Daughters of the American Revolution, 2 B Perfect/The B Hive, Sally Watson, WA-GAIN, the Boys and Girls Club of Lenawee, Alexander PTO, the Lenawee Community Foundation and Jenna Ash.

DONATIONS

Motion carried by a 6-0 vote.

Superintendent Behnke reported that he had recently attended the MASA Conference. One major discussion among the superintendents was staffing issues statewide. Mr. Behnke attended the closing of the McKinley Property today. There will be ongoing COVID testing available in the high school parking lot for the community during the coming weeks and there is a Pfizer clinic on Friday if anyone still wants to be vaccinated or wants the booster.

**REPORTS FROM
SUPERINTENDENT
AND STAFF**

Vice President Baucher reported that the Finance Committee had met and discussed the audit, summer work, a personnel issue, options for Lincoln running out of space, and the athletic fields and what can/should be done.

**FINANCE
COMMITTEE**

Judith Hammerle- Adrian, MI, spoke about support for school personnel and public education.

**NON-ARRANGED
AUDIENCE
PARTICIPATION**

Trustee Ballard- reported that he had recently attended the Head Start Policy Council meeting. He said that it was well run and there were a lot of positive discussions. He believes that membership issues will start to resolve as things get back to more normal.

**BOARD MEMBER
COMMENTS**

Trustee Henagan- reported that she had attended the E-Race Stigma 5K event. The goal of the race was to increase the awareness of mental health issues with a concentration on overall health and wellness. The event wound around the streets of Adrian.

Moved by Trustee Ballard, supported by Trustee Henagan, that the Adrian Board of Education convene to closed session at 6:40 p.m. under the Open Meetings Act 8(a) for an employee discipline/personnel matter. **CLOSED SESSION**

ROLL CALL VOTE:

Yeas: Ballard, Baucher, Buku, Henagan, Marks, and Ferguson

Nays: none

Motion carried by a 6-0 vote.

Moved by Vice President Baucher, supported by Trustee Marks that the Adrian Board of Education return to open session at 6:56 p.m. **OPEN SESSION**

ROLL CALL VOTE:

Yeas: Ballard, Baucher, Buku, Henagan, Marks, and Ferguson

Nays: none

Motion carried by a 6-0 vote.

Moved by Vice President Baucher, supported by Trustee Buku, that the Adrian Board of Education accept the retirement of Superintendent Bob Behnke, effective March 31, 2022. Mr. Behnke explained why he chose the date of his retirement and shared some of the highlights of his career.

Trustee Ballard commented, "We are very fortunate to have had Bob for eight years. He has been a rock. He has taken the lead on so many things for our schools, the county, and our city. These will be big shoes to fill."

Trustee Buku commented, "He has set the bar high. I have been blown away by his ability and readiness to communicate. It has helped me personally with how I look at communication within my own business. He is always looking ahead."

Vice President Baucher commented, "It is so easy to confuse resignation and retirement. Resignation is downhearted, but retirement should be tempered with enthusiasm. Yes, we are sad that we have to replace him, but happy that he finished his career with us."

President Ferguson commented, "I have enjoyed many conversations with Bob. You mean so much to me and the District. You have been the "driver" behind so much that we have been able to accomplish. I appreciate you. Thank you."

Motion carried by a 6-0 vote.

The board discussed that a press release should be sent out and that a sub-committee should be formed to look for a search firm. President Ferguson asked Trustee Ballard and Marks to serve on that committee with her.

There being no further business, a motion was made by Vice President Baucher, supported by Trustee Buku, that the meeting be adjourned.

Motion carried by a 6-0 vote.

ADJOURNMENT

The meeting adjourned at 7:09 p.m.

Beth Ferguson, President

Mike Ballard, Secretary

MINUTES OF THE SPECIAL MEETING OF THE ADRIAN BOARD OF EDUCATION,
MONDAY, OCTOBER 18, 2021, ADRIAN HIGH SCHOOL B-100.

**MEETING CALLED TO
ORDER**

The meeting of the Adrian Board of Education was called to order by President Ferguson at 5:30 p.m.

Pledge of Allegiance was recited.

PLEDGE RECITED

PRESENT: President Ferguson, Trustees: Ballard, Buku, Flores, Henagan, and Marks

ABSENT: Vice President Baucher

Moved by Trustee Ballard, supported by Trustee Flores, that the Adrian Board of Education approve the agenda.

AGENDA APPROVED

Motion carried by a 6-0 vote.

Trustee Marks recited the District's mission statement as a reminder of the purpose and direction of the District.

**MISSION
STATEMENT**

Moved by Trustee Henagan, supported by Trustee Ballard, that the Adrian Board of Education approve the consent agenda.

The Consent Agenda contained the following items:

1. Approval of Minutes from October 14, 2021, Sub Committee meeting

CONSENT AGENDA

Motion carried by a 6-0 vote.

Moved by Trustee Ballard, supported by Trustee Buku, that the Adrian Board of Education approve the service agreement with Michigan Leadership Institute. The District received proposals from two firms that conduct Superintendent searches. The committee reviewed the proposals and is recommending Michigan Leadership Institute.

Motion carried by a 6-0 vote.

Trustee Marks reported that the Sub Committee had met and reviewed the two proposals and looked at potential timelines. The committee had a follow-up phone call with MLI to make sure that the bid was all-inclusive.

There being no further business, a motion was made by Trustee Marks, supported by Trustee Buku, that the meeting be adjourned.

Motion carried by a 6-0 vote.

The meeting adjourned at 5:42 p.m.

ADJOURNMENT

Beth Ferguson, President

Mike Ballard, Secretary

EXECUTIVE SUMMARY

DATE: October 25, 2021

CONTACT PERSON: Bob Behnke

PURPOSE:

To recommend the hiring of a floating paraprofessional in the District.

EXPLANATION:

Deb Agnew and her interview team recommend Morgan Dufty as a Paraprofessional. Morgan is a team player and takes on leadership roles.

RECOMMENDATION:

It is the recommendation of the Superintendent that Morgan Dufty be hired as a full-time Paraprofessional, effective October 19, 2021.

EXECUTIVE SUMMARY

DATE: October 25, 2021

CONTACT PERSON: Kathy Westfall

PURPOSE:

To recommend the termination of James Hamblin.

EXPLANATION:

James Hamblin was unable to return to work in the Fall of 2020. The District continued to communicate with James regarding his situation. In March 2021, it was determined that he would not be able to return to his position. James has been asked multiple times to submit a resignation letter and he has not provided one. Per the Adrian Education Support Personnel Association (AESPA) collective bargaining agreement, Article XVIII #2A states that unpaid leave of absences shall not exceed one hundred (180) school calendar days. Unpaid leaves shall be subject to renewal at the discretion of the Board.

RECOMMENDATION:

It is the recommendation of the Assistant Superintendent that the Adrian Board of Education, terminate James Hamblin effective October 26, 2021. This marks 180 days.

EXECUTIVE SUMMARY

DATE: October 25, 2021

CONTACT PERSON: Bob Behnke

PURPOSE: To accept donations from Community Members.

EXPLANATION:

Maples Fans Club donated \$7,345 to the Boys and Girls Basketball program.

These donations were given to Alexander Boundless Playground:

- Beth Ferguson donated \$250.
- Elizabeth and Bruce Burtless donated \$250.
- Brad Watson donated \$500.
- Eric Fox donated \$250.

RECOMMENDATION:

It is the recommendation of the Superintendent that the Adrian Board of Education accept these donations and thank them for supporting Adrian Public Schools.

EXECUTIVE SUMMARY

DATE: October 25, 2021

CONTACT PERSON: Kathy Westfall
Bob Behnke

PURPOSE

To review the bids for the track fence replacement.

EXPLANATION:

A request for proposal was issued to replace the track fence at the high school. This project will be paid from bond funds. The District received two quotes:

RMD Holdings \$169,933

Adrian-Tecumseh Fence Co. \$113,683

A third vendor showed interest in the project but they failed to meet the bid requirements.

RECOMMENDATION:

It is the recommendation of the Assistant Superintendent that the Adrian Board of Education review the bids for the track fence replacement, for approval at the next board meeting.

EXECUTIVE SUMMARY

DATE: October 25, 2021

CONTACT PERSON: Bob Behnke
Derrick Richards

PURPOSE:

To review the purchase of Michigan Virtual University courses for Springbrook Middle School and Adrian High School.

EXPLANATION:

Michigan Virtual University (MVU) is providing virtual courses with Michigan certified teachers for students enrolled at Springbrook Middle School and Adrian High School. Each course through MVU is \$325.

Middle School Student Semester Cost: \$2,275

High School Student Trimester Cost: \$1,950

Middle School Student Full Time Student Annual Cost: \$4,550

High School Student Full Time Student Annual Cost: \$5,850

Trimester 1 High School: 23 students

Semester 1 Middle School: 3 students

Total anticipated cost for Trimester 1: \$46,150

It is the request to pay for the MVU courses not to exceed \$250,000 for the 2021-2022 school year. All courses will be paid through the ESSER II Federal Funds.

RECOMMENDATION:

It is the recommendation of the Superintendent and Director of Curriculum and Instruction that the Adrian Board of Education approve the purchase of the Michigan Virtual University courses at the next scheduled board meeting.

EXECUTIVE SUMMARY

DATE: October 25, 2021

CONTACT PERSON: Kyle Modzel
Derrick Richards

PURPOSE

To review the quote for the purchase of Chromebook Devices for SMS and AHS.

EXPLANATION:

The District is looking to purchase additional Chromebooks to support the 1:1 initiative for Springbrook Middle School & Adrian High School.

- 347 - SAMSUNG CHROMEBOOK 4 11IN 4GB/16GB INTEL
- 347 – Chrome Management License

These devices will be used to do the following:

- Refresh Chromebooks that are 5-6 years old
- Have stock for increased student count
- Have stock in the event of a COVID shutdown or quarantine
- Replace devices that were damaged, lost, or stolen

Pending approval, these devices will be fully paid out of ESSER 2 Funds.

These devices have been selected in cooperation with the Curriculum Department.

RECOMMENDATION:

It is the recommendation of the Director of Curriculum that the Adrian Board of Education review the purchase of Chromebook Devices not to exceed the amount of \$80,000 from 2nd Gear, to be paid from ESSER 2 Funds.



An Insight Investments Company

Account Name	Proposal Number	Date
Adrian Public Schools, MI (ADR04)	QUO-76917-Q4V3S2	9/16/2021

Rep Contact Info:

David Stamm
Account Executive
2NDGEAR
32605 Temecula Parkway Ste 202
Temecula, CA 92592
Phone: 951-370-2260
Fax:

dstamm@2ndgear.com

Bill To:

Attn: Kyle Modzel
Adrian Public Schools, MI
785 Riverside Ave Ste 1
Adrian, MI 49221-1467
Phone: 5172646640

Remit To:

2NDGEAR
Accounts Receivable
611 Anton Blvd, Ste 700
Costa Mesa, CA 92626

Qty	Mfr	Description	Limited Warranty	Unit Price	Ext Price
225	Samsung	Samsung 4 Chromebook 11.6" Non-Touch LCD Intel Celeron N4020 4GB RAM 32GB SSD	Full Manufacturer's Warranty	\$195.00	\$43,875.00
225	GOOGLE	Chrome Management License	Full Manufacturer's Warranty	\$35.00	\$7,875.00

Proposal Terms and Conditions: By either (i) execution of this Proposal, or (ii) issuance of a Purchase Order ("PO") by Purchaser to 2NDGEAR, Purchaser agrees that the terms and conditions found at [2NDGEAR Sales Agreement Terms and Conditions](#) shall govern the sale of equipment specified above and shall supersede the terms and conditions of any Purchaser PO. 2NDGEAR Limited Warranty can be accessed at [2NDGEAR Advance Replacement Warranty](#)

Delivery Terms: Estimated shipping dates to be provided

Freight Terms:

Proposal Expiration Date: Quote Valid for 15 days and/or While Supplies Last

Payment Terms: As specified on 2NDGEAR's invoice

Additional Comments:

		Dollar Buyout Purchase Option	FMV Purchase Option
*Leasing Options:	24 Months	\$2,349.45	\$2,245.95
	36 Months	\$1,619.78	\$1,542.15

Freight ID:	0
Subtotal:	\$51,750.00
Shipping:	\$0.00
Estimated Tax:	Per State
Total Purchase:	\$51,750.00

Agreed to and Accepted by:

Signature: _____
Name: _____
Title: _____
Date: _____
PO#: _____

Ship To:

2NDGEAR: Albuquerque, NM

Head Start Report

October 2021

Facility Management and Human Resources

- Teacher (or full time TA): 8
- Teacher Assistant: 8

Fiscal Monitoring

- September budget reports are attached. No concerns at this time.
- August CACFP Reimbursement = \$757.30
- September CACFP Reimbursement = \$3,428.56

Education and School Readiness

- The first Early Childhood Committee will be held on October 22nd at 3:00PM on zoom.
- A seamless transition to a virtual format is being revamped in the event that a classroom is closed due to a COVID exposure.
- Teaching Strategies Gold Assessment data due November 19th.
- Conferences are being held on 11/22 and 11/23
- Brigance Data as of 10/8/21:
 - Head Start assessments are ongoing with anticipated completion for the end of October on enrolled children.
 - Early Head Start Completion: 85%
 - Students are being screened within 30 days, as they enroll.
- All EHS/HS Classrooms will be monitored utilizing the CLASS and PQA (Program Quality Assessment) tools
 - EHS/HS Classrooms: 2 PQA and 2 CLASS assessments
 - HS/GSRP Blends 2 PQA and 3 CLASS assessments
 - CLASS assessments will be completed virtually for the 2021/2022 school year due to Teachstone recommendations
 - The Swivl will be utilized for virtual CLASS observations

Disability Services and Mental Health

- Disability Services
 - EHS: 18%
 - HS: 12%
- Mental Health Referrals
 - 16 Open Mental Health Referrals
 - 15 HS
 - 1 EHS
 - 5 referrals have resulted in Individual Mental Health Observations in the classroom this month

- 8 additional Individual Mental Health Observations are scheduled in the next 30 days
 - 2 Closed MH Referrals
 - 1 Head Start
 - 1 EHS
- Mental Health Consultation
 - Parent consultation transactions
 - HS: 3
 - EHS: 0
 - Teacher consultation transactions regarding children referred to MH services
 - HS: 10
 - EHS: 1
 - Staff wellness consultation transactions
 - HS: 2
 - EHS: 0
- Mental Health Classroom Support
 - MH Classroom Observations:
 - 5 Classroom Observations complete
 - 8 Classroom Observations scheduled in the next 30 days
 - In-vivo mental health coaching/support
 - Occurred in 3 HS and 3 EHS classrooms
- Additional MH Initiatives:
 - MHC met with additional early education staff (Family Advocates and Parent Educators) to explore opportunities for Mental Health support in home-visiting and family programming
 - Began planning to address staff wellness through revamping staff breakroom at Drager
 - Met with the Executive Director and the Board of the Lenawee Community Mental Health Authority and secured an introduction to the Director of Children's Services to explore opportunities for community collaboration in mental health

Early Head Start Home-Based

- Home Visits and Socializations are being completed outside the home, in the community, and at Drager in the Socialization Room.
- Plan for October to return to in-home with safety measures in place. The option to come to the building and community visits will continue.
- File Review, Socialization Observation, and Attendance Review has been completed with no concerns.

