



# CONTRA COSTA COUNTY

## AGENDA

### Head Start Committee

Supervisor John Gioia, Chair  
Supervisor Shanelle Scales-Preston, Vice Chair

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**Monday, January 27, 2025**                      **9:00 AM**                      **1470 Civic Court, Suite 200, Concord |**  
**11780 San Pablo Ave., Suite D, El**  
**Cerrito | 190 E 4th Street, Pittsburg |**  
**[https://eccounty-us.zoom.us/j/861635196](https://eccounty-us.zoom.us/j/86163519671)**  
**71 | Call in: 888-278-0254, conference**  
**code 812185**

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1.     **The public may attend this meeting in person at either above location. The public may also attend this meeting remotely via Zoom or call-in.**
2.     Agenda Items: Items may be taken out of order based on the business of the day and preference of the Committee.
3.     Call to Order
4.     Public comment on any item under the jurisdiction of the Committee and not on this agenda (speakers may be limited to two (2) minutes).
5.     APPROVE the Board of Supervisors Head Start Committee Minutes of [25-300](#)  
November 4, 2024.  
**Attachments:** [BOS Head Start Committee Meeting Minutes of 11-4-2024 DRAFT](#)
6.     DISCUSS and ACCEPT the Head Start Committee Update. [25-301](#)  
**Attachments:** [Head Start Committe Update - January 2025 - Final Corrected 1-27-24](#)
  1. [Notice of Award 09CH012839-01](#)
  2. [Early Childhood Education Convenings List](#)
  3. [Contra Costa County Head Start Application](#)
  4. [Board Resolution 2023.274](#)
  5. [Board Resolution 2023.498](#)
  6. [Board Resolution 2023.499](#)

The next meeting is currently scheduled for March 17, 2025 at 9am.

Adjourn

General Information

This meeting provides reasonable accommodations for persons with disabilities planning to attend a the meetings. Contact the staff person listed below at least 72 hours before the meeting. Any disclosable public records related to an open session item on a regular meeting agenda and distributed by the County to a majority of members of the Committee less than 96 hours prior to that meeting are available for public inspection at 1025 Escobar St., 4th Floor, Martinez, during normal business hours. Staff reports related to items on the agenda are also accessible on line at [www.co.contra-costa.ca.us](http://www.co.contra-costa.ca.us).

HOW TO PROVIDE PUBLIC COMMENT:

Persons who wish to address the Committee during public comment on matters within the jurisdiction of the Committee that are not on the agenda, or who wish to comment with respect to an item on the agenda, may comment in person, via Zoom, or via call-in. Those participating in person should offer comments when invited by the Committee Chair. Those participating via Zoom should indicate they wish to speak by using the “raise your hand” feature in the Zoom app. Those calling in should indicate they wish to speak by pushing \*9 on their phones.

Public comments generally will be limited to two (2) minutes per speaker. In the interest of facilitating the business of the Board Committee, the total amount of time that a member of the public may use in addressing the Board Committee on all agenda items is 10 minutes. Your patience is appreciated.

Public comments may also be submitted to Committee staff before the meeting by email or by voicemail. Comments submitted by email or voicemail will be included in the record of the meeting but will not be read or played aloud during the meeting.

For Additional Information Contact: Christina Castle-Barber, 925-608-8819



# CONTRA COSTA COUNTY

1025 ESCOBAR STREET  
MARTINEZ, CA 94553

## Staff Report

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**File #:** 25-300

**Agenda Date:** 1/27/2025

**Agenda #:** 5

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### HEAD START COMMITTEE

Meeting Date: January 27, 2025

Subject: APPROVAL of Minutes

Submitted For: Marla Stuart

Department: Employment and Human Services Department

Referral No:

Referral Name:

Presenter: Scott Thompson

Contact: Christina Castle-Barber

### **Recommendation(s)/Next Step(s):**

APPROVE the Board of Supervisors Head Start Committee Minutes of November 4, 2024.



# CONTRA COSTA COUNTY

## Committee Meeting Minutes

### Head Start Committee

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Monday, November 4, 2024

11:00 AM 11780 San Pablo Ave., Suite D, El Cerrito | 2255  
Contra Costa Blvd., Suite 202, Pleasant Hill | Zoom:  
<https://us06web.zoom.us/j/89752281411?pwd=oO7YjWVnMFh5bLpT9wErJInLO5zNcw.L-kq6aPviALVQ-zi> | Call: 1 669 444 9171 | Meeting ID: 897 5228  
1411

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1. **The public may attend this meeting in person at either above location. The public may also attend this meeting remotely via Zoom or call-in.**
2. Agenda Items: Items may be taken out of order based on the business of the day and preference of the Committee.
3. Call to Order
4. Public comment on any item under the jurisdiction of the Committee and not on this agenda (speakers may be limited to two (2) minutes).
5. APPROVE the Board of Supervisors Head Start Committee Minutes of November 27, 2023, January 29, 2024, February 20, 2024, March 4, 2024, and September 16, 2024.

**A motion was made by Carlson, seconded by Gioia, that this item be approved. The motion carried by the following vote:**

**Motion: Carlson**

**Second: Gioia**

6. DISCUSS and ACCEPT the Head Start Program Update.

**The Head Start Program Update was accepted.**

The next meeting is currently scheduled for January 27, 2025 at 9 am.

Adjourn

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DRAFT

For Additional Information Contact: Christina Castle-Barber, 925-608-8819.



