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Number: D.51.1

Service Area: PDM-Management Systems & Procedures  
Section: Program Planning

Relevant Forms: Located on P:/common drive  
Date Effective: 05/2013

REGULATION REFERENCE:  Performance Standard 1304.51(a)(1)

POLICY: SIU Carbondale Head Start must ensure a systematic ongoing process of program planning which includes consultation with the Head Start Advisory Board body, Policy Council, program staff and other appropriate community organizations.

PROCEDURE:
- A multi-faceted approach is utilized in the development of program plans.
- Committees comprised of:
  - Coordinating staff, direct line staff, Health Advisory Committee representatives and Policy Council members (including community representatives), administrative staff and Advisory board governing body members are asked to participate and be involved in the planning process.
  - Self-Assessment, Community Assessment, PIR data, External Audit reports, Center Visit Reports, Non-Compliance reports etc. are used in preparing plans.
  - Program’s On-Going Monitoring Schedule, Governance Plan, Policy Council and Advisory Board schedule outline activities time frames and responsibilities.
POLICY: The program must complete an assessment of the community strengths, needs and resources and prepare a community assessment report. The assessment must be in accordance with the requirement of 45CFR 1305.3 The Head Start Community Assessment (CA) is conducted to assist in identifying relevant physical, economic, social, and other community resources, as well as problems, as they relate to the design and implementation of the SIU Carbondale Head Start Program.

The Community Assessment is a process for collecting data that describes the status of the communities within Jackson and Williamson counties. The findings of the Community Assessment (CA) can be utilized to identify needs of families and children within the service areas, in addition to determining the types of services and program options that would best meet those needs. The CA findings can also assist in identifying where shortages exist in community linkages, suggest possibilities in bridging those gaps, and build upon the current community resources to further enhance the services that are currently being provided.

The community-wide strategic planning process incorporates the findings of the community assessment, program self-assessment with input from community and staff stakeholders into the development the philosophy, long range and short term goals of the program, define current, as well as future service areas, and identify resources that would be able to address identified needs.

PROCEDURE: Full Assessment – The full community assessment is to be conducted every three years, which is the year that is the first year of the triennial cycle requiring a full continuation grant application. The following steps outline activities in completing the CA. The required content of the Community Assessment include the following information:

- Demographic make-up of Head Start eligible children and families, which include the number, geographic location, and racial composition;
- Number of children with disabilities, types of disabilities, and relevant services and resources provided by community agencies;
- Data on education, health, nutrition, and social services needs of Head Start eligible children and families;
- The education, health, nutrition, and social service needs of children and their families as defined by families of Head Start eligible children and by institutions in the community serving young children;
- Other child development and publicly funded state and local preschool programs, and the approximate number of Head Start eligible children served by each;
• Resources in the community that could be used to address the needs of Head Start eligible children and their families, including problems with availability and accessibility.
• A summary of the process used to conduct the Community Assessment (CA), which includes the involvement of parents, staff, and other sources of statistical information and data.

• The FCPC works in coordination with the program director to determine areas of focus, timeframes/due dates, participants and assignments.
  o Timeframes for data collection are generally November – January, concluding with a findings meeting for stakeholders and participants held in February and the final report prepared.
  o Participants may include staff at all levels, Policy Council members, University officials and community members and determines the schedule of activities.
• Generally, the FCPC is responsible for overseeing data collection, preparing the report and presenting community assessment data at the findings meeting.

Update Year – The Community Assessment update takes place during intervening years following a full assessment. The purpose of the update is to review the full Community Assessment to determine if there have been significant changes that need to be reported and impact program design and options.
• The FCPC works in coordination with the program director to determine areas of focus, timeframes/due dates, participants and assignments.
• Generally, The FCPC is responsible for overseeing data collection, preparing the report and presenting community assessment data.
REGULATION REFERENCE: Performance Standard 1304.51(a)(1)(ii)

POLICY: The program must develop long-range program goals and short-term program and financial objectives that address the findings of the Community Assessment, are consistent with the philosophy of Head Start and reflect the findings of the program's annual self-assessment.

PROCEDURE:
- The long-range goals and short-term and financial objectives are derived each program year during the planning process carried out December through March.
- The findings of both the completed Community Assessment and Self-Assessment are reviewed.
- A team is formed comprised of staff, Policy Council, Advisory board Member and appropriate community agencies to review the results of the completed assessments.
- After collecting the information, reviewing the presentations, the information is reviewed and analyzed and the trends, major issues and concerns affecting the well-being of low-income families with young children.
- These are then drafted into multi-years goals and short-term and financial objectives by the end of February.
- Generally at the February/March Policy Council and Advisory Board meetings, goals are submitted for review and approval following any needed revisions and are included into the next program year grant application.
- Before the end of May, the management team establishes step-by-step task to complete the multi-year goals and short-term and financial objectives.
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**REGULATION REFERENCE:** Performance Standard 1304.51(a)(1)(iii) & 1304.51(a)2

**POLICY:** The program must develop written plans for implementing services in each of the program areas covered by Early Childhood Development and Health Services, Family and Community Partnerships and Program Design and Management.