Family Engagement

- Head Start (134 Families)
 - 85% Family Partnership, 100% Policy Council, 81% Family Map
 - 10% completed Family Assessment and 7% Goal Setting
- Early Head Start (43 Families)
 - 100% Family Partnership, 100% Policy Council, 100% Family Map

- 53% completed Family Assessment and 35% Goal Setting
- Book Study is being planned for “The Person You Mean to Be” by Dolly Chugh
 - FSW’s required and other staff encouraged to attend this book study that focus’ on self growth in the areas of diversity and inclusion
- Family Fun Night Virtual Take Home Bags
 - Going home in October focusing on STEAM activities

Eligibility, Recruitment, Selection, Enrollment and Attendance

- 4 delay start classrooms for Head Start (10 openings currently)
- EHS Center Based is Fully Enrolled
- Home Based is Under Enrolled, HB-A is vacant, 29/56 slots are enrolled
- ERSEA Committee Meeting met on 9/17/21 to review Recruitment and Enrollment
- Recruitment is a priority: Pens, Magnets, Tablecloths, Radio Slot, WLEN website and newsletter.
- ERSEA Quarterly File Review tool was developed and 10% of files were reviewed in September by Family Engagement Manager with no concerns.

Health Services

- Started performing Hemoglobin screenings for EHS/HS children. Non-invasive procedure.
- In the process of putting together/inviting to join for our Health Services Advisory Committee (HSAC):this could include: program parents, APS RN, Adrian Head Start Mental Health Consultant, local community partners: Lenawee County Health Department, WIC, ProMedica, MSU-Extension, Mobile Dentist/Smiles on Wheels, Local Food Bank.

Nutrition Services

- Providing Farmers Choice Boxes to families: working with local farmers to provide a variety of fresh produce and fruits to our EHS and HS families. This could include: small pumpkins, squash, apples, etc. pending what the Farmer has available for produce and/or fruit.
- Difficulty with menu variety due to limited food availability via GFS supplier.

Program Management

- Interviews took place for Early Learning Assistant Manager on 9/17- Tiffany Robinson was selected by the interview team and accepted the position.
- Governance and Leadership Capacity Screening:
 - Due at the beginning of the 5 Year Grant Cycle
 - Worked with Superintendent Behnke to complete the screener, submitted to OHS.
 - Screener is attached. No concerns.
- Health and Safety Screening:
 - Needs to be completed on each site where children are served.
 - Due at the beginning of the 5 Year Grant Cycle
 - Screener from the Drager location is attached. No concerns at any sites.
- Information Memorandum: ACF-IM-HS-21-05. Issued 9-27-21. Attached.
- PIR (Program Information Report)
 - Completed and Submitted to OHS on August 27th. PIR is attached.
- Vaccinating Head Start Staff: Letter from the Director.

HEAD START and EARLY HEAD START BUDGET REPORT AS OF 9/30/2021

Approved Budget Category	Basic Grant	Training	Total	Expenditures	% Expended	% of Year	Difference
1 - Personnel	\$ 2,023,222.00	\$ -	\$ 2,023,222.00	\$ 304,383.89	15%	25%	-10%
2 - Fringe Benefits	\$ 1,446,441.00	\$ -	\$ 1,446,441.00	\$ 191,336.42	13%	25%	-12%
3 - Travel	\$ -	\$ 17,800.00	\$ 17,800.00	\$ 1,617.00	9%	25%	-16%
4 - Equipment	\$ -	\$ -	\$ -	\$ -			
5 - Supplies	\$ 94,179.00	\$ -	\$ 94,179.00	\$ 18,661.05	20%	25%	-5%
6 - Contractual	\$ 208,408.00	\$ -	\$ 208,408.00	\$ 32,603.41	16%	25%	-9%
7 - Construction	\$ -		\$ -	\$ -			
8 - Other	\$ 221,247.00	\$ 36,977.00	\$ 258,224.00	\$ 197,333.73	76%	25%	51%
Indirect Cost	\$ 5,349.00	\$ -	\$ 5,349.00	\$ -			
Total	\$ 3,998,846.00	\$ 54,777.00	\$ 4,053,623.00	\$ 745,935.50	18%	25%	-7%
Inkind	\$ 1,001,356.00		\$ 1,001,356.00	\$ 156,161.56	16%	25%	-9%
Max. Allowable Admin. Cost	\$ 750,030.00	\$ 8,217.00	\$ 758,247.00	\$ 75,899.97	10%		

HEAD START CRRSA Funding BUDGET REPORT AS OF 9/30/2021

Approved Budget Category	Basic Grant	Total	Expenditures	% Expended	% of Year	Difference
5 - Supplies	\$ 36,500.00	\$ 36,500.00	\$ 10,643.38	29%	25%	4%
8 - Other	\$ 61,616.00	\$ 61,616.00	\$ 34,056.64	55%	25%	30%
Total	\$ 98,116.00	\$ 98,116.00	\$ 44,700.02	46%	25%	21%

DATA MONITORING REPORT
Health & Nutrition Content Area

9.30.21

Early Head Start
51 Enrolled

<i>Measurement</i>	<i>Expectation</i>	<i>Breakdown</i>	<i>Result</i>	<i>Concerns and/or Further Explanation, if any:</i>
Child Health Review 3016 <i>15 days from start date</i>	100%	51/51	100%	51 Complete 0 Incomplete but <u>not</u> past due 0 Incomplete and past due
Pregnancy Health Assessment 3016 <i>15 days from start date</i>	100%	0/0		0 Complete 0 Incomplete but <u>not</u> past due 2 Incomplete and past due
Well Baby Check 3016 (1-12 months & 15-36 months) <i>Follows EPDST schedules & licensing</i>	100%	20/51 11/51	39% + 22% 61%	20 Complete or Up to Date 11 Incomplete and due 20 Incomplete - expired/past due 0 Excluded
Hearing 3016 <i>45 days from start date</i>	100%	33/51 7/51	65% + 14% 79%	33 Complete 7 Incomplete but <u>not</u> past due 11 Incomplete and past due
Vision 3016 <i>45 days from start date</i>	100%		73% +10% 83%	37 Complete 5 Incomplete but <u>not</u> past due 9 Incomplete and past due
Dental Exam 3065 (2125 to check enrolled kids/ages) <i>90 days from start date (Expectation for children ages 1 YR and older)</i>	100%		<i>October</i>	Complete Incomplete but <u>not</u> past due Incomplete and past due
Dental Exam P Mom 3016 <i>90 days from start date (It can be within the last year - last 6 months is best)</i>	90%		<i>October</i>	Complete Incomplete but <u>not</u> past due Incomplete and past due

Hemoglobin/Hematocrit 3016 <i>90 days from start date</i>	95%		<i>October</i>	Complete Incomplete but <u>not</u> past due Incomplete and past due
Lead-3016 <i>90 days from start date</i>	95%		<i>October</i>	Complete Incomplete but not past due Incomplete and past due
Growth Assessment – Initial 3016 <i>(0-2 not included; use 2 YR old filter)</i> <i>90 days from start date</i>	100%		<i>October</i>	Complete Incomplete but not past due Incomplete and past due
Medical Home 9707 <i>Determine if Medical Home w/in 30 days – staff assist in finding Medical Home</i>	100%	51/51 51/51	100% 100%	51 Complete <i>(addressed/entered)</i> 0 Not Marked 51 Have 0 No 0 Unknown
Dental Home 9708 <i>Determine if Dental Home w/in 30 days – staff assist in finding Dental Home</i>	100%	51/51 47/51	100% 92%	51 Complete <i>(addressed/entered)</i> 0 Not Marked 47 Have 4 No 0 Unknown
Immunizations 9708/3330 + drops <i>At enrollment & continued updates</i>	100% (State 90%)	37/51	73%	37 Complete / Provisional /Up to Date All Possible/ Waivers 7 Incomplete AND past due 7 Not marked
Health Follow Up (CHH, WBC, Hearing, Vision, Exclusion, HCP, HGB, Lead) 3065	95%			Up to date Past due for follow up Total concerns
Growth Assessment Follow Up- 3420/3065	95%			Up to date Past due for follow up Total concerns
Dental Follow Up 3065	95%			Up to date Past due for follow up Total concerns
Immunizations Follow Up 3320	95%			Up to date Past due for follow up Total concerns

DATA MONITORING REPORT
Health & Nutrition Content Area

9.30.21

Head Start
144 Enrolled

<i>Measurement</i>	<i>Expectation</i>	<i>Breakdown</i>	<i>Result</i>	<i>Concerns and/or Further Explanation, if any:</i>
Child Health Review 3015 <i>15 days from start date</i>	100%	144/144	100%	144 Complete 0 Incomplete but <u>not</u> past due 0 Incomplete and past due
Physical 3015 <i>30 days from start date and following licensing guidance</i> <i>(In general physicals expire after one year. We continue to encourage yearly exams.)</i>	100%	142/144 2/144	99% + 1% 100%	48 Complete for the year 94 Complete, but expire before 6.30.22 2 Incomplete, but <u>not</u> past due 0 Incomplete and past due 0 Excluded
Hearing 3015 <i>45 days from start date</i>	100%	106/144 38/144	74%	106 Complete 38 Incomplete but <u>not</u> past due 0 Incomplete and past due
Vision 3015 <i>45 days from start date</i>	100%	109/144	76%	109 Complete 35 Incomplete but <u>not</u> past due 0 Incomplete and past due
Dental Exam 3015	100%			Complete Incomplete but <u>not</u> past due Incomplete and past due
Hemoglobin/Hematocrit 3015 <i>90 days from start date</i>	95%			Complete Incomplete but <u>not</u> past due Incomplete and past due
Lead 3015 <i>90 days from start date</i>	95%			Complete Incomplete but not past due Incomplete and past due

Growth Assessment <i>90 days from start date</i>	100%		<i>October</i>	Complete Incomplete but not past due Incomplete and past due
Medical Home 9707 <i>Determine if Medical Home w/in 30 days – staff assist in finding Med H</i>	100%	144/144 142/144	100% 99%	144 Complete (<i>addressed/entered</i>) 0 Not Marked 142 Have 2 No 0 Unknown
Dental Home 9708 <i>Determine if Dental Home w/in 30 days – staff assist in finding Dental Home</i>	100%	144/144 119/144	100% 83%	144 Complete (<i>addressed/entered</i>) 0 Not Marked 119 Have 25 No 0 Unknown
Immunizations 9708/3330 + drops <i>At enrollment & continued updates</i>	100% (State 90%)	138/144	96%	138 Complete / Provisional / Up to Date All Possible/ Waivers 6 Incomplete and past due 0 Not marked
Health Follow Up (CHH, WBC, Hearing, Vision, Exclusion, HCP, HGB, Lead) 3065	95%			Up to date Past due for follow up Total concerns
Growth Assessment Follow Up- 3420/3065	95%			Up to date Past due for follow up Total concerns
Dental Follow Up 3065	95%			Up to date Past due for follow up Total concerns
Immunizations Follow Up 3320	95%			Up to date Past due for follow up Total concerns



Governance, Leadership, and Oversight Capacity Screener

Introduction

Organizations that accept federal funds to operate Head Start and/or Early Head Start programs must have strong governance systems in place to safeguard federal dollars and provide oversight and direction to the Head Start program.

This screener organizes the Head Start requirements to help organizations identify where they need to make changes and build capacity to fulfill their Head Start governance responsibilities.

Suggestions for Use

1. Print a copy of this screener.
2. Have your organization's governing body or Tribal Council chair, Policy Council chair, executive director, and Head Start program director work together to review the table beginning on page 3 and to identify (with a check mark or "X") the following items:
 - i. Required Head Start governance practices that your organization currently has in place
 - ii. Required Head Start governance practices that your organization will implement within the first three months of funding
 - iii. Required Head Start governance practices that your organization needs help understanding and implementing
3. On the final page of this document list the governance practices and regulations that your organization needs assistance in understanding and implementing.
4. Enter any questions or concerns you have in the comments section on the final page of this document.
5. Share this screener and your findings with your full governing body or Tribal Council, Policy Council, and Head Start program leadership. Assign people to begin implementation of the governance practices you have identified as not currently in place.
6. You can explore the [Organizational Leadership](#) page on the Early Childhood Learning and Knowledge Center (ECLKC) to access other resources that can assist you as you move your governance system and practices forward.
7. At your next meeting with Regional Office staff, discuss those governance practices and regulations where your organization may benefit from technical assistance.



Head Start Governance, Leadership, and Oversight Capacity Screener

Head Start Governance Practices and Related Regulations	Practice/Procedure is currently in place	Practice/Procedure will be fully implemented within first three months of funding	Our organization needs assistance in understanding and implementing this regulation
1. The governing body (or Tribal Council) has the required composition. ¹		Head Start Act Sec. 642(c)(1)(B) (i–iv)	
<ul style="list-style-type: none">At least one member has fiscal/accounting background and expertise			
<ul style="list-style-type: none">At least one member has early childhood education and development background and expertise			
<ul style="list-style-type: none">At least one member is a licensed attorney			
<ul style="list-style-type: none">Members reflect the community served and include parents of children who are currently, or were formerly, enrolled in Head Start programs			
2. The Policy Council has the required composition.		Head Start Act Sec. 642(c)(2)(B)(i) Sec. 642(c)(2)(B)(ii)(I–II)	
<ul style="list-style-type: none">A majority are parents of children who are currently enrolled in the Head Start program (including delegate agencies)			
<ul style="list-style-type: none">Other members are representatives at-large of the community served by the program or any delegate agency (may include parents of children formerly enrolled)			
<ul style="list-style-type: none">Members are elected by parents of children currently enrolled in the program			

¹ If the composition of the governing body does not include individuals with the required qualifications, the governing body must use consultants or other individuals with relevant expertise and qualifications to meet the composition requirements [Head Start Act Sec. 642(c)(1)(B)(vi)].