# CONTRA COSTA COUNTY

1025 ESCOBAR STREET  
MARTINEZ, CA 94553

## Staff Report

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**File #:** 25-301

**Agenda Date:** 1/27/2025

**Agenda #:** 6

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### HEAD START COMMITTEE

Meeting Date: January 27, 2025

Subject: Head Start Committee Update

Submitted For: Marla Stuart

Department: Employment and Human Services Department

Referral No:

Referral Name:

Presenter: Scott Thompson

Contact: Christina Castle-Barber

### **Recommendation(s)/Next Step(s):**

DISCUSS and ACCEPT the Head Start Committee Update.

# Head Start Committee Update



January 27, 2025

CORRECTED: JANURARY 27, 2025

Marla Stuart, MSW, PhD, EHS Director and Head Start Executive Director

Scott Thompson, Community Services Bureau Interim Director, Head Start Director

[info@ehsd.cccounty.us](mailto:info@ehsd.cccounty.us) | (925) 608-4800

CONTRA COSTA COUNTY

EMPLOYMENT & HUMAN SERVICES

# Outline

1. Contra Costa County Head Start Program
2. Contra Costa County Head Start Program Governance
3. Head Start Oversight Committee Future Meetings

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- **Contra Costa County Head Start Program**
- Contra Costa County Head Start Program Governance
- Head Start Oversight Committee Future Meetings

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# Approved Budget by Category

Category	Amount
Program Operation (salaries, benefits, equipment, supplies, travel)	\$17,503,517
COLA	\$466,354
Training and Technical Assistance	\$266,151
Start-up Activities*	\$2,120,372
<b>Total Federal Funding September 1, 2024 – June 30, 2024</b>	<b>\$20,356,394</b>
Non-Federal Share	\$5,089,099

- \* George Miller Foundation
- \* Verde Playground
- \* Crescent Park Kitchen
- \* Modernized video cameras in all centers



1. Notice of Award 09CH012839-01

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# Slots Per Grant Recipient

Recipient	Early Head Start (ages 0-2)	HS Preschool (ages 3-5)	Total (ages 0-5)
Contra Costa County	437	764	1,201
Mexican American Opportunity Foundation (MAOF)	116	97	213
The Unity Council	132	88	220
<b>Total</b>	<b>685</b> 42%	<b>949</b> 58%	<b>1,634</b>

*(1,772 slots in PY 2023)*

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# Slots Per District

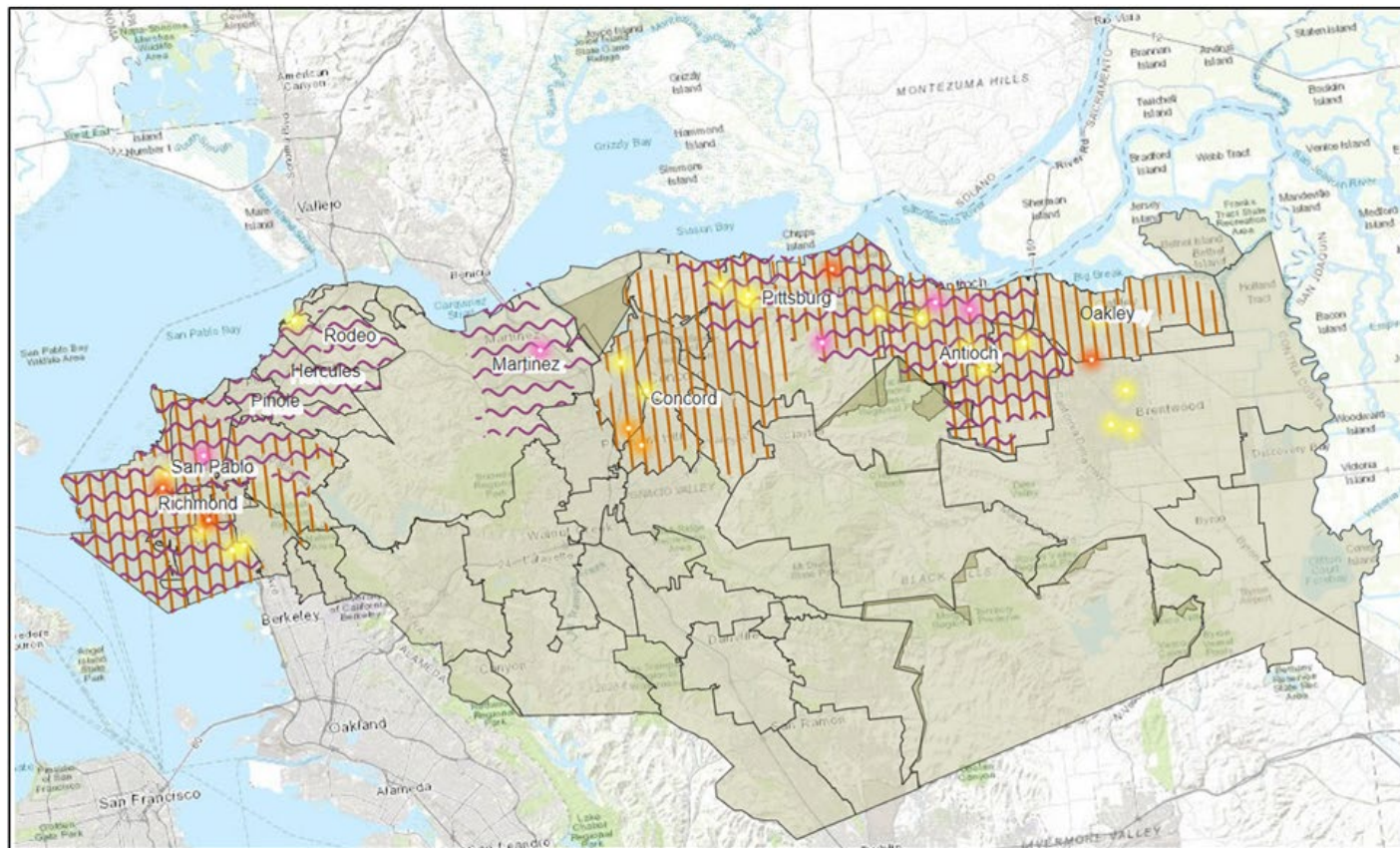
A	B	C	D	E	F	G	H	I
	# 0-5 <130% FPL	% 0-5 <130% FPL	CCC Slots	MAOF Slots	Unity Council Slots	Est. Existing Slots*	Total Slots	% of Total Slots by District
1 Gioia	4,737	27%	421	54	136	97	708	41%
2 Andersen	891	5%	0	0	0	0	0	0%
3 Burgis	3,956	22%	240	78	68	0	386	22%
4 Carlson	2,480	14%	20	0	0	186	206	12%
5 Glover	5,758	32%	371	37	16	17	441	25%
<b>District Totals</b>	<b>17,822</b>	<b>100%</b>	<b>1,052</b>	<b>169</b>	<b>220</b>	<b>300</b>	<b>1,741</b>	<b>100%</b>
Non-district specific^			149	44	0	0	193	
<b>Total Slots</b>			<b>1,201</b>	<b>213</b>	<b>220</b>	<b>300</b>	<b>1,934</b>	