**PROCEDURE:**
- Each March the program begins the review/revision of the written service implantation plans.
- Service Area staff work in coordination with assigned Policy Council members and review the plan’s respective area for needed revisions.
- The draft updated plan is provided to the full council for review and recommended changes.
- It is normally presented for approval in May/June to the Policy Council.
Subject: Communication-General
Number: D.51.5

Service Area: PDM-Management Systems & Procedures
Section: Communication

Relevant Forms: Located on P:/common drive
Date Effective: 08/2006

REGULATION REFERENCE: Performance Standard 1304.51 (b)

POLICY: The program must establish and implement systems to ensure that timely and accurate information is provided to parents, Policy Council, staff and the general community.

PROCEDURE: See individual procedures on communication with families, Governing Body & Policy Council, staff and community.
**SIU CARBONDALE HEAD START**  
Operating Policies and Procedures Manual

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**REGULATION REFERENCE:** Performance Standard 1304.51 (C)(1) & (2)

**POLICY:** The program must ensure effective two-way comprehensive communications between staff and parents that are carried out on a regular basis throughout the year. The program must communicate with parents in the parents’ primary or preferred language or through an interpreter, to the extent feasible.

**PROCEDURE:** Communication between the program and families is achieved through a variety of activities and opportunities:

- Recruitment materials are posted throughout the communities Parent Orientation occurs each year, interpreters are provided as needed
- Parent Committee Meetings
- Policy Council Meetings are conducted monthly (except July)
- Agency-wide Family Newsletter is distributed monthly, September through May?
- Parent Handbook provides information and encourages families to visit the child’s center any time during operating hours
- Family partnership agreements are developed via home visits during the first 90 days of the child’s entry date.
- Educational home visits and parent-teacher conferences are each scheduled two times during the program year, usually once during each quarter.
- Parent conferences are held on an as needed basis for children with presenting issues/concerns
- Pre-referral meetings are held for children suspected of disability
- Representation by parents and staff during child’s Individualized Education Plan (IEP) development and annual review of the plan
- Classroom calendar is provided monthly
- Phone calls and written notes occur on-going
- Program’s web-site provides over-view about the program and up-to-date activities

**SchoolMessenger Notification System Procedures**

- The SchoolMessenger broadcast system will be used as needed to notify households and parents by phone, email and/or text message in the event of an emergency, inclement weather or unplanned event. The service will also be used to communicate general announcements and reminders.
- A SchoolMessenger Message Approval/Information Change Form will be used to submit changes to the Head Start office manager about changes to call lists.
- All updated family phone #s as well as staff updates should be forwarded to the Head Start office manager as soon as possible in order to keep contacts on the SchoolMessenger lists current.
• Messages drafted by teachers and community workers are to be approved by center directors prior to the message being broadcast.
• Questions, concerns, etc. with the SchoolMessenger system should be addressed to the Head Start office manager.

Communicating in the parents’ primary or preferred language:

• Assessing English Proficiency—Families will be assessed during the enrollment process to determine the predominant language spoken in the home. If the family’s predominant language is not English, the intake person will, at the time of the enrollment, note the family’s proficiency in communicating effectively. The data collected will be analyzed program wide as well as for individual centers and classrooms.

• Activities/Events Needing Communication assistance—When needed communication assistance will be provided during the following activities/events conducted by the agency:
  o Enrollment (when known in advance assistance will be needed)
  o Home Visits by Teachers and Family/Community Service Workers
  o Parent Teacher Conferences
  o Parent Orientation
  o Parent Meetings and Training
  o Classroom volunteering
  o Recognition Night Activities
  o Family Literacy Events
  o Policy Council
  o Translation of Written materials, if available

• Resources for Communication Assistance—When bi-lingual Family/Community Service Workers (FCSWs) are employed by the program, they will be the primary staff person at their assigned center utilized to communicate with families during activities listed above. If available, staff other than Family/Community Service Workers (FCSWs) who are bi-lingual may be utilized on an occasional basis (walk-in, emergency phone call, etc.) to assist with translation.

• Each fiscal year a list of approved interpreters is to be compiled and shared with coordinators, specialists, and center directors.
  The FCPC) is responsible to maintain an up-to-date list.
  The FCPC must provide names, addresses, social security numbers and any other required information to the director to ensure all appropriate approvals/paperwork is in place prior to payment.

• Procedures for Scheduling Assistance—center directors and collaboration/training specialist are responsible to ensure interpreter is available for scheduled parent activities, meetings, training, home visits, parent teacher conferences, enrollments, family assessments and partnership goal development.