Head Start Governance, Leadership, and Oversight Capacity Screener

Head Start Governance Practices and Related Regulations	Practice/Procedure is currently in place	Practice/Procedure will be fully implemented within first three months of funding	Our organization needs assistance in understanding and implementing this regulation
3. The Head Start program must ensure that members of the:		Head Start Act Sec.642(c)(1)(C), 642(c)(2)(C), and 642(c)(3)(B) Head Start Program Performance Standards 1301.2(a) and 1301.3(b)(2)	
<ul style="list-style-type: none"> Governing body do not have a conflict of interest 			
<ul style="list-style-type: none"> Policy council, and of the policy committee at the delegate level, do not have a conflict of interest 			
4. Head Start program has established a parent committee comprised exclusively of parents of currently enrolled children as early in the program year as possible.		Head Start Program Performance Standards 1301.4 (a)	
<ul style="list-style-type: none"> The committee is established at the center level for center-based program and at the local program level for other program options 			
5. Governing body may establish advisory committees as it deems necessary for effective governance and improvement of the program.		Head Start Program Performance Standards 1301.2(c)	
<ul style="list-style-type: none"> Establish the structure, communication, and oversight in such a way that the governing body continues to maintain its legal and fiscal responsibility 			
<ul style="list-style-type: none"> Notify responsible HHS official of intent to establish an advisory committee 			



Head Start Governance, Leadership, and Oversight Capacity Screener

Head Start Governance Practices and Related Regulations	Practice/Procedure is currently in place	Practice/Procedure will be fully implemented within first three months of funding	Our organization needs assistance in understanding and implementing this regulation
6. Members of the governing body (or Tribal Council) receive effective and ongoing training and technical assistance (T/TA) to ensure that they understand the information they receive and are able to provide effective oversight of, make appropriate decisions for, and participate in programs of the Head Start agency.		Head Start Act Sec. 642(d)(3)	
<ul style="list-style-type: none"> The agency has a system for identifying the T/TA needs of the governing body (or Tribal Council) and using this information to develop a T/TA plan 			
7. Members of the Policy Council receive effective and ongoing training and technical assistance (T/TA) to ensure that they understand the information they receive and can provide effective oversight of, make appropriate decisions for, and participate in programs of the Head Start agency.		Head Start Act Sec. 642(d)(3) Head Start Program Performance Standards 1302.12(m)	
<ul style="list-style-type: none"> The agency has a system for identifying the T/TA needs of the Policy Council and using this information to develop a T/TA plan 			
<ul style="list-style-type: none"> T/TA or orientations include training on program performance standards and training indicated in 1302.12(m) 			



Head Start Governance, Leadership, and Oversight Capacity Screener

Head Start Governance Practices and Related Regulations	Practice/Procedure is currently in place	Practice/Procedure will be fully implemented within first three months of funding	Our organization needs assistance in understanding and implementing this regulation
8. The governing body (or Tribal Council) exercises the following responsibilities:		Head Start Act Sec. 642(c)(1)(E)(iv)(I-III) Sec. 642(c)(1)(E)(iv)(VI)	
<ul style="list-style-type: none"> Establishes procedures and criteria for recruiting, selecting, and enrolling children 			
<ul style="list-style-type: none"> Selects delegate agencies, as appropriate 			
<ul style="list-style-type: none"> Develops procedures for selecting Policy Council members 			
<ul style="list-style-type: none"> Reviews applications and amendments to applications for funding 			
9. The governing body (or Tribal Council) exercises responsibility for the following:		Head Start Act Sec. 642(c)(1)(E)(iv)(VII)(aa)-(dd)	
<ul style="list-style-type: none"> Approval of all major financial expenditures of the agency 			
<ul style="list-style-type: none"> Annual approval of the operating budget of the agency 			
<ul style="list-style-type: none"> The selection (except when a financial auditor is assigned by the state under state law or is assigned under local law) of independent financial auditors to report all critical accounting policies and practices to the governing body (or Tribal Council) 			



Head Start Governance, Leadership, and Oversight Capacity Screener

Head Start Governance Practices and Related Regulations	Practice/Procedure is currently in place	Practice/Procedure will be fully implemented within first three months of funding	Our organization needs assistance in understanding and implementing this regulation
<ul style="list-style-type: none"> The financial audit 			
<ul style="list-style-type: none"> Monitoring of the agency's actions to correct any audit findings and other actions necessary to comply with applicable laws (including regulations) governing financial statement and accounting practices 			
10. The governing body (or Tribal Council) is engaged in reviewing and approving each of the following:		Head Start Act Sec. 642(c)(1)(E)(iv)(V)(aa-cc) Sec. 642(c)(1)(E)(iv)(VIII)-(IX)	
<ul style="list-style-type: none"> The annual self-assessment 			
<ul style="list-style-type: none"> The agency's progress in carrying out the programmatic and fiscal provisions in the agency's grant application, including implementation of corrective actions 			
<ul style="list-style-type: none"> Personnel policies of the agency regarding the hiring, evaluation, termination, and compensation of agency employees 			
<ul style="list-style-type: none"> Results from monitoring conducted under section 641A(c), including appropriate follow-up activities 			



Head Start Governance, Leadership, and Oversight Capacity Screener

Head Start Governance Practices and Related Regulations	Practice/Procedure is currently in place	Practice/Procedure will be fully implemented within first three months of funding	Our organization needs assistance in understanding and implementing this regulation
11. The program staff ensures the parent committee assumes responsibility for the following:		Head Start Program Performance Standards 1301.4 (b)	
<ul style="list-style-type: none"> Work with program staff to determine the best methods to engage families using strategies that are most effective in their community 			
<ul style="list-style-type: none"> Advise staff in developing and implementing local program policies, activities, and services to ensure they meet the needs of children and families 			
<ul style="list-style-type: none"> Have a process for communication with the Policy Council and policy committee 			
<ul style="list-style-type: none"> Participate in the recruitment and screening of Early Head Start and Head Start employees 			
12. The Head Start program works with the governing body (or Tribal Council) and Policy Council to make available to the public a report published at least once each year that discloses the following information from the most recently concluded fiscal year:		Head Start Act Sec. 644 (a)(2)(A-H)	
<ul style="list-style-type: none"> The total amount of public and private funds received and the amount from each source 			
<ul style="list-style-type: none"> An explanation of budgetary expenditures and proposed budget for the fiscal year 			



Head Start Governance, Leadership, and Oversight Capacity Screener

Head Start Governance Practices and Related Regulations	Practice/Procedure is currently in place	Practice/Procedure will be fully implemented within first three months of funding	Our organization needs assistance in understanding and implementing this regulation
<ul style="list-style-type: none"> The total number of children and families served, the average monthly enrollment (as a percentage of funded enrollment), and the percentage of eligible children served 			
<ul style="list-style-type: none"> The results of the most recent review by the Secretary and the financial audit 			
<ul style="list-style-type: none"> The percentage of enrolled children that received medical and dental exams 			
<ul style="list-style-type: none"> Information about family engagement activities 			
<ul style="list-style-type: none"> The agency's efforts to prepare children for kindergarten 			
<ul style="list-style-type: none"> A summary of a program's most recent community assessment 1302.102(d)(2) 			
<ul style="list-style-type: none"> Any other information required by the Secretary 			
13. The following reports are received by the governing body and the Policy Council and members find them useful:		Head Start Act Sec. 642(d)(2)(A-I) Head Start Program Performance Standards 1302.102	
Annual reports:			
<ul style="list-style-type: none"> The financial audit 			
<ul style="list-style-type: none"> The self-assessment, including any findings related to such assessment 			



Head Start Governance, Leadership, and Oversight Capacity Screener

Head Start Governance Practices and Related Regulations	Practice/Procedure is currently in place	Practice/Procedure will be fully implemented within first three months of funding	Our organization needs assistance in understanding and implementing this regulation
<ul style="list-style-type: none"> Program Information Reports (PIRs) 			
Monthly reports:			
<ul style="list-style-type: none"> Financial statements, including credit card expenditures (if the program uses credit cards) 			
<ul style="list-style-type: none"> Program information summaries 			
<ul style="list-style-type: none"> Program enrollment reports, including attendance reports for children whose care is partially subsidized by another public agency 			
<ul style="list-style-type: none"> Reports of meals and snacks provided through programs of the U.S. Department of Agriculture (USDA) 			
Additional reports:			
<ul style="list-style-type: none"> Community assessment, completed every five years with annual updates 			



Head Start Governance, Leadership, and Oversight Capacity Screener

Head Start Governance Practices and Related Regulations	Practice/Procedure is currently in place	Practice/Procedure will be fully implemented within first three months of funding	Our organization needs assistance in understanding and implementing this regulation
<ul style="list-style-type: none"> Long-term goals for ensuring programs are and remain responsive to community needs, goals for the provision of educational, health, nutritional, and family and community engagement, program services to promote the school readiness of enrolled children, school readiness goals, and short-term measurable programmatic and financial objectives 			
<ul style="list-style-type: none"> Applicable and current updates from the Secretary (e.g., Program Instructions, Information Memorandums, etc.) 			
<ul style="list-style-type: none"> Ongoing monitoring data, data on school readiness goals and other information described in 1302.102 			
14. Head Start agency's governing body and Policy Council have jointly established written procedures for resolving internal disputes between the governing board and Policy Council in a timely manner that includes impasse procedure. These procedures must:		Head Start Program Performance Standards 1301.6 (a)(1-3) and 1301.6(b)	
<ul style="list-style-type: none"> Demonstrate that the governing body considers proposed decisions from the Policy Council and that the Policy Council considers proposed decisions from the governing body 			



Head Start Governance, Leadership, and Oversight Capacity Screener

Head Start Governance Practices and Related Regulations	Practice/Procedure is currently in place	Practice/Procedure will be fully implemented within first three months of funding	Our organization needs assistance in understanding and implementing this regulation
<ul style="list-style-type: none"> If there is a disagreement, require the governing body and the Policy Council to notify the other in writing why it does not accept a decision 			
<ul style="list-style-type: none"> Describe a decision-making process and a timeline to resolve disputes and reach decisions that are not arbitrary, capricious, or illegal 			
<ul style="list-style-type: none"> Governing body and Policy Council must select a mutually agreeable third-party mediator (as outlined in impasse procedures) 			
<ul style="list-style-type: none"> Governing body and Policy Council are prepared to participate in a formal process of mediation that leads to a resolution of the dispute (as outlined in Impasse procedures) 			
15. If no resolution is reached with a mediator (NOTE: American Indian and Alaska Native Programs skip and move to next section)		Head Start Program Performance Standards 1301.6 (c)	
<ul style="list-style-type: none"> Governing body and Policy Council must select a mutually agreeable arbitrator whose decision is final 			



Head Start Governance, Leadership, and Oversight Capacity Screener

Head Start Governance Practices and Related Regulations	Practice/Procedure is currently in place	Practice/Procedure will be fully implemented within first three months of funding	Our organization needs assistance in understanding and implementing this regulation
16. The Policy Council approve and submit to the governing body decisions about each of the following activities of program operations:		Head Start Act Sec. 642(c)(2)(D)(i-viii) Sec. 642(c)(2)(A) Head Start Program Performance Standards 1302.101(b)(4)	
<ul style="list-style-type: none"> Activities to support the active engagement of families in the program 			
<ul style="list-style-type: none"> Program recruitment, selection, and enrollment priorities 			
<ul style="list-style-type: none"> Applications for funding and amendments to applications for funding 			
<ul style="list-style-type: none"> Budget planning for program expenditures, including policies for reimbursement related to participation in Policy Council activities 			
<ul style="list-style-type: none"> Bylaws for the operation of the Policy Council 			
<ul style="list-style-type: none"> Program personnel policies and decisions regarding the employment of program staff, consistent with 642(c)(1)(E)(iv)(IX), including standards of conduct for program staff, contractors, and volunteers and criteria for the employment and dismissal of program staff 			



Head Start Governance, Leadership, and Oversight Capacity Screener

Head Start Governance Practices and Related Regulations	Practice/Procedure is currently in place	Practice/Procedure will be fully implemented within first three months of funding	Our organization needs assistance in understanding and implementing this regulation
17. A program must submit reports, as appropriate, to the HHS official immediately or as soon as practicable:		Head Start Program Performance Standards 1302.102 (d) and 1304.12	
<ul style="list-style-type: none"> Any significant incidents affecting the health and safety of program participants 			
<ul style="list-style-type: none"> Circumstances affecting the financial viability of the program 			
<ul style="list-style-type: none"> Breaches of personally identifiable information 			
<ul style="list-style-type: none"> Program involvement in legal proceedings 			
<ul style="list-style-type: none"> Any matter for which notification or a report to state, tribal or local authorities is required by law: <ul style="list-style-type: none"> Reports addressing child abuse and neglect or laws governing sex offenders Incidents that require classrooms or centers to be closed for any reason Legal proceedings directly related to program operations All conditions required to be reported under 1304.12 including child and Adult Care Food Program (CACFP) 			



Head Start Governance, Leadership, and Oversight Capacity Screener

Comments section:

Our organization needs assistance in understanding and implementing the following governance regulations:

Additional comments, questions, or concerns:





OFFICE OF HEAD START

An Office of the Administration for Children & Families

Health and Safety Screener: Policies and Procedures for Head Start Programs

Introduction

Organizations that serve young children have an obligation to ensure that children in their care are in healthy and safe environments, and that policies and procedures that protect children are in place.