\* Estimated existing slots held by Unity Council and YMCA

^ Non-district specific slots: CCC = Home Visiting; MAOF = Home Child Care; UC = none

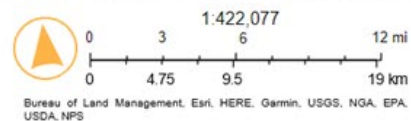
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# County-Wide Service Map



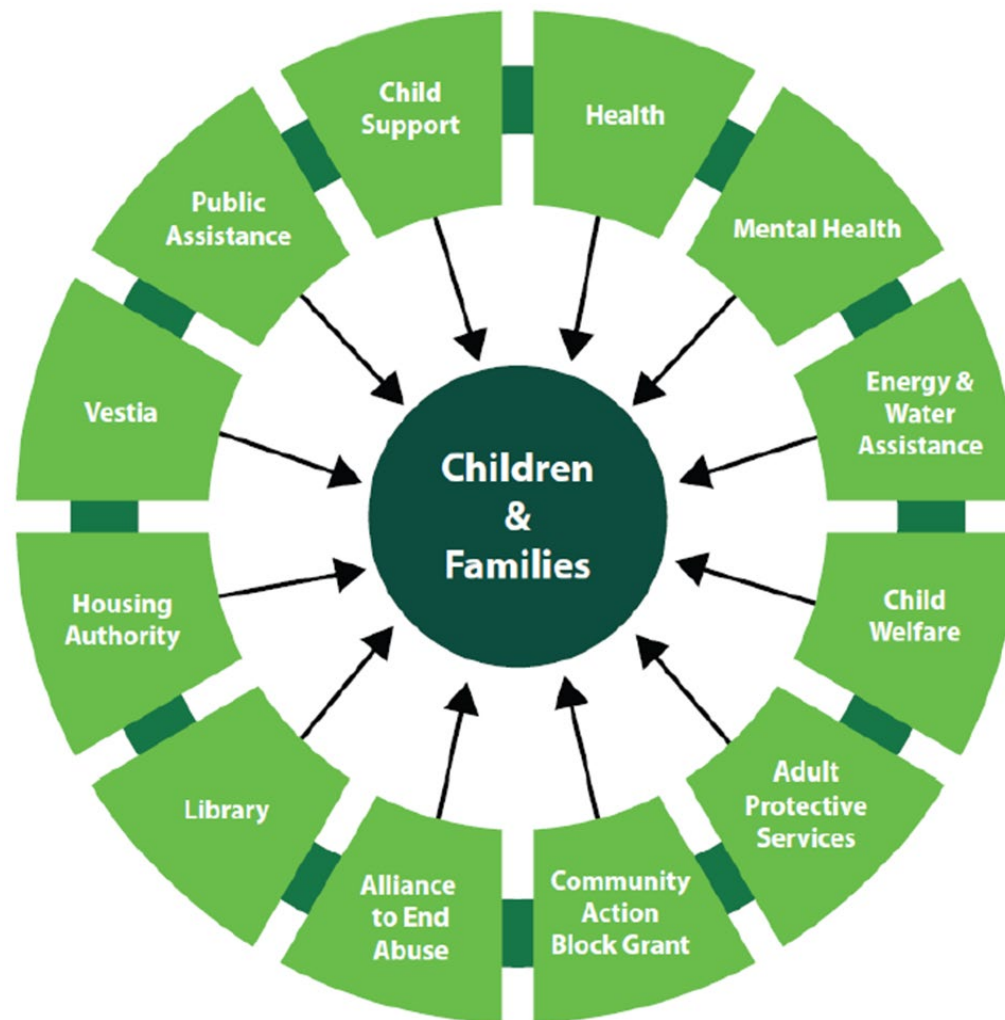
8/23/2024

- MAOF Centers
- New Unity Centers
- ~ MAOF Service Area
- Existing Unity Centers
- Contra Costa Centers
- Unity Service Area
- Contra Costa Service Area