• Tracking Hours—Interpreter hours are to be tracked on a Consultant Invoice Form which will be signed by the interpreter and center director/collaboration/training specialist arranging the service.

• Invoices will be submitted to the FCPC who will review and submit to the director who will review, approve and forward to the accounting staff for payment.
The FCPC is responsible for monitoring hours/utilization of interpreters and reporting any issues to the director.
REGULATION REFERENCE: Performance Standard 1304.51 (C)(2)

POLICY: Communication between staff and Policy Council and the Head Start director, and Governance Advisory Board is achieved through an established system including Policy Council meetings, Governance Board meetings, a shared governance plan, policies and procedures, and staff and program planning meetings.

PROCEDURE:
- Shared Governance Plan is developed biannually by key management staff, Advisory Board and Policy council. The plan identifies various reports and activities that will be provided to the groups along with the time frame.
- Policy Council establishes a planning calendar each June/August to identify activities, reports that are to occur each month.
- Advisory Board establishes a planning calendar each June to identify activities and reports that are to occur each month.
- Program director reports and fiscal reports are provided each month to Policy Council and Advisory Board (Note: Advisory Board receives electronically)
- Program Service Area Plans are reviewed and approved by Policy Council annually.
- Continuing grant application is developed in February and March and must have PC and Advisory Board approval prior to April 1 due date.
- Grant applications throughout the year are presented to PC and Advisory Board for input and approval.
- Semi-monthly and SF425 reports provide fiscal and programmatic oversight.
REGULATION REFERENCE: Performance Standard 1304.51(e)

POLICY: SIU Carbondale Head Start must have mechanisms in place to ensure regular communication among all program staff.

PROCEDURE: Staff communication occurs through a variety of methods:
- Regularly scheduled staff meetings are developed at the beginning of each fiscal and program year.
- Program wide staff meetings are conducted twice per year.
- Management staff meetings are denoted on the agency calendar; service area management staff meets monthly with the director and meeting minutes are prepared and posted on common drive for access. Fiscal staff meets monthly with the business manager and then conduct a monthly meeting with the director to review budget status. Center directors meetings are held monthly with the immediate supervisor and other appropriate staff; meeting minutes are provided.
- Center staff meetings are determined by each respective site director and schedules are submitted to the supervisor. Meeting minutes are submitted to the supervisor for review and monitoring.
- Team meetings, consisting of health/nutrition staff, family/community engagement staff, respective center directors and family/community service workers, are conducted monthly to review status, follow-up needs of health, attendance, family assessments/goals and other child/families issues. Schedule is determined annually. The child development staff will attend as needed.
- Teacher/FCS worker consultations are conducted within 90 days of the child’s attendance and subsequent meetings are held as necessary to discuss child/family concerns.
- Daily communication occurs electronically. In addition, telephone/voicemail is available to communicate with necessary staff.
- Professional Development Plans, CLASS results and Classroom Level Assessment Data reports are used as methods to communicate among supervisors, CDC mental health consultant and teachers. The time frames for these communications are outlined in the on-going monitoring schedule, early childhood development operating procedures.
- Memos and letters are used on an as needed basis for communicating.
- Pre-service and in-service trainings are conducted at the beginning and throughout the year. These provide opportunities for introduction and clarification regarding policies and procedures along with professional development workshops and for input and discussions among staff.
Subject: Communication - Community
Service Area: PDM-Management Systems & Procedures
Relevant Forms: Located on P:/common drive
Number: D.51.9
Section: Communication
Date Effective: 08/2012

REGULATION REFERENCE: Performance Standard 1304.51 (b)

POLICY: The program must establish and implement systems to ensure that timely and accurate information is provided to the general community.

PROCEDURE: The program communicates with the community through the following systematic processes:

- Annual Report—the program prepares an annual report and makes available to the public that contains information regarding total amount of public and private funds received segmented by source, explanation of budgetary expenditures, proposed budget for the current fiscal year, total number of children and families served including average monthly enrollment, percent of eligible children served, percentage of enrolled children that received medical and dental exams, information on parental involvement activities, agency’s efforts to prepare children for Kindergarten, and any other information required by the Secretary of DHHS.

- Community Connections newsletter contains information of relevance to community stakeholders and is distributed twice per year—spring and fall.

- Web-site headstart.siu.edu provides enrollment, services, locations, volunteer information and news updates about the program.

- Interagency agreements/memoranda of understanding are established with community service providers and LEAs to ensure children/families have access to needed services.

- Community Involvement—program staff serve on a variety of community agency committees and attend meetings per meeting schedules. Likewise community agency staff serve on Head Start committees including Health Advisory Committee, Kindergarten Transition Committee, and Self-Assessment Committees.