This screener will help organizations to identify where they need to make changes and build capacity in order to ensure children are healthy and safe while in their care. It contains best practices as well as requirements found in the Head Start Program Performance Standards.*

Suggestions for Use

1. Complete a health and safety screening for each site where children receive services.
2. Mark each item in the screening form “yes” or “no.” Provide descriptions for items marked “no.”
3. Determine issues, priorities, and staff responsible for actions and improvements within each site and across the program.
4. Follow up to assure improvements are made in a timely fashion.

** This screener does not include all applicable Head Start Program Performance Standards, nor does it cover every possible health and safety concern or replace each grantee’s responsibility to ensure ongoing compliance with local, state, and federal health and safety requirements. Requirements related to healthy and safe environments can be found throughout the Head Start Program Performance Standards. Programs should also consult [Caring for Our Children Basics](#), for additional information to develop and implement adequate safety policies and practices.*

Date: _____

Completed by: _____

Health/Safety Factors	Yes	No	Description of Conditions
Facilities			
All areas are safe, clean, and free from pests.			
Exits are clearly marked, and emergency evacuation routes and other safety procedures are posted in the classroom and in appropriate locations throughout the site.			
Lighting is sufficient and adequate for all classroom activities.			
Emergency lighting is available in case of a power failure.			
Fire extinguishers are available, accessible, tested, and serviced regularly.			
Smoke, carbon monoxide, and as necessary, radon detectors are installed, properly located, and tested regularly.			
Current child care, health, fire, and other applicable licenses and inspection certificates are present on site.			
All indoor and outdoor spaces meet minimum square footage requirements per local, state, tribal, and Head Start regulations, whichever is more stringent.			
All playground areas are visible to supervising adults.			
Necessary accommodations and modifications are made to ensure the safety, comfort, and full participation of all children including those with disabilities.			
Children are protected from potential hazards including choking, strangulation, electrical and drowning hazards, contagious diseases, and those presented by windows and glass doors, including falls and breakage.			

Health/Safety Factors	Yes	No	Description of Conditions
Toilets and hand washing facilities are clean, in good repair, and easily accessible for children's use. Supplies including toilet paper, hand soap, and towels are available and accessible.			
Toileting and diapering areas are separated from areas used for food preparation, service and eating, and equipped with sanitizing supplies for exclusive use in the area.			
Garbage is stored in a safe and sanitary manner to prevent contamination.			
Children and staff are protected from potential injuries from heating and cooling systems, including burns from hot water (water should not exceed 120 degrees).			
Indoor and outdoor environments are free of mold and pollutants, including smoke, lead, pesticides, and herbicides, as well as soil and water pollutants.			
Child-accessible electrical outlets have covers, are tamper-resistant, or have safety plugs.			
Sleeping arrangements for infants follow safe practices as recommended by the American Academy of Pediatrics (AAP) and are free of soft bedding materials (e.g., soft mattress, crib bumpers, pillows, stuffed animals, fluffy blankets, and comforters). No drop-side cribs are in use.			
Age-appropriate rest and nap opportunities are available for preschool age children if the program operates six hours or longer.			
Children are protected from any hazards posed by classroom or family child care pets.			
Clean, sanitary drinking water should be readily accessible in indoor and outdoor areas throughout the day.			

Health/Safety Factors	Yes	No	Description of Conditions
Equipment and Materials			
Equipment, toys, materials, supplies, and furniture are safe, age, and developmentally appropriate.			
Medication is properly stored and labeled and is not accessible to children.			
Cleaning supplies and other potentially dangerous materials and toxins are not accessible to children.			
All indoor and outdoor equipment, materials and furnishings meet standards set by the Consumer Product Safety Commission (CPSC) or the American Society for Testing and Materials, International (ASTM).			
Emergency supplies, including parent and emergency contact information, first aid kits, and fire safety supplies are readily accessible to staff.			
No firearms or other weapons are accessible to children.			
Policies and Procedures			
A sign-in/sign-out system is used to track those who enter and exit the facility.			
Policies and procedures ensure children are released only to authorized adults.			
Procedures are in place to ensure children are safe when they are unexpectedly absent and the parent has not contacted the program.			
Agency policies and procedures protect children with allergies from known allergens.			
Agency has all-hazards emergency management/disaster preparedness and response plans for events including natural and man-made disasters and emergencies, and violence in or near programs.			
Agency maintains current parent or guardian and emergency contact list. Staff carry list on field trips and during evacuations.			

Health/Safety Factors	Yes	No	Description of Conditions
Infectious disease policies and procedures are in place and include contacting parents and communicating with the local health department as necessary.			
Staff are trained and implement policies that ensure children are released only to a parent, legal guardian, or other formally designated individual.			
Policies for health emergencies that require rapid response or immediate medical attention are shared with parents.			
Staff notify parents when children are sick or injured.			
Premises are kept free of undesirable and hazardous materials and conditions. Indoor and outdoor premises are inspected prior to each use by children.			
A routine schedule of cleaning, sanitizing, and disinfecting is followed. Infant toys are cleaned and sanitized by staff as needed between each use by individual children.			
Procedures are in place to protect the confidentiality of any personally identifiable information in child records, including references to (a) disclosure with parental consent, (b) disclosure without parental consent but with parental notice and opportunity to refuse, and (C) disclosure without parental consent.			
Active Supervision			
Children, including sleeping children, are supervised by staff at all times and never left alone with volunteers.			
Children in outdoor areas do not have access to unsafe or unsupervised areas (e.g. body of water, roads or parking lots, or other hazards).			

Health/Safety Factors	Yes	No	Description of Conditions
Constant and active supervision is maintained when any child is in or around water.			
Redundant procedures are in place to ensure that no child is left alone, i.e. a second staff person is designated to check classroom, outdoor play areas, sleeping areas, and vehicles during transitions and prior to departure.			
Required staff to child ratios are maintained at all times per local, state, and Head Start regulations, whichever is more stringent.			
Required group sizes are maintained at all times per local, state, and Head Start regulations, whichever is more stringent.			
Human Resources			
All staff abide by the program's standards of conduct which must support children's well-being, prevent and address challenging behaviors, and prevent maltreatment of children or endangerment to children's health or safety.			
All staff have background checks, sex offender registry checks, criminal history checks including fingerprint checks, and initial health exams.			
Complete background checks are conducted for all staff at least once every five years unless there is a more stringent system to ensure child safety; health exams must be periodically completed as recommended and required by state, tribal, or local requirements.			
All regular volunteers have been screened for appropriate communicable diseases as required by law, or in absence of a related law, as recommended by the Health Services Advisory Committee.			
All staff are trained in mandated reporter responsibilities, including recognizing suspected child abuse and neglect and following mandated reporting requirements.			

Health/Safety Factors	Yes	No	Description of Conditions
Direct service staff are trained in first aid, CPR, prevention and control of infection diseases, use of safe sleeping practices, preventing and identifying Shaken Baby Syndrome, abusive head trauma, sun safety and medication administration (including the special needs of children with health issues), and to respond to specific medical emergencies, including asthma and allergies.			
All staff are trained in and implement hygiene practices related to toileting, hand washing, diapering, safe food preparation, and exposure to blood and body fluids.			
Transportation (if applicable)			
Program vehicles are properly equipped (e.g. two-way communication system, labeled and charged fire extinguisher, labeled first aid kit, seat belt cutter, reverse beeper, adaptations for children with disabilities as needed).			
Program carries out systematic preventive maintenance and each driver implements daily pre-trip vehicle inspections to ensure that vehicles used to transport children are in safe operating condition.			
Vehicles used for child transportation are inspected annually by an inspection program licensed or operated by the state.			
All auxiliary seating is built into the vehicle by the manufacturer, maintained, and included in the annual inspection.			
Children are seated using age, height and weight appropriate child passenger safety systems.			
Vehicle aisles and exits remain unobstructed at all times, and items in the passenger compartment are properly stored and secured.			

Health/Safety Factors	Yes	No	Description of Conditions
Drivers receive training prior to transporting any enrolled child, and refresher training each year. Topics include first aid, emergency response, operation of any special equipment, routine maintenance and vehicle safety checks, and recordkeeping.			
Bus monitors participate in annual training including child boarding and exiting procedures, use of child passenger safety systems, emergency response, evacuation procedures, pre- and post-trip vehicle checks, and child pick-up and release procedures.			
Trip routing minimizes the time a child is in transit, prevents vehicles from exceeding maximum passenger capacity, and assures child safety during pick-up and drop-off.			
Bus monitors and drivers have current information about individuals authorized to pick up the children.			
Bus monitors and drivers complete pre- and post-trip vehicle checks, including second or third complete interior inspections to ensure no child is ever left on a vehicle.			
Children receiving transportation services are taught safety procedures and participate in an initial emergency evacuation drill and at least two additional evacuation drills during the program year.			



ACF Administration for Children and Families	U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES	
	1. Log No. ACF-IM-HS-21-05	2. Issuance Date: 09/27/2021
	3. Originating Office: Office of Head Start	
	4. Key Words: Head Start Workforce; Staff Supports; Staff Wellness; Staff Well-being; Mental Health; Physical Health; Head Start Program Performance Standards; HSPPS	

INFORMATION MEMORANDUM

TO: All Head Start and Early Head Start Grant Recipients

SUBJECT: Supporting the Wellness of All Staff in the Head Start Workforce

INFORMATION: The Office of Head Start (OHS) recognizes the importance of every individual in the birth to 5 Head Start workforce and the essential role of program staff in the delivery of high-quality, comprehensive services to enrolled infants, toddlers, preschool-aged children, and their families. Each staff person across the Head Start workforce has the immense responsibility of performing a job that supports young children's early learning, health, mental health, and family well-being. Staff wellness is vital to child well-being. It is also a critical component in the ability to address the diverse and individualized needs of Head Start children and families.

OHS is committed to promoting and prioritizing needed supports for staff. Successfully supporting staff starts with staff wellness. As programs continue to move toward fully in-person services and address challenges brought on or worsened by the coronavirus disease 2019 (COVID-19) pandemic, prioritizing staff well-being is essential for all Head Start programs. This Information Memorandum (IM) describes the importance of, and requirements and recommendations for, building a culture of wellness across all Head Start programs.

The last year has brought significant challenges to the Head Start workforce. The COVID-19 pandemic has had a disparate impact on under-resourced communities, including many of those served by Head Start programs. There has also been heightened attention to racial injustice in our country, which has led to calls for major reforms to address long-standing societal inequities. These are particularly important concerns for OHS and the Head Start workforce. All staff have been impacted by COVID-19. Further, 60% of Head Start teaching staff are Black, Indigenous, and people of color, and 30% have a primary language other than English. As such, OHS is committed to a culture of wellness that includes holistic support for the entire Head Start workforce.

Prioritizing Staff Wellness in Head Start Programs

Staff wellness, also referred to as well-being, refers to staff's mental and physical health and how it shapes their engagement, job satisfaction, and overall quality of life. We know from research — and from staff themselves — that Head Start staff love their work and are committed to the infants, toddlers, and preschool-aged children and the families they serve, despite the work-related stresses and challenges the staff face. OHS recognizes the importance of promoting wellness so that all staff in the Head Start workforce can be successful in achieving their goals and fostering positive outcomes for children and families.

Staff who are happier, healthier, less stressed, and experience less depression are able to engage in higher quality interactions with children. Research indicates Head Start staff who experience frequent stress or symptoms of depression are more likely to perceive children in their care in a less positive light. This could, in turn, relate to lower quality interactions and care. Higher rates of depression among adults have also been linked with poorer child outcomes and less positive family-teacher relationships. Some Head Start staff have the added challenge of working with children who have experienced trauma while also managing their own history of trauma. Often, the Head Start workforce reports their own trauma-like symptoms or emotional duress due to consistently hearing about the traumatic experiences of the children and families they serve.

It is important that Head Start programs serving children from birth to 5 and their families consider ways to support the physical health, safety, and wellness of their staff. Staff experience many unique demands in their work with young children. Frequent bending, lifting and carrying children, and moving equipment places particular physical strains on staff. The furniture in classrooms may not be adult-sized, limiting staff to the floor or child-sized chairs and tables. A large percentage of staff experience at least one area of work-related ergonomic pain.

Head Start programs are strongly encouraged to create a working environment for staff that transmits a culture of wellness. This starts with program leaders modeling and promoting staff well-being and infusing this culture throughout all program services and interactions on a regular basis.

Programs can use Head Start base grant funding to support staff wellness efforts. These efforts are also allowable costs for funding received through the Coronavirus Response and Relief Supplemental Appropriations (CRRSA) and the American Rescue Plan (ARP) Acts. It is important that a program support their decisions to use base, CRRSA, ARP, or other funding for staff wellness activities with written policies and adequate documentation.

Strategies to Promote Wellness of Head Start Staff

In determining which strategies to use to promote staff wellness, programs should leverage their data to identify staff strengths and needs. For example, position turnover rates can help the program recognize where challenges exist in staff retention and focus resources on understanding and addressing staff concerns in those positions. The remainder of this IM shares actionable requirements and recommendations for programs.

1. **Programs must support a program-wide culture that promotes children’s mental health, social and emotional well-being, and overall health ([45 CFR §1302.45\(a\)](#)).** To achieve this, programs can:
 - Develop a clear mission and goals for staff wellness with actionable steps and strategies.
 - Periodically assess strengths and needs of staff by gathering data directly from both current and prospective staff.
 - Implement identified policies, procedures, and strategies to support staff wellness that are informed by program data. Gather feedback from staff on wellness strategies to determine if refinements or improvements are needed.
2. **Programs must ensure all staff and consultants follow appropriate practices to keep children safe during all activities, including, at a minimum, the requirements listed in [45 CFR §1302.47\(b\)\(5\)](#).** To achieve this, programs can also:
 - Provide at least one regularly scheduled break for staff during their work day.
 - Support staff to feel comfortable to request and receive a brief unscheduled ‘wellness break,’ in addition to a regularly scheduled break, to cool down or regroup if they are feeling overwhelmed. Programs can use floaters to cover these short breaks.
 - When possible, provide a dedicated space for staff breaks that offers comfortable seating, water, soft lighting, stress-reduction resources, etc.
 - Provide adequate paid vacation and sick leave for staff.
 - Offer employee assistance programs such as a check-in or consultation with a mental or physical health provider to address personal well-being concerns.
 - Ensure all Head Start program staff are vaccinated, and that everyone age 2 and older wears a mask, to support a healthy and safe environment as children and staff return to full in-person services.
3. **Programs are encouraged to foster a working environment of mutual respect, trust, and teamwork where staff feel empowered to make decisions and know that program leadership are there to support them.** To achieve this, programs can:
 - Empower education staff to feel true ownership of the learning and developmental progress of children in their care. For example:
 - Create frequent opportunities for education staff to take the lead on decisions about education practices and implement strategies that work for their classroom or home-based setting.
 - Support education staff to take risks, try innovative strategies, and treat mistakes as learning opportunities in their work with children.
 - Use strategies such as reflective supervision, peer reflection groups, mentoring, coaching, and mental health consultation to build a work climate of respect and trust.
 - Engage staff in team activities that foster a safe and fun work environment, such as:
 - Health and fitness challenges (e.g., staff exercising together or achieving a common health goal such as collectively walking 100 miles)
 - Celebrating staff’s personal and professional achievements
 - Noticing and rewarding staff for their work (e.g., personal thank-you notes, shout outs to staff who did something great in a certain week, etc.)