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# CCC Portfolio of Services



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# Early Childhood Education Convenings

1. First 5 Contra Costa
2. Contra Costa County Interagency Collaboration
3. Ensuring Opportunity Campaign to End Poverty
4. Early Learning Group
5. Comprehensive Prevention Planning Team
6. Reading Advantage
7. Healthy and Active Before Five
8. Local Planning Council for Early Care and Education
9. Los Medanos College ECE Advisory Committee
10. The Family Economic Security Partnership
11. Diablo Valley College Advisory Board
12. Tandem, Partners in Early Learning
13. Oral Health Collaborative for Contra Costa County
14. Contra Costa/Anthem Quarterly Community Advisory Committee
15. Building Healthy Communities



# OHS and CCC Priorities

OHS Priorities <sup>1</sup>	Related County Governing Body Priorities
I. <b>Child Health and Safety:</b> Reduce or eliminate children's risk of exposure to harm and hazards.	<ul style="list-style-type: none"> <li>Continue to implement daily, weekly, monthly, and quarterly monitoring to identify and remove environmental harm and hazards.</li> </ul>
II. <b>Partnerships with State Systems:</b> Expand Head Start programs' capacity to coordinate services with state systems and national programs.	<ul style="list-style-type: none"> <li>Use state funding to extend hours to support commuting parents working varied shifts.</li> <li>Maximize receipt of state funding by matching more than the required 20%</li> </ul>
III. <b>Reaching Children and Families:</b> Ensuring that Head Start resources are targeted to children, families, and communities of greatest need.	<ul style="list-style-type: none"> <li>Distribute slots equitably throughout the county based on economic need.</li> <li>Increase the number of slots to serve closer to 100% of eligible children and families.</li> <li>Shift slots from Head Start to Early Head Start given that California public schools now offer free Transitional Kindergarten for children age 4</li> </ul>
IV. <b>Investing in the Workforce:</b> Supporting a highly-skilled workforce with competitive pay, benefits, and access to supports for staff wellness.	<ul style="list-style-type: none"> <li>Attempt to achieve parity with local school district pre-school teacher salaries by increasing salaries for county employees and increasing rates for partners.</li> </ul>
IV. <b>Quality Environments:</b> Strengthening the key components of infrastructure that assist Head Start programs with operating most effectively.	<ul style="list-style-type: none"> <li>Expand mental health for children and families.</li> </ul>

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[1] Head Start Work Is Heart Work: OHS Priorities | ECLKC (hhs.gov)



# Head Start Program Monitoring Activities

1. Daily Health & Safety Classroom Checklist\*
2. Daily Playground Safety Checklist\*
3. Weekly Facility Safety Checklist\*
4. Monthly Playground Safety Checklist\*
5. Semi-Annual Child Transition & Safety Monitoring\*
6. Semi-Annual On-Site Content Area Compliance Checklist
7. Annual Education File Review & Family Services File Reviews
8. Quarterly Center Health & Safety Checklist
9. Tri-annual CACFP
10. Annual CLASS
11. Annual Environmental Rating Scale (ERS)
12. Annual Curriculum Fidelity
13. Annual Center Monitoring
14. Annual Ages & Stages Questionnaires
15. Tri-annual Desired Results Developmental Profile (DRDP)
16. Annual Parent Satisfaction Surveys & Parent Interest Surveys
17. Ongoing MOU Reviews
18. Ongoing Social Media Interactions
19. Monthly Site Meetings
20. Bi-monthly Post Workshop Knowledge Checks

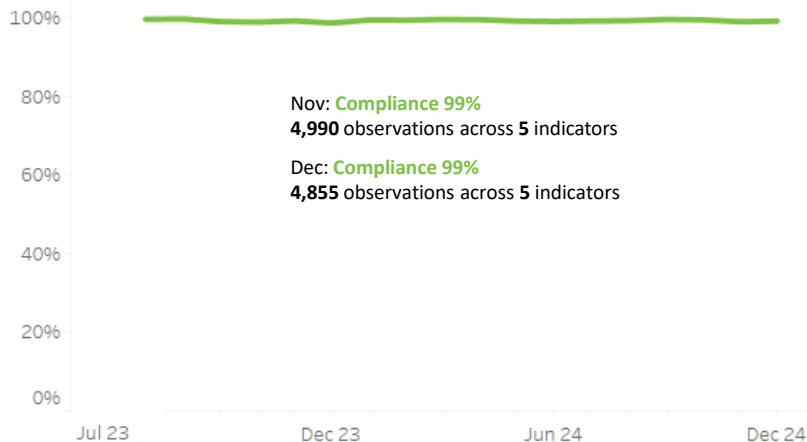
3. Contra Costa County Head Start Application, pages 92-94