- For detailed procedures regarding Community Connections newsletter, Community Partnership Agreements and other Community Involvement see Family Community Partnerships.
Subject: Record Keeping Systems/Confidentiality
Number: D.51.10
Service Area: PDM-Management Systems & Procedures
Section: Record Keeping-Systems
Relevant Forms: Located on P:\common drive
Date Effective: 05/2015

REGULATION REFERENCE: Performance Standard 1304.51(g)

POLICY: SIU Carbondale Head Start must establish and maintain effective, efficient and confidential record keeping systems to provide timely and accurate information.

PROCEDURE:
Record Keeping Systems: The chart lists records that are maintained by the program. The data base systems, Child Outcomes and Planning Administration (COPA) and Teaching Strategies Gold Assessment, allow for enhanced organizational analysis and reporting. For specific instructions to use the databases see the COPA procedures on-line and the on-line Gold manual.

TYPES OF RECORDS

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<th>Family:</th>
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<td>• Attendance &amp; Meal Participation</td>
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<td>• DCFS Licensing Requirements</td>
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<td>• Communicable Disease Reports</td>
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<td>• CACFP Records</td>
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Confidentiality:
This policy covers all persons working, volunteering or doing business with SIU Carbondale Head Start both during and after employment. Head Start deals with information that is confidential and restricted. SIU Carbondale Head Start employees, volunteers and consultants may be exposed to information that is not to be disclosed. SIU Carbondale Head Start is required by HHS/ACF to establish safeguards which will ensure the confidentiality of information collected regarding Head Start children, Head Start families and Head Start staff. Head Start staff and families shall have the right to protection from the disclosure of personal information during and following their involvement with the Head Start program. SIU Carbondale Head Start personnel shall respect the confidentiality of children, family and personnel records.

Conduct of personnel, volunteers and consultants:
All individuals are expected to be professional and maintain confidentiality at all times whether dealing with children’s records, participating in program directed meetings or carrying on conversations. Situations in violation of this policy include, but are not limited to:

- “Loose talk among Head Start staff, volunteers or consultants regarding information about children, families or fellow employee.
- Discussing children/families development, functioning, appearance, behavior, standard of living outside the work setting
- Sharing of information acquired by persons in the course of their work to others who don’t have a need to know the information
- Permitting unauthorized access to children’s files and staff files; and permitting unauthorized access to Head Start computers to confidential child/family information and employee information
- Accessing information that the individual doesn’t have the authority to access in the course of his/her work

A breach of confidentiality may result in disciplinary action by the department.

Children’s Files, including Children with Disabilities
No files/records will be released to any other agency, school, institution, organization or person without the written consent of the parent/guardian listed on the child’s Head Start application.

Personnel Files
All personnel files are maintained in locked files at the Head Start director’s administrative office as well as Human Resource office at SIU Carbondale. Accessibility to these files is limited to:

- Head Start director
- Administrative assistant and secretaries

Each center is required to maintain personnel files in order to comply with Department of Children and Family Services regulations. Each center director maintains center personnel files in a locked file cabinet. Only the center director has access to these files.
Electronic Data
Records of all enrolled children and their families are entered into SIU Carbondale Head Start’s primary database, Child Outcomes Planning & Assessment (COPA). The Child Outcomes Planning and Assessment database is web based. COPA assumes all rights and responsibilities for the information stored within COPA. The SIU Carbondale Head Start Program further utilizes user levels and special access restrictions that exist within COPA. Those security levels are as follows:
- Grantee Level—program director, business manager, office manager, LAN administrator
- Agency Level—coordinators and specialists
- Site Level - center directors and Family and Community Service Workers
- Class Level—Teachers and other personnel as assigned.

In order to avoid security breach, it is important to remember to log out of the database or lock your computer when you are away from your desk.

Data Base Access
COPA and GOLD: The following security procedures are to be implemented per the director/designee.
New employees—receive password to access appropriate user level data, as needed; employee changes password to his/her own.
Separating Employees—passwords are to be deactivated upon completion of separation paperwork.
Passwords—passwords for nine and ten month employees are to be reset at the end of the work schedule each May. Upon return to work in August, temporary passwords are to be distributed to appropriate staff to create a new password.

Children’s Records
- Normally SIU Carbondale Head Start Policy regarding official child records is as follows:
  - Confidentiality is maintained with paper documents through identified personnel accessibility to files and storage of files in locked file cabinets.
  - Confidentiality of electronic information is ensured by use of username/password system whereby only authorized personnel have access to electronic information that is deemed confidential.

Review and/or Copy of Records
- Parents and legal guardians who wish to review or obtain copies of their child’s file should contact the center director to make the request and to complete necessary paperwork. All requests to review the child’s folder will be processed within 72 hours.
- All requests to copy the child’s folder will be processed within two (2) weeks.