4. **Programs are encouraged to use one-time ARP and other sources of COVID-19 relief funding to provide incentives to staff to support retention.** To achieve this, programs can:
 - Consider hiring bonuses, hazard pay, return-to-work incentives, child care stipends, retention bonuses, or temporary raises in pay, particularly for staff positions that are difficult to fill ([45 CFR §75.431](#)).
 - Ensure staff have sufficient paid leave, including to receive the COVID-19 vaccine and recover from any side effects, as well as to quarantine or recover if they are exposed to or contract COVID-19.
 - Any incentives for staff must be reasonable and subject to an established written policy of the grant recipient for allowability ([45 CFR §75.431](#)). Programs are reminded to update their written policies and procedures to reflect staff incentives.
 - Programs should carefully communicate with staff that any incentives with one-time funding sources are not permanent. Programs may consider ways to link such incentives to a commitment from the employee to remain in their position for a certain period of time.
5. **Programs must make mental health and wellness information available to staff regarding health issues that may affect their job performance, and must provide staff with regularly scheduled opportunities to learn about mental health, wellness, and health education ([45 CFR §1302.93\(b\)](#)).** To achieve this, programs can:
 - Connect with other Head Start leaders and staff to learn about strategies that have worked in their programs, such as through [MyPeers](#).
 - Communicate with staff about the importance of their well-being in one-on-one and team meetings. Ensure leadership engages directly with teams to understand staff challenges.
 - Engage a mental health consultant or employee assistance program to provide opportunities for staff to learn about mental health and wellness.
 - Increase peer-to-peer learning related to well-being, such as listening circles to provide space for staff to check-in with each other, decompress, and discuss challenges.
 - Ensure program policies and procedures comply with the Occupational Safety and Health Administration (OSHA) [requirements for employers](#).
 - Support staff to attend trainings focused on well-being. Combine this with ongoing opportunities to implement newly acquired knowledge and skills (e.g., through coaching).
 - Review available resources on the Early Childhood Learning and Knowledge Center (ECLKC), including from the [Head Start Heals campaign](#).
6. **Programs are encouraged to consider ways to improve work spaces and incorporate more physical activity, safety practices, and healthy options into daily work routines.** To achieve this, programs can:
 - Provide adult-sized furniture in classrooms and other spaces staff may need to use on-site. This includes chairs, tables, desks, changing tables, step stools, etc.
 - Ensure staff have a dedicated space to take breaks and eat meals during the day.
 - Provide on-site yoga or exercise classes for staff.

- Encourage staff to implement physically active learning activities with children, such as dancing, outdoor games, sports, etc. Programs are encouraged to review resources from the [I Am Moving, I Am Learning](#) initiative.
 - Have healthy snack or meal options available for purchase on-site for staff.
7. **A critical part of promoting staff wellness is ensuring staff are aware of their rights as employees. Programs must establish written personnel policies and procedures that are approved by the governing body and Policy Council or policy committee and that are available to all staff (45 CFR §1302.90(a)).** Programs are encouraged to regularly inform staff of these policies and procedures, including their rights under applicable federal and state laws. For example:
- [Title VII of the Civil Rights Act of 1964](#) makes it illegal to discriminate against someone on the basis of race, color, religion, national origin, or sex.
 - [Title I of the Americans with Disabilities Act of 1990](#) prohibits organizations from discriminating against qualified individuals with disabilities in job application procedures, hiring, firing, advancement, compensation, job training, and other terms, conditions, and privileges of employment.
 - [Whistleblower protection laws](#) protect employees from employer retaliation for reporting workplace violations such as injuries, safety concerns, and other protected activities.
 - The Head Start Act states funds may not be used to assist, promote, or deter union organizing efforts ([Sec. 644\(e\)](#)). If a grantee uses non-Head Start resources for these purposes, costs must be carefully documented and allocated in a manner that ensures there is no misuse of federal Head Start funds. This prohibition on federal Head Start funds relates to the organizing and establishment of unions within the workplace. Grantees may incur normal and reasonable expenses once unions become established, such as expenses for negotiating labor agreements with established unions and allowing employees and managers time to resolve grievances during work hours.

If you have any questions regarding this IM, please contact your Regional Office. Thank you for the work you do on behalf of children and families.

/ Dr. Bernadine Futrell /

Dr. Bernadine Futrell
Director
Office of Head Start



2020-2021 EARLY HEAD START PROGRAM INFORMATION REPORT 05CH010384-200 ADRIAN CITY SCHOOL DISTRICT

A. PROGRAM INFORMATION

GENERAL INFORMATION

Grant Number	05CH010384
Program Number	200
Program Type	Early Head Start
Program Name	ADRIAN CITY SCHOOL DISTRICT
Program Address	340 E Church St
Program City, State, Zip Code (5+4)	Adrian, MI, 49221-2904
Program Phone Number	(517) 263 2468
Head Start or Early Head Start Director Name	Mr. David Bull
Head Start or Early Head Start Director Email	dbull@adrian.k12.mi.us
Agency Email	headstart@adrian.k12.mi.us
Agency Web Site Address	www.theadrianmaples.com
Name and Title of Approving Official	Ms. Beth Ferguson, Board President
DUNS Number	077575256
Agency Type	School System
Agency Description	Grantee that directly operates program(s) and has no delegates

FUNDED ENROLLMENT

Funded enrollment by funding source

	# of children / pregnant women
A.1 Funded Enrollment:	80
a. Head Start/Early Head Start Funded Enrollment, as identified on the NOA that captures the greatest part of the program year	80
b. Funded Enrollment from non-federal sources, i.e. state, local, private	0
c. Funded Enrollment from the MIECHV Grant Program using the Early Head Start home visiting model	0

Funded enrollment by program option

	# of slots
A.2 Center-based option	
a. Number of slots equal to or greater than 1,020 annual hours for Head Start preschool children or 1,380 annual hours for Early Head Start infants and toddlers	24
1. Of these, the number that are available for the full-working-day and full-calendar-year	24
b. Number of slots with fewer than 1,020 annual hours for Head Start preschool children or 1,380 annual hours for Early Head Start infants and toddlers	0
1. Of these, the number that are available for 3.5 hours per day for 128 days	0
2. Of these, the number that are available for a full working day	0
A.3 Home-based option	56
A.4 Family child care option	0
A.5 Locally designed option	0

	# of pregnant women slots
A.6 Pregnant women slots	0

Funded slots at child care partner

	# of slots
A.7 Total number of slots in the center-based or locally designed option	24
a. Of these, the total number of slots at a child care partner	0
A.8 Total funded enrollment at child care partners (includes center-based, locally designed, and family child care program options)	0

CLASSES IN CENTER-BASED

	# of classes
A.9 Total number of center-based classes operated	3
a. Of these, the number of double session classes	0

CUMULATIVE ENROLLMENT

Children by age

	# of children at enrollment
A.10 Children by age:	
a. Under 1 year	9
b. 1 year old	20
c. 2 years old	22
d. 3 years old	0
g. Total cumulative enrollment of children	51

Pregnant women (EHS programs)

	# of pregnant women
A.11 Cumulative enrollment of pregnant women	2

Total cumulative enrollment

	# of children / pregnant women
A.12 Total cumulative enrollment	53

Primary type of eligibility

	# of children / pregnant women
A.13 Report each enrollee only once by primary type of eligibility:	
a. Income at or below 100% of federal poverty line	35
b. Public assistance such as TANF and SSI	4
c. Foster care	1
d. Homeless	8
e. Eligibility based on other type of need, but not counted in A.13.a through d	1

	# of children / pregnant women
f. Incomes between 100% and 130% of the federal poverty line, but not counted in A.13.a through e	4

A.14 If the program serves enrollees under A.13.f, specify how the program has demonstrated that all income-eligible children in their area are being served.

No eligible children on the waitlist

Prior enrollment

	# of children
A.15 Enrolled in Head Start or Early Head Start for:	
a. The second year	21
b. Three or more years	9

Transition and turnover

	# of children
A.18 Total number of infants and toddlers who left the program any time after classes or home visits began and did not re-enroll	15
a. Of the infants and toddlers who left the program above, the number of infants and toddlers who were enrolled less than 45 days	3
b. Of the infants and toddlers who left the program during the program year, the number who aged out of Early Head Start	0
1. Of the infants and toddlers who aged out of Early Head Start, the number who entered a Head Start program	0
2. Of the infants and toddlers who aged out of Early Head Start, the number who entered another early childhood program	0
3. Of the infants and toddlers who aged out of Early Head Start, the number who did not enter another early childhood program	0

	# of pregnant women
A.19 Total number of pregnant women who left the program after receiving Early Head Start services but before the birth of their infant, and did not re-enroll	0
A.20 Number of pregnant women receiving Early Head Start services at the time their infant was born	2
a. Of the pregnant women enrolled when their infant was born, the number whose infant was subsequently enrolled in the program	2
b. Of the pregnant women enrolled when their infant was born, the number whose infant was not subsequently enrolled in the program	0

Child care subsidy

	# of children
A.24 The number of enrolled children for whom the program and/or its partners received a child care subsidy during the program year	0

Ethnicity and race

of children / pregnant women

	(1) Hispanic or Latino origin	(2) Non-Hispanic or Non-Latino origin
A.25 Race and ethnicity		
a. American Indian or Alaska Native	0	0
b. Asian	0	0
c. Black or African American	1	10
d. Native Hawaiian or other Pacific Islander	0	0
e. White	14	28
f. Bi-racial/Multi-racial	0	0
g. Other	0	0
h. Unspecified	0	0

Primary language of family at home

	# of children
A.26 Primary language of family at home:	
a. English	51
1. Of these, the number of children acquiring/learning another language in addition to English	0
b. Spanish	2
c. Native Central American, South American & Mexican Languages (e.g., Mixteco, Quichean.)	0
d. Caribbean Languages (e.g., Haitian-Creole, Patois)	0
e. Middle Eastern & South Asian Languages (e.g., Arabic, Hebrew, Hindi, Urdu, Bengali)	0
f. East Asian Languages (e.g., Chinese, Vietnamese, Tagalog)	0
g. Native North American/Alaska Native Languages	0
h. Pacific Island Languages (e.g., Palauan, Fijian)	0
i. European & Slavic Languages (e.g., German, French, Italian, Croatian, Yiddish, Portuguese, Russian)	0
j. African Languages (e.g., Swahili, Wolof)	0
k. American Sign Language	0
l. Other (e.g., American Sign Language)	0
m. Unspecified (language is not known or parents declined identifying the home language)	0

Dual language learners

	# of children
A.27 Total number of Dual Language Learners	2

Transportation

	# of children
A.28 Number of children for whom transportation is provided to and from classes	0

RECORD KEEPING

Management Information Systems

A.29 List the management information system(s) your program uses to support tracking, maintaining, and using data on enrollees, program services, families, and program staff.

Name/title

ChildPlus

B. PROGRAM STAFF & QUALIFICATIONS

TOTAL STAFF

Staff by type

	(1) # of Head Start or Early Head Start staff	(2) # of contracted staff
B.1 Total number of staff members, regardless of the funding source for their salary or number of hours worked	13	0
a. Of these, the number who are current or former Head Start or Early Head Start parents	5	0

TOTAL VOLUNTEERS

Volunteers by type

	# of volunteers
B.2 Number of persons providing any volunteer services to the program during the program year	47
a. Of these, the number who are current or former Head Start or Early Head Start parents	37

EDUCATION AND CHILD DEVELOPMENT STAFF

Infant and toddler classroom teachers (EHS and Migrant programs)

	# of classroom teachers
B.6 Total number of infant and toddler classroom teachers	6

	# of classroom teachers
Of the number of infant and toddler classroom teachers, the number with the following:	
a. An advanced degree in:	
1. Early childhood education with a focus on infant and toddler development or	
2. Any field and coursework equivalent to a major relating to early childhood education, with experience teaching infants and/or toddlers	0

	# of classroom teachers
Of the number of infant and toddler classroom teachers, the number with the following:	
b. A baccalaureate degree in:	
1. Early childhood education with a focus on infant and toddler development or	
2. Any field and coursework equivalent to a major relating to early childhood education, with experience teaching infants and/or toddlers	2

	# of classroom teachers
Of the number of infant and toddler classroom teachers, the number with the following:	
c. An associate degree in:	
1. Early childhood education with a focus on infant and toddler development or	
2. A field related to early childhood education and coursework equivalent to a major relating to early childhood education with experience teaching infants and/or toddlers	2

	# of classroom teachers
Of the number of infant and toddler classroom teachers, the number with the following:	
d. A Child Development Associate (CDA) credential or state-awarded certification, credential, or licensure that meets or exceeds CDA requirements	2
1. Of these, a CDA credential or state-awarded certification, credential, or licensure that meets or exceeds CDA requirements and that is appropriate to the option in which they are working	2

	# of classroom teachers
Of the number of infant and toddler classroom teachers, the number with the following:	
e. None of the qualifications listed in B.6.a through B.6.d	0

	# of classroom teachers
B.7 Total number of infant and toddler classroom teachers that do not have any qualifications listed in B.6.a through B.6.d	0
a. Of these infant and toddler classroom teachers, the number enrolled in a degree, certification, credential, or licensure program that would meet one of the qualifications listed in B.6.a through B.6.d.	0