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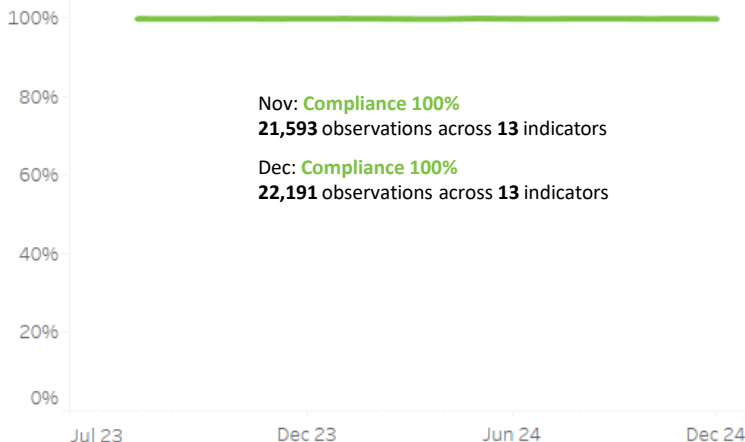
\* Items included in monthly BOS presentations

# Health and Safety Compliance

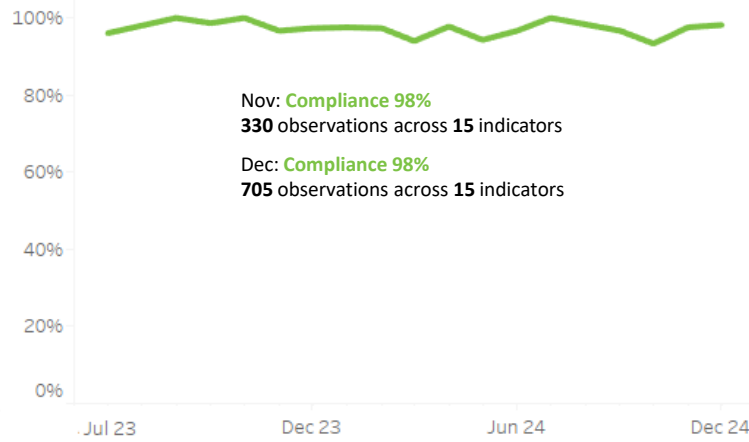
### Daily Playground Safety



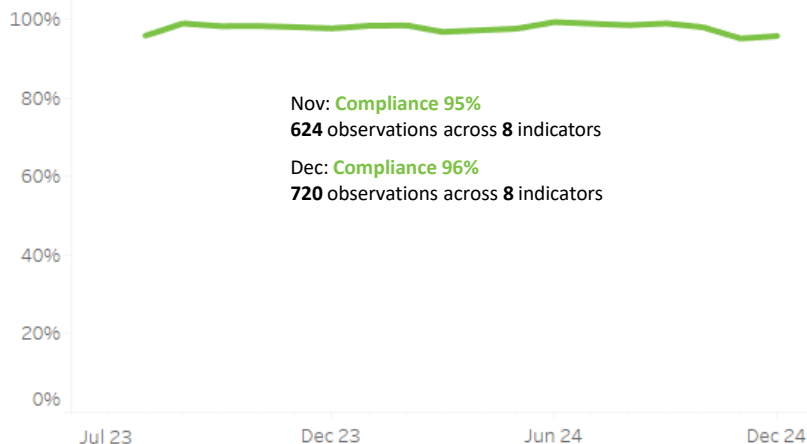
### Daily Classroom Health & Safety



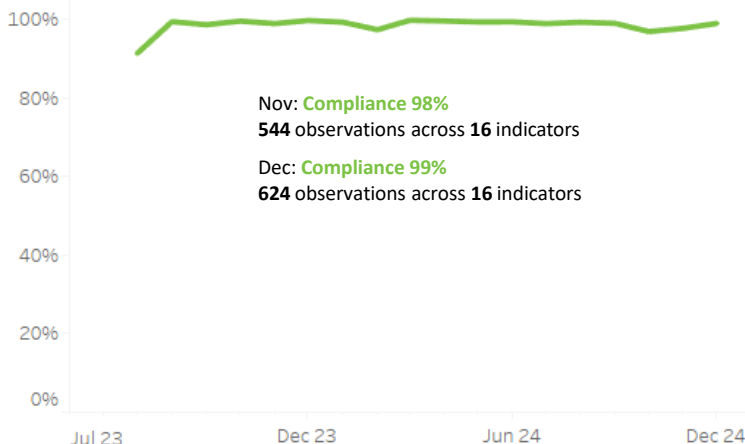
### Child Transition & Safety



### Weekly Facility Safety



### Monthly Playground Safety



Indicators with non-compliances over 10% in November 2024:

- Alarms and locks in hallways, front doors, and gates are in working order.  
(12/78 = 15% non-compliance)
- A review of self-monitoring data accurately reflect management monitoring.  
(3/22 = 14% non-compliance)

No indicators had over 10% non-compliance in December 2024.

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- Contra Costa County Head Start Program
- **Contra Costa County Head Start Program Governance**
- Head Start Oversight Committee Future Meetings

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# Board Resolution No. 2023/274

**Adopted:** July 13, 2023

**Subject:** Resolution of the Board of Supervisors Establishing the Formal Governance Structure for the Contra Costa County Head Start Program

**Information:** Establishes the formal structure of program governance for the Contra Costa County Head Start program, including the oversight of quality services for children and families and procedures for making decisions related to program design and implementation. Outlines the roles for the Board of Supervisors (Governing Body), Head Start Oversight Committee, EHSD Director (Head Start Executive Director), and Policy Council.