Transfer of Records to Public School
- Records of children who are age-eligible for kindergarten are normally provided to the respective school district. During the month of April, parents/guardians will be provided a form to complete indicating the specific items from the child’s Head Start folder to provide to the public school.
- No records will be released to any outside agency without the express written consent of a child’s parent and/or guardian.
The record keeping is designed to provide adequate source documentation for each transaction and to separate transactions by program account. The following fiscal records are maintained by the Head Start Program accounting staff and the respective University department, i.e., Purchasing, Surplus Property, Accounting Services, Travel Services, Risk Management, Legal Counsel, Human Resources and Office of Special Projects Administration:

- Copies of financial reports, AIS reports, program monthly budget reports, 15% administrative costs reports, Child and Adult Care Food program reports, Childcare Assistance Program (subsidy) records,
- Requests/purchase orders/procurement card statements/receipts/reconciliation reports/disbursements for all purchases
- Inventory records
- Personnel fringe benefit reports
- In-Kind reports
- Vehicle lists
- Insurance certifications
- Facility leases
- Consultant Contracts
- Co-Location Contracts
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REGULATION REFERENCE: Performance Standard 1304.51(g); IDCFS 407.250 i)

POLICY: SIU Carbondale Head Start will maintain organized and up-to-date files for every child who applies to the SIU Carbondale Head Start program. Filing entails placing the item in the proper section of the file, initialing the appropriate checklist, and ensuring procedures for confidential record keeping are followed.

PROCEDURE:

1. Center directors are responsible to ensure that children’s files are organized, maintained, and up-to-date at their assigned center.
2. Service area coordinators are responsible to ensure that each accepted child’s file is reviewed prior to attendance.
3. Family and Community Service Workers are responsible to ensure application materials are completed fully and accurately.
4. Each child’s file will include the following sections: DCFS/Head Start Requirements, Enrollment information, Health/Nutrition, Miscellaneous / Additional Forms, Family/Community Service Worker, and Teacher. Checklists are maintained in the child’s file indicating the order in which files should be organized.
5. File checklists will be initiated by the center director (during summer months Enrollment staff) at the time of their initial file review and verification of the Selection Criteria.
6. Each enrolled child’s file is maintained at the center that the child attends.
7. New child applications that do not have age and/or income verification are maintained at the center.
8. Each waitlist child’s file is maintained in the central office once age and income have been verified.
9. Children who terminate from the program or are no longer interested in the program will have their file maintained in the central office. When a child is terminated from the program, center directors have one week to ensure all outstanding items are filed and the file turned into the central office.
10. Children who transition to kindergarten will have their file maintained by the central office for 5 years.
11. Center directors are responsible to ensure all items are filed within one week of receipt.
12. Family/Community Service Workers are to assist center directors with all filing within one week of receipt.
13. The supervising teacher in coordination with the assistant teacher is responsible to access and review each child’s file assigned to their class list. This is to be completed prior to the first day of attendance. The supervising teacher and
assistant teachers are responsible to initial and date the Enrollment Notes page. 
(see Health - Special Needs - B.22.7)
14. Center directors/collaboration/training specialist are to ensure a file review is completed on all currently enrolled children’s files at their respective centers annually...
15. A file review report is to be submitted to the collaboration/training specialist.
16. Collaboration/training specialist will conduct follow-up file review based on the annual reports. On-site file reviews are to be conducted to ensure missing documents are filed. Additionally, monitoring of new enrollees files will be conducted during these on-site reviews.
17. Unannounced file reviews may be conducted by assigned service area staff under the direction of the program director.
REGULATION REFERENCE:

POLICY:
The program will use technology in a variety of ways to enhance program operations.

PROCEDURE:
- The program will maintain a technology plan of computer equipment to determine replacement needs.
- The program will ensure that at a minimum computers are available to administrative staff, Center directors, Family/Community Service Workers, and Teaching staff to complete assigned tasks.
- Computers in Head Start centers are to be used by employees for Head Start purposes and not personal use. Family/Community Service Workers may use office computers to assist families in receiving needed services.
- Each staff member will have a computer log-in and password which will limit access to ensure information is kept confidential.
- Each Head Start employee will have access to an email address; this email address will be used to communicate between staff members.
- The program will ensure that each center has working telephones and fax machines.
- Staff are not to use cell phones for personal use when working directly with children. See DCFS standard, Section 407.190(g)/407.200(p)
- Records of all enrolled children and their families are entered into SIU Carbondale Head Start's primary database, Child Outcomes Planning & Assessment (COPA). The Child Outcomes Planning and Assessment database is web based. COPA assumes all rights and responsibilities for the information stored in COPA as well as performing regular back-ups of that information. The SIU Carbondale Head Start Program further utilizes user levels and special access restrictions that exist within COPA. In order to avoid a security breach, it is important to remember to log out of the database or lock your computer when you are away from your desk.
- Child Assessment data is entered, tracked, reported, and monitored through the Teaching Strategies GOLD. Supervising Teachers are responsible for completing the checkpoints in Teaching Strategies GOLD per the developed schedule. The CDC is responsible for reviewing, monitoring, reporting, and sharing the assessment data available through Teaching Strategies GOLD. The SIU Carbondale Head Start Program further utilizes user levels and special access restrictions that exist within Teaching Strategies GOLD. In order to avoid a security breach, it is important to remember to log out of the database or lock your computer when you are away from your desk.
SchoolMessenger is a web-based phone communication system to send automated voice and text messages to staff, families, and board members. Access is restricted to the director, office manager and LAN administrator. This program will be utilized on an as needed basis for mass contact in case of inclement weather, school emergency closings, etc.