Home visitors and family child care provider staff qualifications

	# of home visitors
B.8 Total number of home visitors	5
a. Of these, the number of home visitors that have a home-based CDA credential or comparable credential, or equivalent coursework as part of an associate's, baccalaureate, or advanced degree	5
b. Of these, the number of home visitors that do not meet one of the qualifications described in B.8.a.	0
1. Of the home visitors in B.8.b, the number enrolled in a degree or credential program that would meet a qualification described in B.8.a.	0

	# of family child care providers
B.9 Total number of family child care providers	0
a. Of these, the number of family child care providers that have a Family Child Care CDA credential or state equivalent, or an associate, baccalaureate, or advanced degree in child development or early childhood education	0
b. Of these, the number of family child care providers that do not meet one of the qualifications described in B.9.a.	0
1. Of the family child care providers in B.9.b, the number enrolled in a degree or credential program that would meet a qualification described in B.9.a.	0

	# of child development specialists
B.10 Total number of child development specialists that support family child care providers	0
a. Of these, the number of child development specialists that have a baccalaureate degree in child development, early childhood education, or a related field	0
b. Of these, the number of child development specialists that do not meet one of the qualifications described in B.10.a.	0
1. Of the child development specialists in B.10.b, the number enrolled in a degree or credential program that would meet a qualification described in B.10.a.	0

Ethnicity and race

	# of non-supervisory education and child development staff	
	(1) Hispanic or Latino origin	(2) Non-Hispanic or Non-Latino origin
B.13 Race and Ethnicity		
a. American Indian or Alaska Native	0	0
b. Asian	0	0
c. Black or African American	0	2
d. Native Hawaiian or other Pacific Islander	0	0
e. White	3	6
f. Biracial/Multi-racial	0	0
g. Other	0	0
h. Unspecified	0	0

Language

	# of non-supervisory education and child development staff
B.14 The number who are proficient in a language(s) other than English.	2
a. Of these, the number who are proficient in more than one language other than English	0

	# of non-supervisory education and child development staff
B.15 Language groups in which staff are proficient:	
a. Spanish	2
b. Native Central American, South American, and Mexican Languages (e.g., Mixteco, Quichean.)	0
c. Caribbean Languages (e.g., Haitian-Creole, Patois)	0
d. Middle Eastern and South Asian Languages (e.g., Arabic, Hebrew, Hindi, Urdu, Bengali)	0
e. East Asian Languages (e.g., Chinese, Vietnamese, Tagalog)	0
f. Native North American/Alaska Native Languages	0
g. Pacific Island Languages (e.g., Palauan, Fijian)	0
h. European and Slavic Languages (e.g., German, French, Italian, Croatian, Yiddish, Portuguese, Russian)	0
i. African Languages (e.g., Swahili, Wolof)	0
j. American Sign Language	0
k. Other	0
l. Unspecified (language is not known or parents declined identifying the language)	0

STAFF TURNOVER

All staff turnover

	(1) # of Early Head Start staff	(2) # of contracted staff
B.16 Total number of staff who left during the program year (including turnover that occurred while the program was not in session, e.g. summer months)	2	0
a. Of these, the number who were replaced	1	0

Education and child development staff turnover

	# of staff
B.17 The number of teachers, preschool assistant teachers, family child care providers, and home visitors who left during the program year (including turnover that occurred while classes and home visits were not in session, e.g. during summer months)	2
a. Of these, the number who were replaced	1
b. Of these, the number who left while classes and home visits were in session	2

	# of staff
B.18 Of the number of education and child development staff that left, the number that left for the following primary reason:	
a. Higher compensation	0
1. Of these, the number that moved to state pre-k or other early childhood program	0
b. Retirement or relocation	1
c. Involuntary separation	1
d. Other (e.g. change in job field, reason not provided)	0
B.19 Number of vacancies during the program year that remained unfilled for a period of 3 months or longer	0

C. CHILD AND HEALTH SERVICES

HEALTH SERVICES

Health insurance – children

	(1) # of children at enrollment	(2) # of children at end of enrollment
C.1 Number of all children with health insurance	51	51
a. Of these, the number enrolled in Medicaid and/or CHIP	46	45
b. Of these, the number enrolled in state-only funded insurance (e.g., medically indigent insurance), private insurance, or other health insurance	5	6
C.2 Number of children with no health insurance	0	0

Health insurance - pregnant women (EHS programs)

	(1) # of pregnant women at enrollment	(2) # of pregnant women at end of enrollment
C.3 Number of pregnant women with at least one type of health insurance	2	2
a. Of these, the number enrolled in Medicaid	2	2
b. Of these, the number enrolled in state-only funded insurance (e.g., medically indigent insurance), private insurance, or other health insurance	0	0
C.4 Number of pregnant women with no health insurance	0	0

Accessible health care - children

	(1) # of children at enrollment	(2) # of children at end of enrollment
C.5 Number of children with an ongoing source of continuous, accessible health care provided by a health care professional that maintains the child's ongoing health record and is not primarily a source of emergency or urgent care	51	51
a. Of these, the number of children that have accessible health care through a federally qualified Health Center, Indian Health Service, Tribal and/or Urban Indian Health Program facility	0	0

Accessible health care - pregnant women (EHS Programs)

	(1) # of pregnant women at enrollment	(2) # of pregnant women at end of enrollment
C.6 Number of pregnant women with an ongoing source of continuous, accessible health care provided by a health care professional that maintains their ongoing health record and is not primarily a source of emergency or urgent care	2	2

Medical services – children

	(1) # of children at enrollment	(2) # of children at end of enrollment
C.7 Number of all children who are up-to-date on a schedule of age-appropriate preventive and primary health care according to the relevant state's EPSDT schedule for well child care	0	17

	# of children
a. Of these, the number of children diagnosed with any chronic condition by a health care professional, regardless of when the condition was first diagnosed	0
1. Of these, the number who received medical treatment for their diagnosed chronic health condition	0
b. Specify the primary reason that children with any chronic condition diagnosed by a health care professional did not receive medical treatment:	# of children
1. No medical treatment needed	0
2. No health insurance	0
3. Parents did not keep/make appointment	0
4. Children left the program before their appointment date	0
5. Appointment is scheduled for future date	0
6. Other	0

C.8 Number of children diagnosed by a health care professional with the following chronic condition, regardless of when the condition was first diagnosed:	# of children
a. Autism spectrum disorder (ASD)	0
b. Attention deficit hyperactivity disorder (ADHD)	0
c. Asthma	0
d. Seizures	0
e. Life-threatening allergies (e.g. food allergies, bee stings, and medication allergies that may result in systemic anaphylaxis)	0
f. Hearing Problems	0
g. Vision Problems	0
h. Blood lead level test with elevated lead levels >5 g/dL	0
i. Diabetes	0

Immunization services - children

	(1) # of children at enrollment	(2) # of children at end of enrollment
C.10 Number of children who have been determined by a health care professional to be up-to-date on all immunizations appropriate for their age	21	22
C.11 Number of children who have been determined by a health care professional to have received all immunizations possible at this time but who have not received all immunizations appropriate for their age	11	16
C.12 Number of children who meet their state's guidelines for an exemption from immunizations	4	6

Medical services – pregnant women (EHS programs)

	# of pregnant women
C.13 Indicate the number of pregnant women who received the following services while enrolled in EHS:	
a. Prenatal health care	2
b. Postpartum health care	2
c. A professional oral health assessment, examination, and/or treatment	1
d. Mental health interventions and follow-up	2
e. Education on fetal development	2
f. Education on the benefits of breastfeeding	2
g. Education on the importance of nutrition	2
h. Education on infant care and safe sleep practices	2
i. Education on the risks of alcohol, drugs, and/or smoking	2
j. Facilitating access to substance abuse treatment (i.e. alcohol, drugs, and/or smoking)	0

Prenatal health – pregnant women (EHS programs)

	# of pregnant women
C.14 Trimester of pregnancy in which the pregnant women served were enrolled:	
a. 1st trimester (0-3 months)	1
b. 2nd trimester (3-6 months)	0
c. 3rd trimester (6-9 months)	1
C.15 Of the total served, the number whose pregnancies were identified as medically high risk by a physician or health care provider	1

Accessible dental care – children

	(1) # of children at enrollment	(2) # of children at end of enrollment
C.16 Number of children with continuous, accessible dental care provided by an oral health care professional which includes access to preventive care and dental treatment	41	47

Infant and toddler preventive dental services (EHS and Migrant programs)

	# of children at end of enrollment
C.19 Number of all children who are up-to-date according to the dental periodicity schedule in the relevant state's EPSDT schedule	17

Mental health consultation

	# of staff
C.20 Total number of classroom teachers, home visitors, and family child care providers	11
a. Indicate the number of classroom teachers, home visitors, and family child care providers who received assistance from a mental health consultant through observation and consultation	11

DISABILITIES SERVICES

IDEA eligibility determination

	# of children
C.21 The total number of children referred for an evaluation to determine eligibility under the Individuals with Disabilities Education Act (IDEA) during the program year	1
a. Of these, the number who received an evaluation to determine IDEA eligibility	0
1. Of the children that received an evaluation, the number that were diagnosed with a disability under IDEA	0
2. Of the children that received an evaluation, the number that were not diagnosed with a disability under IDEA	0
1. Of these children, the number for which the program is still providing or facilitating individualized services and supports such as an individual learning plan or supports described under Section 504 of the Rehabilitation Act.	0
b. Of these, the number who did not receive an evaluation to determine IDEA eligibility	1

	# of children
C.22 Specify the primary reason that children referred for an evaluation to determine IDEA eligibility did not receive it:	
a. The responsible agency assigned child to Response to Intervention (RTI)	0
b. Parent(s) refused evaluation	1
c. Evaluation is pending and not yet completed by responsible agency	0
d. Other	0

Infant and toddler Part C early intervention services (EHS and Migrant programs)

	# of children
C.24 Number of children enrolled in the program who had an Individualized Family Service Plan (IFSP), at any time during the program year, indicating they were determined eligible by the Part C Agency to receive early intervention services under the IDEA	11
a. Of these, the number who were determined eligible to receive early intervention services:	# of children
1. Prior to this program year	3
2. During this enrollment year	8
b. Of these, the number who have not received early intervention services under IDEA	0

EDUCATION AND DEVELOPMENT TOOLS/APPROACHES

Screening

	# of children
C.26 Number of all newly enrolled children since last year's PIR was reported	21
C.27 Number of all newly enrolled children who completed required screenings within 45 days for developmental, sensory, and behavioral concerns since last year's PIR was reported	12
a. Of these, the number identified as needing follow-up assessment or formal evaluation to determine if the child has a disability	3

C.28 The instrument(s) used by the program for developmental screening
<i>Name/title</i>
Other (Please Specify)
Other (Please Specify)
Other (Please Specify)

Assessment

C.29 Approach or tool(s) used by the program to support ongoing child assessment
<i>Name/title</i>
Other (Please Specify)
Teaching Strategies GOLD Online

Curriculum

C.30 Curriculum used by the program:
a. For center-based services
<i>Name/title</i>
Creative Curriculum (Infant & Toddler)
c. For home-based services
<i>Name/title</i>
Other (Please Specify)
d. For pregnant women services
<i>Name/title</i>
Other (Please Specify)
Partners For A Healthy Baby (Florida State University)
e. For building on the parents' knowledge and skill (i.e. parenting curriculum)
<i>Name/title</i>
Other (Please Specify)
Heart to Home
Other (Please Specify)
Conscious Discipline

Classroom and home visit observation tools

	Yes (Y) / No (N)
C.31 Does the program routinely use classroom or home visit observation tools to assess quality?	Yes

C.32 If yes, classroom and home visit observation tool(s) used by the program:
a. Center-based settings
<i>Name/title</i>
Other (Please Specify)
b. Home-based settings
<i>Name/title</i>
Other (Please Specify)

FAMILY AND COMMUNITY PARTNERSHIPS

Number of families

	# of families at enrollment
C.33 Total number of families:	44
a. Of these, the number of two-parent families	28
b. Of these, the number of single-parent families	16
C.34 Of the total number of families, the number in which the parent/guardian figures are best described as:	
a. Parent(s) (e.g. biological, adoptive, stepparents)	43
1. Of these, the number of families with a mother only (biological, adoptive, stepmother)	17
2. Of these, the number of families with a father only (biological, adoptive, stepfather)	0
b. Grandparents	0
c. Relative(s) other than grandparents	0
d. Foster parent(s) not including relatives	1
e. Other	0

Parent/guardian education

	# of families at enrollment
C.35 Of the total number of families, the highest level of education obtained by the child's parent(s) / guardian(s):	
a. An advanced degree or baccalaureate degree	3
b. An associate degree, vocational school, or some college	3
c. A high school graduate or GED	32
d. Less than high school graduate	6

Employment, Job Training, and School

	# of families at enrollment
C.36 Total number of families in which:	
a. At least one parent/guardian is employed, in job training, or in school at enrollment	31
1. Of these families, the number in which one or more parent/guardian is employed	31
2. Of these families, the number in which one or more parent/guardian is in job training (e.g. job training program, professional certificate, apprenticeship, or occupational license)	4
3. Of these families, the number in which one or more parent/guardian is in school (e.g. GED, associate degree, baccalaureate, or advanced degree)	2
b. Neither/No parent/guardian is employed, in job training, or in school at enrollment (e.g. unemployed, retired, or disabled)	13

	<i># of families at end of enrollment</i>
C.37 Total number of families in which:	
a. At least one parent/guardian is employed, in job training, or in school at end of enrollment	24
1. Of these families, the number of families that were also counted in C.36.a (as having been employed, in job training, or in school at enrollment)	21
2. Of these families, the number of families that were also counted in C.36.b (as having not been employed, in job training, or in school at enrollment)	3
b. Neither/No parent/guardian is employed, in job training, or in school at end of enrollment (e.g. unemployed, retired, or disabled)	20
1. Of these families, the number of families that were also counted in C.36.a	10
2. Of these families, the number of families that were also counted in C.36.b	10

	<i># of families at enrollment</i>
C.38 Total number of families in which:	
a. At least one parent/guardian is a member of the United States military on active duty	0
b. At least one parent/guardian is a veteran of the United States military	1