# Head Start Policy Council

## **Structure:**

- Elected by parents of children currently enrolled in the Program, composed by parents and members at large of the community served
- Responsible for the direction of the Program

## **Submits to the Board decisions about:**

- Activities to support active involvement of parents
- Program recruitment, selection and enrollment priorities
- Applications for funding and amendments
- Budget planning for program expenditures
- Policy Council bylaws
- Program personnel policies
- Procedures for how Policy Council members are elected
- Recommendations on selection of delegate agencies

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# Board Resolution No. 2023/498

**Adopted:** July 13, 2023

**Subject:** Resolution of the Board of Supervisors Establishing the Formal Process for Resolving Complaints Involving the Contra Costa Head Start Program

**Information:** Establishes the formal process for documenting and resolving complaints involving the Head Start program and complaints involving the Director or Executive Director of the Head Start program.



# Board Resolution No. 2023/499

**Adopted:** July 13, 2023

**Subject:** Resolution of the Board of Supervisors Establishing the Internal Controls that Apply to Contra Costa County Head Start Program Funds, Assets, and Equipment

**Information:** Identifies the County's fiscal accountability rules, policies, and procedures under which the program operates. Establishes the fiscal monitoring roles and responsibilities for the Governing Board (Board of Supervisors), the Head Start Oversight Committee, and staff.



# Role of Head Start Oversight Committee

## Structure:

- 2 Board members appointed annually by the Board who meet every other month
- Make recommendations to the Board on key responsibilities related to program governance and improvement of the Head Start Program

## Fiscal Monitoring:

- Detailed program financial statements of expenditures at object level (i.e., Salaries and Benefits, Services and Supplies, Other Charges, Fixed Assets, and Expenditure Transfers) and revenue by major federal and state grant type
- Details of self-monitoring activities by staff, including schedules for planned monitoring activities, updates of ongoing monitoring activities, final results of monitoring activities and status of internal monitoring of corrective action plans
- Details of staff fiscal trainings, including copies of training agendas, materials, and employee attendance as well as listing of how many employees have not received training and plan for when those employees are to receive training

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- Contra Costa County Head Start Program
- Contra Costa County Head Start Program Governance
- **Head Start Oversight Committee Future Meetings**

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# Future Committee Meetings

All meetings are Mondays at 9am:

- March 17, 2025
- May 19, 2025
- July 21, 2025
- September 15, 2025
- November 17, 2025

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**Recipient Information**

**1. Recipient Name**

CONTRA COSTA COUNTY  
40 Douglas Dr  
Martinez, CA 94553-4068

**2. Congressional District of Recipient**

10

**3. Payment System Identifier (ID)**

1946000509A1

**4. Employer Identification Number (EIN)**

946000509

**5. Data Universal Numbering System (DUNS)**

**6. Recipient's Unique Entity Identifier (UEI)**

FMHYKJ9D69L5

**7. Project Director or Principal Investigator**

Ms. Marla Stuart  
mstuart@ehsd.cccounty.us  
(925) 608-8812

**8. Authorized Official**

Mr. Federal Glover  
district5@bos.cccounty.us  
000-000-0000

**Federal Agency Information**

ACF/OHS Region IX Grants Office

**9. Awarding Agency Contact Information**

Mr. Jeffrey Arciero  
Grants Management Officer  
jeffrey.arciero@acf.hhs.gov  
617-565-2446

**10. Program Official Contact Information**

Ms. Cynthia T Yao  
Head Start Program  
Cynthia.Yao@acf.hhs.gov  
415-437-8451

**Federal Award Information**

**11. Award Number**

09CH012839-01-00

**12. Unique Federal Award Identification Number (FAIN)**

09CH012839

**13. Statutory Authority**

42 USC 9801 ET SEQ

**14. Federal Award Project Title**

Head Start and Early Head Start

**15. Assistance Listing Number**

93.600

**16. Assistance Listing Program Title**

Head Start

**17. Award Action Type**

New

**18. Is the Award R&D?**

No

**Summary Federal Award Financial Information**

<b>19. Budget Period Start Date</b>	09/01/2024	<b>- End Date</b>	06/30/2025
<b>20. Total Amount of Federal Funds Obligated by this Action</b>	\$20,356,394.00		
20a. Direct Cost Amount	\$19,355,510.00		
20b. Indirect Cost Amount	\$1,000,884.00		
<b>21. Authorized Carryover</b>	\$0.00		
<b>22. Offset</b>	\$0.00		
<b>23. Total Amount of Federal Funds Obligated this budget period</b>	\$0.00		
<b>24. Total Approved Cost Sharing or Matching, where applicable</b>	\$5,089,099.00		
<b>25. Total Federal and Non-Federal Approved this Budget Period</b>	\$25,445,493.00		
<b>26. Period of Performance Start Date</b>	09/01/2024	<b>- End Date</b>	06/30/2029
<b>27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance</b>	\$25,445,493.00		

**28. Authorized Treatment of Program Income**

ADDITIONAL COSTS

**29. Grants Management Officer - Signature**

Mr. Jeffrey Arciero  
Grants Management Officer

**30. Remarks**



Recipient Information
<b>Recipient Name</b> CONTRA COSTA COUNTY 40 Douglas Dr Martinez, CA 94553-4068
<b>Congressional District of Recipient</b> 10
<b>Payment Account Number and Type</b> 1946000509A1
<b>Employer Identification Number (EIN) Data</b> 946000509
<b>Universal Numbering System (DUNS)</b>
<b>Recipient's Unique Entity Identifier (UEI)</b> FMHYKJ9D69L5
<b>31. Assistance Type</b> Discretionary Grant
<b>32. Type of Award</b> Service