Access to Databases
- The following security procedures are to be implemented per the director/designee.
- New employees receive password to access appropriate user level data; employee changes password to his/her own.
- Separating Employees-passwords are to be deactivated upon completion of separation paperwork.
- Passwords for nine and ten month employees are to be reset at the end of the work schedule each May. Upon return to work, temporary passwords are to be distributed to appropriate staff to create a new password.

All questions and issues with technology are to be forwarded to the office manager

The program will contract with a LAN Administrator to install hardware and software, update systems, review available technology options, and provide technical support.

The program will have a Technology Committee that meets at least quarterly to review equipment, software, and training needs.
REGULATION REFERENCE: Performance Standard 1304.51 (h)(1)

POLICY: SIU Carbondale Head Start must establish and maintain efficient and effective reporting systems that generate periodic reports of financial status and program operations to control program quality, maintain accountability and advise Advisory Board, Policy Council and staff of program progress.

PROCEDURE:
- Reports are sent to the Head Start director, Policy Council and Advisory Board on a monthly basis.
- Data entered into the database provides information to generate reports that include: monthly enrollment, absenteeism follow-up, average daily attendance, disabilities status, child assessments, child screenings, home visits, referrals, immunization tracking, growth assessments, health status tracking, health information report, family assessments, family demographics, CACFP meal count, daily meal count, USDA meal participation, staff training, personnel information, and staff qualifications.
- Director’s Report: are to be submitted monthly by each service area to the program director by each Wednesday prior to the regularly scheduled Policy Council Meeting. The report is shared with, Policy Council and Head Start Advisory Board for operational oversight and fiscal accountability. Additional procedures on collecting data and generating reports are located in the respective service area. The report includes:
  - Enrollment
  - Average daily attendance (ADA)
  - Disabilities enrollment
  - Educational activities
  - Health requirements status
  - CACFP reimbursement
  - Recruitment efforts
  - Parent involvement
  - Facilities updates
  - Bus maintenance
  - Staff training
- DHHS Semi-Annual Report—this report is prepared by Head Start director. It must be submitted to the Regional Office and OSPA within 30 days following the end of each 6-month period of the fiscal year (July 31 and January 31). The report is also provided to the Executive director and the Head Start Advisory Board.
• Audits and corrective action reports—annual external audit report, child and Adult Food Program audit report and the Triennial Federal On-site Monitoring Review Report is provided to the Head Start director’s supervisor and Head Start Advisory Board and Policy Council.

• Budget reports are prepared by business manager/fiscal staff monthly to review with Policy Council and Head Start Advisory Board.

• Annual self-assessment is initiated each fall.

• Regional Office semi-annual narrative report—Program Information Report (PIR)—grantee is notified via e-mail message each year providing instructions on completion of this report. The program utilizes the database to retrieve data to complete the report.

• Financial report-SF 425- is completed by Accounting Services within 30 days following the end of each 6-month period of the fiscal year and the final report is submitted prior to 90 days of the end of the fiscal year (September 30).

• Financial audit reports and reports of financial status and expenditures are submitted as required.

• Inventory and property control records are updated annually as required by the university. Business manager is responsible to ensure reports are complete and submitted per time schedule.

• Insurance policies are reviewed annually and documentation is to be maintained of their benefits, premiums and effective dates—Accident & Causality for students and volunteers is renewed annually in August; Automobile and General Liability is reviewed and renewed annually in July; Miscellaneous Marine Articles (furniture and equipment) is reviewed and renewed annually in October; Property Insurance (buildings) is reviewed and renewed each July.