Federal or other assistance

	<i># of families at enrollment</i>	<i># of families at end of enrollment</i>
C.39 Total number of families receiving any cash benefits or other services under the Federal Temporary Assistance to Needy Families (TANF) Program	2	1
C.40 Total number of families receiving Supplemental Security Income (SSI)	4	4
C.41 Total number of families receiving services under the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)	34	36
C.42 Total number of families receiving services under the Supplemental Nutrition Assistance Program (SNAP), formerly referred to as Food Stamps	30	30

Family services

	# of families
C.43 The number of families that received the following program service to promote family outcomes:	
a. Emergency/crisis intervention (e.g. meeting immediate needs for food, clothing, or shelter)	31
b. Housing assistance (e.g. subsidies, utilities, repairs)	2
c. Asset building services (e.g. financial education, debt counseling)	0
d. Mental health services	0
e. Substance misuse prevention	0
f. Substance misuse treatment	0
g. English as a Second Language (ESL) training	0
h. Assistance in enrolling into an education or job training program	2
i. Research-based parenting curriculum	29
j. Involvement in discussing their child's screening and assessment results and their child's progress	37
k. Supporting transitions between programs (i.e. EHS to HS, HS to kindergarten)	17
l. Education on preventive medical and oral health	14
m. Education on health and developmental consequences of tobacco product use	0
n. Education on nutrition	17
o. Education on postpartum care (e.g. breastfeeding support)	4
p. Education on relationship/marriage	4
q. Assistance to families of incarcerated individuals	0
C.44 Of these, the number of families who were counted in at least one of the services listed above	41

Father engagement

	# of father/ father figures
C.45 Number of fathers/father figures who were engaged in the following activities during this program year:	
a. Family assessment	12
b. Family goal setting	10
c. Involvement in child's Head Start child development experiences (e.g. home visits, parent-teacher conferences, etc.)	21
d. Head Start program governance, such as participation in the Policy Council or policy committees	1
e. Parenting education workshops	2

Homelessness services

	# of families
C.46 Total number of families experiencing homelessness that were served during the enrollment year	5
	# of children
C.47 Total number of children experiencing homelessness that were served during the enrollment year	5

	# of families
C.48 Total number of families experiencing homelessness that acquired housing during the enrollment year	5

Foster care and child welfare

	# of children
C.49 Total number of enrolled children who were in foster care at any point during the program year	1
C.50 Total number of enrolled children who were referred to Head Start/Early Head Start services by a child welfare agency	1

REPORTING INFORMATION

PIR Report Status	Completed
Confirmation Number	21082749101
Last Update Date	08/27/2021



2020-2021 HEAD START PROGRAM INFORMATION REPORT

05CH010384-000 Adrian Public Schools

A. PROGRAM INFORMATION

GENERAL INFORMATION

Grant Number	05CH010384
Program Number	000
Program Type	Head Start
Program Name	Adrian Public Schools
Program Address	340 E Church St
Program City, State, Zip Code (5+4)	Adrian, MI, 49221-2904
Program Phone Number	(517) 263 2468
Head Start or Early Head Start Director Name	Mr. David Bull
Head Start or Early Head Start Director Email	dbull@adrian.k12.mi.us
Agency Email	headstart@adrian.k12.mi.us
Agency Web Site Address	www.theadrianmaples.com
Name and Title of Approving Official	Ms. Beth Ferguson, Board President
DUNS Number	077575256
Agency Type	School System
Agency Description	Grantee that directly operates program(s) and has no delegates

FUNDED ENROLLMENT

Funded enrollment by funding source

	# of children
A.1 Funded Enrollment:	246
a. Head Start/Early Head Start Funded Enrollment, as identified on the NOA that captures the greatest part of the program year	246
b. Funded Enrollment from non-federal sources, i.e. state, local, private	0

Funded enrollment by program option

	# of slots
A.2 Center-based option	
a. Number of slots equal to or greater than 1,020 annual hours for Head Start preschool children or 1,380 annual hours for Early Head Start infants and toddlers	246
1. Of these, the number that are available for the full-working-day and full-calendar-year	0
b. Number of slots with fewer than 1,020 annual hours for Head Start preschool children or 1,380 annual hours for Early Head Start infants and toddlers	0
1. Of these, the number that are available for 3.5 hours per day for 128 days	0
2. Of these, the number that are available for a full working day	0
A.3 Home-based option	0
A.4 Family child care option	0
A.5 Locally designed option	0

Funded slots at child care partner

	# of slots
A.7 Total number of slots in the center-based or locally designed option	246
a. Of these, the total number of slots at a child care partner	0
A.8 Total funded enrollment at child care partners (includes center-based, locally designed, and family child care program options)	0

CLASSES IN CENTER-BASED

	# of classes
A.9 Total number of center-based classes operated	14
a. Of these, the number of double session classes	0

CUMULATIVE ENROLLMENT

Children by age

	# of children at enrollment
A.10 Children by age:	
a. Under 1 year	0
b. 1 year old	0
c. 2 years old	0
d. 3 years old	62
e. 4 years old	98
f. 5 years and older	5
g. Total cumulative enrollment of children	165

Total cumulative enrollment

	# of children
A.12 Total cumulative enrollment	165

Primary type of eligibility

	# of children
A.13 Report each enrollee only once by primary type of eligibility:	
a. Income at or below 100% of federal poverty line	83
b. Public assistance such as TANF and SSI	14
c. Foster care	9
d. Homeless	14
e. Eligibility based on other type of need, but not counted in A.13.a through d	12
	# of children
f. Incomes between 100% and 130% of the federal poverty line, but not counted in A.13.a through e	33

A.14 If the program serves enrollees under A.13.f, specify how the program has demonstrated that all income-eligible children in their area are being served.

No eligible children on the waitlist

Prior enrollment

	# of children
A.15 Enrolled in Head Start or Early Head Start for:	
a. The second year	67
b. Three or more years	3

Transition and turnover

	# of children
A.16 Total number of preschool children who left the program any time after classes or home visits began and did not re-enroll	31
a. Of the preschool children who left the program during the program year, the number of preschool children who were enrolled less than 45 days	7

	# of preschool children
A.17 Of the number of preschool children enrolled in Head Start at the end of the current enrollment year, the number projected to be entering kindergarten in the following school year	83

Child care subsidy

	# of children
A.24 The number of enrolled children for whom the program and/or its partners received a child care subsidy during the program year	0

Ethnicity and race

	# of children	
	(1) Hispanic or Latino origin	(2) Non-Hispanic or Non-Latino origin
A.25 Race and ethnicity		
a. American Indian or Alaska Native	0	2
b. Asian	0	0
c. Black or African American	10	25
d. Native Hawaiian or other Pacific Islander	0	0
e. White	35	93
f. Bi-racial/Multi-racial	0	0
g. Other	0	0
h. Unspecified	0	0

Primary language of family at home

	# of children
A.26 Primary language of family at home:	
a. English	161
1. Of these, the number of children acquiring/learning another language in addition to English	3
b. Spanish	4
c. Native Central American, South American & Mexican Languages (e.g., Mixteco, Quichean.)	0
d. Caribbean Languages (e.g., Haitian-Creole, Patois)	0
e. Middle Eastern & South Asian Languages (e.g., Arabic, Hebrew, Hindi, Urdu, Bengali)	0
f. East Asian Languages (e.g., Chinese, Vietnamese, Tagalog)	0
g. Native North American/Alaska Native Languages	0
h. Pacific Island Languages (e.g., Palauan, Fijian)	0
i. European & Slavic Languages (e.g., German, French, Italian, Croatian, Yiddish, Portuguese, Russian)	0
j. African Languages (e.g., Swahili, Wolof)	0
k. American Sign Language	0
l. Other (e.g., American Sign Language)	0
m. Unspecified (language is not known or parents declined identifying the home language)	0

Dual language learners

	# of children
A.27 Total number of Dual Language Learners	7

Transportation

	# of children
A.28 Number of children for whom transportation is provided to and from classes	17

RECORD KEEPING

Management Information Systems

A.29 List the management information system(s) your program uses to support tracking, maintaining, and using data on enrollees, program services, families, and program staff.
Name/title
ChildPlus

B. PROGRAM STAFF & QUALIFICATIONS

TOTAL STAFF

Staff by type

	(1) # of Head Start or Early Head Start staff	(2) # of contracted staff
B.1 Total number of staff members, regardless of the funding source for their salary or number of hours worked	60	0
a. Of these, the number who are current or former Head Start or Early Head Start parents	11	0

TOTAL VOLUNTEERS

Volunteers by type

	# of volunteers
B.2 Number of persons providing any volunteer services to the program during the program year	200
a. Of these, the number who are current or former Head Start or Early Head Start parents	160

EDUCATION AND CHILD DEVELOPMENT STAFF

Preschool classroom and assistant teachers (HS and Migrant programs)

	(1) # of classroom teachers	(2) # of assistant teachers
B.3 Total number of preschool education and child development staff by position	30	9

	(1) # of classroom teachers	(2) # of assistant teachers
Of the number of preschool education and child development staff by position, the number with the following:		
a. An advanced degree in:		
1. Early childhood education		
2. Any field and coursework equivalent to a major relating to early childhood education, with experience teaching preschool-age children	2	0

	(1) # of classroom teachers	(2) # of assistant teachers
Of the number of preschool education and child development staff by position, the number with the following:		
b. A baccalaureate degree in one of the following:		
1. Early childhood education		
2. Any field and coursework equivalent to a major relating to early childhood education with experience teaching preschool-age children or		
3. Any field and is part of the Teach for America program and passed a rigorous early childhood content exam	16	0

	(1) # of classroom teachers	(2) # of assistant teachers
Of the number of preschool education and child development staff by position, the number with the following:		
c. An associate degree in:		
1. Early childhood education		
2. A field related to early childhood education and coursework equivalent to a major relating to early childhood education with experience teaching preschool-age children	6	0

	(1) # of classroom teachers	(2) # of assistant teachers
Of the number of preschool education and child development staff by position, the number with the following:		
d. A Child Development Associate (CDA) credential or state-awarded certification, credential, or licensure that meets or exceeds CDA requirements	6	9
1. Of these, a CDA credential or state-awarded certification, credential, or licensure that meets or exceeds CDA requirements and that is appropriate to the option in which they are working	6	9

	(1) # of classroom teachers	(2) # of assistant teachers
Of the number of preschool education and child development staff by position, the number with the following:		
e. None of the qualifications listed in B.3.a through B.3.d	0	0

Preschool classroom teachers program enrollment

	# of classroom teachers
B.4 Total number of preschool classroom teachers that do not meet qualifications listed in B.3.a or B.3.b	12
a. Of these preschool classroom teachers, the number enrolled in a degree program that would meet the qualifications described in B.3.a or B.3.b	2

Preschool classroom assistant teachers program enrollment

	# of assistant teachers
B.5 Total number of preschool assistant teachers that do not have any qualifications listed in B.3.a through B.3.d	0
a. Of these preschool assistant teachers, the number enrolled in a degree, certification, credential, or licensure program that would meet one of the qualifications listed in B.3.a through B.3.d.	0

Home visitors and family child care provider staff qualifications

	# of home visitors
B.8 Total number of home visitors	0
a. Of these, the number of home visitors that have a home-based CDA credential or comparable credential, or equivalent coursework as part of an associate's, baccalaureate, or advanced degree	0
b. Of these, the number of home visitors that do not meet one of the qualifications described in B.8.a.	0

	# of home visitors
1. Of the home visitors in B.8.b, the number enrolled in a degree or credential program that would meet a qualification described in B.8.a.	0
	# of family child care providers
B.9 Total number of family child care providers	0
a. Of these, the number of family child care providers that have a Family Child Care CDA credential or state equivalent, or an associate, baccalaureate, or advanced degree in child development or early childhood education	0
b. Of these, the number of family child care providers that do not meet one of the qualifications described in B.9.a.	0
1. Of the family child care providers in B.9.b, the number enrolled in a degree or credential program that would meet a qualification described in B.9.a.	0
	# of child development specialists
B.10 Total number of child development specialists that support family child care providers	0
a. Of these, the number of child development specialists that have a baccalaureate degree in child development, early childhood education, or a related field	0
b. Of these, the number of child development specialists that do not meet one of the qualifications described in B.10.a.	0
1. Of the child development specialists in B.10.b, the number enrolled in a degree or credential program that would meet a qualification described in B.10.a.	0

Ethnicity and race

	# of non-supervisory education and child development staff	
	(1) Hispanic or Latino origin	(2) Non-Hispanic or Non-Latino origin
B.13 Race and Ethnicity		
a. American Indian or Alaska Native	0	0
b. Asian	0	0
c. Black or African American	0	1
d. Native Hawaiian or other Pacific Islander	0	0
e. White	2	36
f. Biracial/Multi-racial	0	0
g. Other	0	0
h. Unspecified	0	0

Language

	# of non-supervisory education and child development staff
B.14 The number who are proficient in a language(s) other than English.	1
a. Of these, the number who are proficient in more than one language other than English	0

of non-supervisory
education and child
development staff

B.15 Language groups in which staff are proficient:	
a. Spanish	0
b. Native Central American, South American, and Mexican Languages (e.g., Mixteco, Quichean.)	0
c. Caribbean Languages (e.g., Haitian-Creole, Patois)	0
d. Middle Eastern and South Asian Languages (e.g., Arabic, Hebrew, Hindi, Urdu, Bengali)	0
e. East Asian Languages (e.g., Chinese, Vietnamese, Tagalog)	0
f. Native North American/Alaska Native Languages	0
g. Pacific Island Languages (e.g., Palauan, Fijian)	0
h. European and Slavic Languages (e.g., German, French, Italian, Croatian, Yiddish, Portuguese, Russian)	0
i. African Languages (e.g., Swahili, Wolof)	0
j. American Sign Language	0
k. Other	0
l. Unspecified (language is not known or parents declined identifying the language)	1

STAFF TURNOVER

All staff turnover

	(1) # of Head Start staff	(2) # of contracted staff
B.16 Total number of staff who left during the program year (including turnover that occurred while the program was not in session, e.g. summer months)	4	0
a. Of these, the number who were replaced	4	0

Education and child development staff turnover

	# of staff
B.17 The number of teachers, preschool assistant teachers, family child care providers, and home visitors who left during the program year (including turnover that occurred while classes and home visits were not in session, e.g. during summer months)	8
a. Of these, the number who were replaced	3
b. Of these, the number who left while classes and home visits were in session	8