33. Approved Budget (Excludes Direct Assistance)	
I. Financial Assistance from the Federal Awarding Agency Only	
II. Total project costs including grant funds and all other financial participation	
a. Salaries and Wages	\$5,212,939.00
b. Fringe Benefits	\$3,767,134.00
c. Total Personnel Costs	\$8,980,073.00
d. Equipment	\$710,000.00
e. Supplies	\$342,548.00
f. Travel	\$34,510.00
g. Construction	\$1,308,372.00
h. Other	\$3,522,650.00
i. Contractual	\$4,457,357.00
<b>j. TOTAL DIRECT COSTS</b>	<b>\$19,355,510.00</b>
<b>k. INDIRECT COSTS</b>	<b>\$1,000,884.00</b>
<b>l. TOTAL APPROVED BUDGET</b>	<b>\$20,356,394.00</b>
<b>m. Federal Share</b>	<b>\$20,356,394.00</b>
<b>n. Non-Federal Share</b>	<b>\$5,089,099.00</b>

34. Accounting Classification Codes						
FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	CFDA NO.	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
4-G094122	09CH01283901	ACFOHS	41.51	93.600	\$17,969,871.00	75-24-1536
4-G094120	09CH01283901	ACFOHS	41.51	93.600	\$147,714.00	75-24-1536
4-G094121	09CH01283901	ACFOHS	41.51	93.600	\$118,437.00	75-24-1536
4-G994154	09CH01283901	ACFOHS	41.51	93.600	\$2,120,372.00	75-24-1536



### 35. Terms And Conditions

#### STANDARD TERMS

1. Federal awards are subject to legally binding requirements called terms and conditions (T&Cs). Recipients must review and comply with all T&Cs identified under the award. When a recipient is awarded and accepts an ACF award, it must comply with the requirements outlined in the Notice of Award and T&Cs. The recipient must actively manage its award and adhere to all applicable requirements. For more information about grants management activities and resources for recipients throughout the award lifecycle, see the Managing Your ACF Grant Award at <https://www.acf.hhs.gov/grants/manage-grant>.

#### **Applicable Legislation, Statute, and Regulations**

1. The administration of this program is authorized under the Head Start Act, as amended by the Improving Head Start for School Readiness Act of 2007, Public Law 110-134 at <https://www.congress.gov/bill/110th-congress/house-bill/1429>.
2. The program is codified at 42 U.S.C. 9831 et seq at <http://uscode.house.gov/view.xhtml?path=/prelim@title42/chapter105/subchapter2&edition=prelim>.
3. Implementing program regulations are published as the Head Start Program Performance Standards at 45 CFR Parts 1301 to 1305, <https://www.ecfr.gov/current/title-45/subtitle-B/chapter-XIII/subchapter-B>. Additional program guidance is located on the Early Childhood Learning & Knowledge Center (ECLKC), <https://eclkc.ohs.acf.hhs.gov/>. Recipients must act in compliance with the Program Instructions and Information Memoranda. For full text, go to <https://eclkc.ohs.acf.hhs.gov/policy/pi> and <https://eclkc.ohs.acf.hhs.gov/policy/im>.
4. This award is subject to the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards found at 45 CFR Part 75 at <https://www.ecfr.gov/current/title-45/subtitle-A/subchapter-A/part-75>. This award is subject to the Closeout requirements for Grants and Agreements found at 2 CFR 200.344 at <https://www.ecfr.gov/current/title-2/subtitle-A/chapter-II/part-200/subpart-D/subject-group-ECFR682eb6fbabcde2/section-200.344>.
5. This award is subject to Executive Orders in the Federal Register available at <https://www.federalregister.gov/presidential-documents/executive-orders>.
6. This award is subject to requirements or limitations in any applicable Appropriations Act available at <https://crsreports.congress.gov/>.
7. This award is subject to the Administrative and National Policy Requirements at <https://www.acf.hhs.gov/grants/administrative-and-national-policy-requirements>.
8. This award is subject to the requirements of the HHS Grants Policy Statement (HHS GPS) that are applicable based on your recipient type and the purpose of this award. This includes requirements in Parts I and II available at <https://www.hhs.gov/grants-contracts/grants/grants-policies-regulations/index.html>. Although consistent with the HHS GPS, any applicable statutory or regulatory requirements, including 45 CFR Part 75, directly apply to this award apart from any coverage in the HHS GPS.



## Department of Health and Human Services

### Administration for Children and Families

## Notice of Award

Award# 09CH012839-01-00

FAIN# 09CH012839

Federal Award Date: 08/16/2024

### **Property**

9. This award is subject to the Property Related T&Cs found at <https://www.acf.hhs.gov/grants/manage-grant/grant-award/property-terms>. Under 45 CFR §75.323, all real property, equipment, and intangible property acquired or improved with ACF funds must be held in trust by the non-federal entity as trustee for the beneficiaries of the project or program under which the property was acquired or improved.