• Accounting schedule for financial reports are listed below. These reports are to be completed by the accounting staff and submitted to the business manager for accuracy and then submitted to Head Start director.
  o CACFP (due on-line on the 5th of each month)
  o Vehicle mileage (due to Travel Service on the 6th of each month)
  o 15% Administrative Cost (15th of next month)
  o In-Kind report (end of each quarter (15th of next month)
  o Employee physical/TB’s due list (3rd Monday of each month)
  o “P” card-Reconcile transactions from previous month (3rd Monday of each month)
  o “P” card equipment transaction forms submitted to fixed assets (3rd Monday of each month)
  o PSO report (3rd Wednesday of each month)
  o “P” card report (3rd Wednesday of each month)
  o Blanket report (3rd Wednesday of each month)
  o Policy Council budget report (4th Monday of each month)
  o Personnel budget report-director (4th Monday of each month)
  o Monthly status report on extra-help employees-director (4th Monday of each month)
  o 508 to DCFS (30th of each month)
  o DCFS physical expired & due-letter to staff (30th of each month)
  o Check on DCFS required physical/fingerprint/reference letters due back (30th of each month)
  o V/SL report (30th of each month)
  o Supply report (30th of each month)
- Personnel Reports-All Staff (including substitutes), administrative, center staff lists (30th of each month)
- Childcare assistance program report (CCAP)-PSOC to director (due by the 10th of each month)
Subject: Reports - Official  
Number: D.51.12  
Service Area: PDM-Management Systems & Procedures  
Section: Reporting Systems  
Relevant Forms: Located on P:/common drive  
Date Effective: 05/2015

REGULATION REFERENCE: Performance Standard 1304.51 (h)(2)

POLICY: SIU Carbondale must have a system to ensure required official reports are generated.

PROCEDURE: Head Start director is responsible to ensure the following reports are submitted timely:
- Regional Office semi-annual narrative report—required within 30 days following the end of each 6-month period of the fiscal year (July 31 and January 31). Reports are submitted to the Office of Sponsored Projects Administration (OSPA).
- Program Information Report (PIR)—grantee is notified via e-mail message each year providing instructions on completion of this report. The program utilizes the database to retrieve data to complete the report.
- Financial report-SF 425- is completed by Accounting Services within 30 days following the end of each 6-month period of the fiscal year and the final report is submitted prior to 90 days of the end of the fiscal year (September 30).
- Financial audit reports and reports of financial status and expenditures are submitted as required.
SIU CARBONDALE HEAD START
Operating Policies and Procedures Manual

Subject: Self-Assessment & Monitoring
Number: D.51.13

Service Area: PDM-Management Systems & Procedures
Section: Program Self-Assessment & Monitoring

Relevant Forms: Located on P:/common drive
Date Effective: 05/2015

REGULATION REFERENCE: Performance Standard 1304.51(i)(1) & (2)

POLICY: SIU Carbondale Head Start must conduct an annual on-site evaluation and assessment of their effectiveness and progress in meeting program goals and objectives and in implementing Federal regulations. SIU Carbondale head Start must establish and implement procedures for the ongoing monitoring of their operations to ensure that that these operations effectively implement Federal regulations. Ongoing regular monitoring of SIU Carbondale Head Start program operations is designed to ensure that the program effectively implements federal, state, and local regulations. The monitoring process analyzes program reports, progress towards meeting goals, accurate completion of tasks within designated time frames, and ensures necessary follow-up and appropriate intervention is completed in a timely manner. Procedures are developed and implemented to ensure on-going monitoring and follow-up of Head Start Program regulations for Parts 1304, 1305, 1306, 1308 and 1310 as outlined in the Performance Standards, along with fiscal and other relative administrative regulations per local, state and federal mandates, i.e., Department of Children and Family Services (DCFS), Illinois State Fire Marshal, Jackson and Bi-County Health Departments, Illinois Department of Transportation (IDOT)

PROCEDURE:
Self-assessment: Process is conducted annually as follows:
- The self-assessment instrument/on-going monitoring tool that will be used by HHS/ACF/Office of Head Start to conduct the Federal on-site triennial monitoring reviews is used to conduct the assessment; to augment the process additional assessment materials may be used.
- Head Start director is responsible to assign a staff person to plan and lead the self-assessment process.
- Developing self-assessment teams is initiated in October; the process begins with recruiting, assigning and training Policy Council members, parents, community representatives, Advisory Board and staff; a staff person, usually a service area coordinator is the team leader.
- Team leaders are responsible for providing additional guidance to team members in conducting the assessment.
- Teams are responsible to conduct an on-site review of all the Head Start service components between the months of October and January. Participants review appropriate documents, interview staff and parents, and conduct on-site observations.
• Information gathered from the assessment is compiled into a report by each team leader.
• In February, a findings meeting is held. All team members are invited to the meeting along with the full Policy Council, staff representatives, and specific agencies identified to participate in the communitywide strategic planning. Plans are developed for areas needing improvement and information is used to establish short-term and long-term goals.
• A final report is prepared to detail the results, acknowledge areas in which the program exceeds performance standards, and plan remediation strategies for program improvement.
• The plans are presented to the Policy Council and Advisory Board in March for approval and included in the annual grant application as required.

External Monitoring: The SIU Carbondale Head Start program is monitored for compliance with state and local regulations by the SIU External Auditors, Department of Children and Family Services, Illinois State Fire Marshal, Jackson and Bi-County Health Departments, Illinois Department of Transportation and Illinois State Board of Education. Implementation of the procedures set forth by the above agencies is necessary to maintain day care license, health department food service permits, transportation services and the Child and Adult Care Food Program.