	# of staff
B.18 Of the number of education and child development staff that left, the number that left for the following primary reason:	
a. Higher compensation	0
1. Of these, the number that moved to state pre-k or other early childhood program	0
b. Retirement or relocation	0
c. Involuntary separation	4
d. Other (e.g. change in job field, reason not provided)	4

1. Specify:	change in job fields	
B.19 Number of vacancies during the program year that remained unfilled for a period of 3 months or longer		3

C. CHILD AND HEALTH SERVICES

HEALTH SERVICES

Health insurance – children

	(1) # of children at enrollment	(2) # of children at end of enrollment
C.1 Number of all children with health insurance	162	163
a. Of these, the number enrolled in Medicaid and/or CHIP	139	140
b. Of these, the number enrolled in state-only funded insurance (e.g., medically indigent insurance), private insurance, or other health insurance	23	23
C.2 Number of children with no health insurance	3	2

Accessible health care - children

	(1) # of children at enrollment	(2) # of children at end of enrollment
C.5 Number of children with an ongoing source of continuous, accessible health care provided by a health care professional that maintains the child's ongoing health record and is not primarily a source of emergency or urgent care	163	165
a. Of these, the number of children that have accessible health care through a federally qualified Health Center, Indian Health Service, Tribal and/or Urban Indian Health Program facility	0	0

Medical services – children

	(1) # of children at enrollment	(2) # of children at end of enrollment
C.7 Number of all children who are up-to-date on a schedule of age-appropriate preventive and primary health care according to the relevant state's EPSDT schedule for well child care	1	128

	# of children
a. Of these, the number of children diagnosed with any chronic condition by a health care professional, regardless of when the condition was first diagnosed	19
1. Of these, the number who received medical treatment for their diagnosed chronic health condition	19
b. Specify the primary reason that children with any chronic condition diagnosed by a health care professional did not receive medical treatment:	# of children
1. No medical treatment needed	0
2. No health insurance	0
3. Parents did not keep/make appointment	0
4. Children left the program before their appointment date	0
5. Appointment is scheduled for future date	0
6. Other	0

C.8 Number of children diagnosed by a health care professional with the following chronic condition, regardless of when the condition was first diagnosed:	# of children
a. Autism spectrum disorder (ASD)	1
b. Attention deficit hyperactivity disorder (ADHD)	0
c. Asthma	8
d. Seizures	0
e. Life-threatening allergies (e.g. food allergies, bee stings, and medication allergies that may result in systemic anaphylaxis)	4
f. Hearing Problems	0
g. Vision Problems	15
h. Blood lead level test with elevated lead levels >5 g/dL	0
i. Diabetes	0

Body Mass Index (BMI) – children (HS and Migrant programs)

	# of children at enrollment
C.9 Number of children who are in the following weight categories according to the 2000 CDC BMI-for-age growth charts	
a. Underweight (BMI less than 5th percentile for child's age and sex)	4
b. Healthy weight (at or above 5th percentile and below 85th percentile for child's age and sex)	102
c. Overweight (BMI at or above 85th percentile and below 95th percentile for child's age and sex)	30
d. Obese (BMI at or above 95th percentile for child's age and sex)	29

Immunization services - children

	(1) # of children at enrollment	(2) # of children at end of enrollment
C.10 Number of children who have been determined by a health care professional to be up-to-date on all immunizations appropriate for their age	153	157
C.11 Number of children who have been determined by a health care professional to have received all immunizations possible at this time but who have not received all immunizations appropriate for their age	3	1
C.12 Number of children who meet their state's guidelines for an exemption from immunizations	4	5

Accessible dental care – children

	(1) # of children at enrollment	(2) # of children at end of enrollment
C.16 Number of children with continuous, accessible dental care provided by an oral health care professional which includes access to preventive care and dental treatment	138	156

Preschool dental services (HS and Migrant programs)

	# of children at end of enrollment
C.17 Number of children who received preventive care during the program year	122
C.18 Number of all children, including those enrolled in Medicaid or CHIP, who have completed a professional dental examination during the program year	126
a. Of these, the number of children diagnosed as needing dental treatment during the program year - at end of enrollment	21
1. Of these, the number of children who have received or are receiving dental treatment - at end of enrollment	19
b. Specify the primary reason that children who needed dental treatment did not receive it:	# of children
1. Health insurance doesn't cover dental treatment	0
2. No dental care available in local area	0
3. Medicaid not accepted by dentist	0
4. Dentists in the area do not treat 3 – 5 year old children	0
5. Parents did not keep/make appointment	1
6. Children left the program before their appointment date	0
7. Appointment is scheduled for future date	1
8. No transportation	0
9. Other	0

Mental health consultation

	# of staff
C.20 Total number of classroom teachers, home visitors, and family child care providers	30
a. Indicate the number of classroom teachers, home visitors, and family child care providers who received assistance from a mental health consultant through observation and consultation	29

DISABILITIES SERVICES

IDEA eligibility determination

	# of children
C.21 The total number of children referred for an evaluation to determine eligibility under the Individuals with Disabilities Education Act (IDEA) during the program year	14
a. Of these, the number who received an evaluation to determine IDEA eligibility	10
1. Of the children that received an evaluation, the number that were diagnosed with a disability under IDEA	5
2. Of the children that received an evaluation, the number that were not diagnosed with a disability under IDEA	2
1. Of these children, the number for which the program is still providing or facilitating individualized services and supports such as an individual learning plan or supports described under Section 504 of the Rehabilitation Act.	0
b. Of these, the number who did not receive an evaluation to determine IDEA eligibility	4

	# of children
C.22 Specify the primary reason that children referred for an evaluation to determine IDEA eligibility did not receive it:	
a. The responsible agency assigned child to Response to Intervention (RTI)	1
b. Parent(s) refused evaluation	1
c. Evaluation is pending and not yet completed by responsible agency	0
d. Other	0

Preschool disabilities services (HS and Migrant programs)

	# of children
C.23 Number of children enrolled in the program who had an Individualized Education Program (IEP), at any time during the program year, indicating they were determined eligible by the LEA to receive special education and related services under the IDEA	26
a. Of these, the number who were determined eligible to receive special education and related services:	# of children
1. Prior to this program year	17
2. During this enrollment year	9
b. Of these, the number who have not received special education and related services	0

Preschool primary disabilities (HS and Migrant programs)

	(1) # of children determined to have this disability	(2) # of children receiving special services
C.25 Diagnosed primary disability:		
a. Health impairment (i.e. meeting IDEA definition of "other health impairment")	0	0
b. Emotional disturbance	0	0
c. Speech or language impairments	20	20
d. Intellectual disabilities	0	0
e. Hearing impairment, including deafness	0	0
f. Orthopedic impairment	0	0
g. Visual impairment, including blindness	0	0
h. Specific learning disability	0	0
i. Autism	1	1
j. Traumatic brain injury	0	0
k. Non-categorical/developmental delay	5	5
l. Multiple disabilities (excluding deaf-blind)	0	0
m. Deaf-blind	0	0

EDUCATION AND DEVELOPMENT TOOLS/APPROACHES

Screening

	# of children
C.26 Number of all newly enrolled children since last year's PIR was reported	96
C.27 Number of all newly enrolled children who completed required screenings within 45 days for developmental, sensory, and behavioral concerns since last year's PIR was reported	42
a. Of these, the number identified as needing follow-up assessment or formal evaluation to determine if the child has a disability	13
C.28 The instrument(s) used by the program for developmental screening	
<i>Name/title</i>	
Other (Please Specify)	
Other (Please Specify)	
Other (Please Specify)	

Assessment

C.29 Approach or tool(s) used by the program to support ongoing child assessment
<i>Name/title</i>
Teaching Strategies GOLD Online

Curriculum

C.30 Curriculum used by the program:
a. For center-based services
<i>Name/title</i>
Creative Curriculum (PreSchool)
e. For building on the parents' knowledge and skill (i.e. parenting curriculum)
<i>Name/title</i>
Other (Please Specify)
Conscious Discipline: School to Heart to Home

Classroom and home visit observation tools

	Yes (Y) / No (N)
C.31 Does the program routinely use classroom or home visit observation tools to assess quality?	No
C.32 If yes, classroom and home visit observation tool(s) used by the program:	
a. Center-based settings	
<i>Name/title</i>	
Other (Please Specify)	

FAMILY AND COMMUNITY PARTNERSHIPS

Number of families

	# of families at enrollment
C.33 Total number of families:	152
a. Of these, the number of two-parent families	64
b. Of these, the number of single-parent families	88
C.34 Of the total number of families, the number in which the parent/guardian figures are best described as:	
a. Parent(s) (e.g. biological, adoptive, stepparents)	138
1. Of these, the number of families with a mother only (biological, adoptive, stepmother)	73
2. Of these, the number of families with a father only (biological, adoptive, stepfather)	4
b. Grandparents	6
c. Relative(s) other than grandparents	5
d. Foster parent(s) not including relatives	3
e. Other	0

Parent/guardian education

	# of families at enrollment
C.35 Of the total number of families, the highest level of education obtained by the child's parent(s) / guardian(s):	
a. An advanced degree or baccalaureate degree	13
b. An associate degree, vocational school, or some college	19
c. A high school graduate or GED	103
d. Less than high school graduate	17

Employment, Job Training, and School

	# of families at enrollment
C.36 Total number of families in which:	
a. At least one parent/guardian is employed, in job training, or in school at enrollment	108
1. Of these families, the number in which one or more parent/guardian is employed	102
2. Of these families, the number in which one or more parent/guardian is in job training (e.g. job training program, professional certificate, apprenticeship, or occupational license)	15
3. Of these families, the number in which one or more parent/guardian is in school (e.g. GED, associate degree, baccalaureate, or advanced degree)	8
b. Neither/No parent/guardian is employed, in job training, or in school at enrollment (e.g. unemployed, retired, or disabled)	44

	# of families at end of enrollment
C.37 Total number of families in which:	
a. At least one parent/guardian is employed, in job training, or in school at end of enrollment	74
1. Of these families, the number of families that were also counted in C.36.a (as having been employed, in job training, or in school at enrollment)	65
2. Of these families, the number of families that were also counted in C.36.b (as having not been employed, in job training, or in school at enrollment)	9
b. Neither/No parent/guardian is employed, in job training, or in school at end of enrollment (e.g. unemployed, retired, or disabled)	78
1. Of these families, the number of families that were also counted in C.36.a	43
2. Of these families, the number of families that were also counted in C.36.b	35

	# of families at enrollment
C.38 Total number of families in which:	
a. At least one parent/guardian is a member of the United States military on active duty	0
b. At least one parent/guardian is a veteran of the United States military	6

Federal or other assistance

	# of families at enrollment	# of families at end of enrollment
C.39 Total number of families receiving any cash benefits or other services under the Federal Temporary Assistance to Needy Families (TANF) Program	10	7
C.40 Total number of families receiving Supplemental Security Income (SSI)	4	5
C.41 Total number of families receiving services under the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)	83	88
C.42 Total number of families receiving services under the Supplemental Nutrition Assistance Program (SNAP), formerly referred to as Food Stamps	74	74

Family services

	# of families
C.43 The number of families that received the following program service to promote family outcomes:	
a. Emergency/crisis intervention (e.g. meeting immediate needs for food, clothing, or shelter)	77
b. Housing assistance (e.g. subsidies, utilities, repairs)	5
c. Asset building services (e.g. financial education, debt counseling)	1
d. Mental health services	12
e. Substance misuse prevention	0
f. Substance misuse treatment	0
g. English as a Second Language (ESL) training	0
h. Assistance in enrolling into an education or job training program	4
i. Research-based parenting curriculum	19
j. Involvement in discussing their child's screening and assessment results and their child's progress	111
k. Supporting transitions between programs (i.e. EHS to HS, HS to kindergarten)	10
l. Education on preventive medical and oral health	21
m. Education on health and developmental consequences of tobacco product use	0
n. Education on nutrition	8
o. Education on postpartum care (e.g. breastfeeding support)	0
p. Education on relationship/marriage	0
q. Assistance to families of incarcerated individuals	0
C.44 Of these, the number of families who were counted in at least one of the services listed above	129

Father engagement

	# of father/ father figures
C.45 Number of fathers/father figures who were engaged in the following activities during this program year:	
a. Family assessment	20
b. Family goal setting	15
c. Involvement in child's Head Start child development experiences (e.g. home visits, parent-teacher conferences, etc.)	30
d. Head Start program governance, such as participation in the Policy Council or policy committees	1
e. Parenting education workshops	2

Homelessness services

	# of families
C.46 Total number of families experiencing homelessness that were served during the enrollment year	16
	# of children
C.47 Total number of children experiencing homelessness that were served during the enrollment year	16

	<i># of families</i>
C.48 Total number of families experiencing homelessness that acquired housing during the enrollment year	6

Foster care and child welfare

	<i># of children</i>
C.49 Total number of enrolled children who were in foster care at any point during the program year	12
C.50 Total number of enrolled children who were referred to Head Start/Early Head Start services by a child welfare agency	2

D. GRANT LEVEL QUESTIONS

INTENSIVE COACHING

	<i># of education and child development staff</i>
D.1 The number of education and child development staff (i.e. teachers, preschool assistant teachers, home visitors, FFC providers) that received intensive coaching	6
	<i># of coaches</i>
D.2 The number of individuals that provided intensive coaching, whether by staff, consultants, or through partnership	2

FAMILY SERVICES STAFF QUALIFICATIONS

	<i># of family services staff</i>
D.5 Total number of family services staff:	5
a. Of these, the number that have a credential, certification, associate, baccalaureate, or advanced degree in social work, human services, family services, counseling, or a related field	4
b. Of these, the number that do not meet one of the qualifications described in D.5.a	1
1. Of the family services staff in D.5.b, the number enrolled in a degree or credential program that would meet a qualification described in D.5.a.	1
2. Of the family services staff in D.5.b, the number hired before November 7, 2016	1

FORMAL AGREEMENTS FOR COLLABORATION

	<i># of formal agreements</i>
D.6 Total number of formal agreements with child care partners	0
D.7 Total number of LEAs in the service area	12
a. Of these, the total number of formal agreements with those LEAs to coordinate services for children with disabilities	12
b. Of these, the total number of formal agreements with those LEAs to coordinate transition services	12

REPORTING INFORMATION

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