Department of Children and Family Services (DCFS)
• Every three years head Start centers must complete an application for daycare license renewal. Business manager prepares and submits the application.
• An on-site visit is conducted by the DCFS daycare licensing representative. The center director is responsible to provide all necessary forms, files, records, etc. during the licensing visit.
• In addition to the triennial renewals, an annual unannounced site visit is conducted by the licensing representative.
• Report is prepared and provided to the center director; any areas needed corrected are identified. Follow-up is completed by using the non-compliance corrective action process outlined at the end of this section.

Illinois State Fire Marshal
• The Illinois State Fire Marshal conducts an unannounced visit to the centers to conduct an inspection.
• Report is prepared and provided to the center director; any areas needed corrected are identified. Follow-up is completed by using the non-compliance corrective action process outlined at the end of this section.

Jackson and Bi-County Health Departments
• Kitchen areas of each Head Start Center are inspected bi-annually by each respective county’s health department.
• Report is prepared and provided to the center director; any areas needed corrected are identified. Follow-up is completed by using the non-compliance corrective action process outlined at the end of this section.
Illinois Department of Transportation (IDOT)

- Inspectors from this agency conduct an unannounced inspection of Head Start buses; the schedule of these inspections is unknown, i.e., annually, biannually, etc.
- Report is prepared and provided to the center director or in the event it is during the summer when buses are parked at the Carbondale Center lot, report is provided to the director’s office. In coordination with SIU Carbondale Travel Service areas identified are corrected. The program/Travel Service must verify in writing citations have been corrected and submit to IDOT.

Internal Monitoring: The SIU Carbondale Head Start program uses a variety of methods and tools to monitor program operations. Service areas monitoring procedures, time frames, and responsibilities are described in each areas’ operating procedures. Additional monitoring occurs at the monthly service area meeting with coordinators, specialists and managers via the On-going Monitoring Management Schedule and the short term/long term goals. Coordinators are responsible to report status of activities/tasks to the Head Start director. The center directors are to complete a daily center report, daily center safety check, a monthly center report, and review a monthly management schedule to ensure completion of required duties and review with the Head Start director or designee monthly.

Monitoring Reports:
- Director’s Report: submitted monthly by each service area to the Head Start director and shared with Policy Council and Head Start Advisory Board for operational oversight and fiscal accountability. This report includes such things as:
  - Enrollment
  - Average daily attendance (ADA)
  - Disabilities enrollment
  - Educational activities
  - Health requirements status
  - CACFP reimbursement
  - Recruitment efforts
  - Parent involvement
  - Facilities updates
  - Bus maintenance
  - Staff training
- DHHS Semi-Annual Report
- Audits and corrective action reports (CACFP)
- Budget reports
- Annual self-assessment
- Program Information Report (PIR)
Follow-Up Regarding Monitoring Reports:
During Head Start Federal Reviews, Child Care and Adult Food Program Audits, Fire Marshall Inspections, DCFS Re-Licensures and annual External Audits, SIU Carbondale Head Start is monitored on how the program deals with circumstances that are not compliant with numerous rules and regulations that are mandatory by these agencies. One of the ways the program addresses this is by identifying non-compliances (rules or regulations/procedures that are not being met) and developing steps to ensure the rule, regulation or procedure will be followed (corrective action). The word non-compliance is the term that the Office of Head Start Monitoring Tool uses to identify rules/regulations that the program is not following during a federal review.

The intent of the non-compliance corrective action report is to have an on-going monitoring process that ensures the program is fulfilling the terms and conditions of the DHS/ACF/Office grant contract. If it is determined by these various regulating entities that programs are not complying with rules/regulations, we place ourselves in jeopardy of receiving deficiencies, citations, etc. and therefore, possible issues with continued receipts of our grant awards.

The systematic process in place for correcting non-compliances is:
- Non-compliance identified through the monitoring process
- A Non-Compliance Corrective Action form is generated by staff with assigned accountability and responsibilities for program operations in the service areas. The corrective action form identifies the issue needing corrected and cites regulations, rules, and/or performance standards. Timeframes are set for correction.
- The forms are provided to the collaboration/training specialist for distribution to appropriate staff for development of corrective action steps. A coordinated approach can be used to develop the corrective action steps.
- Identified Non-Compliances should be stated on the form and submitted to the collaboration/training specialist for review prior to submitting to the center director. Upon review and acceptance, the collaboration/training specialist will discuss with the center director.
- The center director is to develop corrective action plan, sign and date form.
- Copy will be provided to the staff person that initiated the non-compliance who monitors the completion and implementation of the corrective action steps (as applicable).
- Once the service area staff has documented that the corrective action has occurred, the form should be submitted to the collaboration/training specialist who will route to director for signature and will maintain files for non-compliances.
- Policy Council and Head Start Advisory Board will be informed of any significant non-compliance requiring necessary input and/or approvals.