### **Award Payment**

10. This award will be paid through the Department of Health and Human Services, Payment Management Services, operating under the Program Support Center (PSC). The PSC provides automated award payment and cash management services from awards issued by Federal Government Awarding Agencies through the centralized payment system, Payment Management System (PMS). For more detailed information on payment through PMS, go to <https://pms.psc.gov/>. Drawing funds from PMS indicates acceptance and agreement to the T&Cs of the award.

### **Unique Entity Identifier (UEI) Notice**

11. All applicants and recipients must have an active System for Award Management (SAM) registration and UEI issued. ACF recommends that organizations start the renewal process at least 30 days prior to expiration to avoid delays in federal funding. Entities can search for help at Federal Service Desk (FSD) any time or request help from an FSD agent Monday–Friday 8 a.m. to 8 p.m. ET. This award is subject to requirements as set forth in 2 CFR 25.110.

# AWARD ATTACHMENTS

CONTRA COSTA COUNTY

09CH012839-01-00

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1. Remarks

### 30. REMARKS (Continued from previous page)

Under Section 638 of the Head Start Act, this action awards the Contra Costa County Community Services Bureau a project period of 9/1/2024 - 6/30/2029 for the operation of a Head Start and Early Head Start program in the designated service area(s). This action awards prorated funds for the initial budget period of 9/1/2024 - 6/30/2025, including \$8,891,429 for Head Start operations; \$9,078,442 for Early Head Start operations; \$147,714 for Head Start training and technical assistance; and \$118,437 for Early Head Start training and technical assistance. These amounts are inclusive of the funds awarded for the cost-of-living adjustment (COLA) increase for program operations authorized under the Further Consolidated Appropriations Act, 2024 (P.L. 118-47).

The projected annual levels based on the application submitted for this period are \$10,186,706 for Head Start operations; \$10,124,485 for Early Head Start operations; \$147,714 for Head Start training and technical assistance; and \$118,437 for Early Head Start training and technical assistance.

Head Start population: 764 children.

Designated Head Start service area(s): Contra Costa County, CA.

Approved program option(s) for the Head Start program: Center-based.

Early Head Start population: 437 infants, toddlers and pregnant women, including 210 Early Head Start-Child Care Partnership slots.

Designated Early Head Start service area(s): Contra Costa County, CA.

Designated Early Head Start Child Care Partnership Service Area: Contra Costa County, CA.

Approved program option(s) for the Early Head Start program: Center-based; Home-based; Pregnant women.

This action awards supplemental funds for startup activities in the amount of \$2,120,372 for the following purposes:

Equipment (\$710,000): Purchase and installation of security systems;

Construction (\$1,308,372): Major renovation at George Miller Concord; and

Other (\$102,000): Minor renovation activities.

The following Special Condition applies to this award: Funds awarded under the Construction budget category may not be expended until an application addressing the requirements in 45 CFR Part 1303 Subpart E – Facilities is submitted and approved by the Office of Head Start for each facility project.



If applicable, compliance with the Davis Bacon Act on all contracts for construction, renovation, and repairs over \$2,000 for facilities is required. Also, funds can only be used to purchase equipment or contractual services from vendors meeting the requirements of 45 C.F.R. § 75.327(h).

Unexpended funds resulting from cost savings for approved items may be reallocated for other program costs subject to the regulations governing post award budget modifications contained in 45 C.F.R. § 75.308.

Your request for Locally-Designed Options for both Head Start and Early Head Start services is pending approval.

As per Program Instruction ACF-PI-HS-24-01, each recipient is required to submit one semi-annual SF-425 report and one annual SF-425 report. For this grant, SF-425 reports must be received by:

- Semi-Annual Report in PMS: 1/30/2025
- Annual Report in PMS: 9/30/2025

Additionally, the grantee must submit their SF-429 Real Property Status report via the Online Data Collection System, accessible through GrantSolutions. Your SF-429 report is due by the Annual SF-425 due date given above. Please refer to Program Instruction ACF-PI-HS-17-03 for further details.

If applicable, all equipment, real property, and supplies acquired under grant 09CH010862 must be transferred to this new grant. Your inventory listing must be updated to reflect the transfer to the new grant number.

This grant is subject to the requirements included in Attachments 1, 2 and 3.

## Attachment 1

This grant is subject to Section 640(b) of the Head Start Act and 45 C.F.R. § 1303.4 requiring a non-federal match of 20 percent of the total cost of the program. This grant is also subject to the requirements in Section 644(b) of the Head Start Act and 45 C.F.R. §1303.5 limiting development and administrative costs to a maximum of 15 percent of the total costs of the program, including the non-federal match contribution of such costs. The requirements for a non-federal match of 20 percent and the limitation of 15 percent for development and administrative costs apply to the budget period unless a waiver is approved. Any request for a waiver of the non-federal match, or a portion thereof, that meets the conditions under Section 640(b)(1)-(5) of the Head Start Act and 45 C.F.R. § 1303.4 or a waiver of the limitation on development and administrative costs that meets the conditions under 45 C.F.R. § 1303.5 must be submitted in advance of the end of the budget period. Any waiver request submitted after the expiration of the project period will not be considered.

The HHS Uniform Administrative Requirements (see 45 C.F.R. § 75.308(c)(1)(ii)) provide the authority to ACF to approve key staff of Head Start grant recipients. For the purposes of this grant, key staff is defined as the Head Start Director or person carrying out the duties of the Head Start Director if not under that title and the Chief Executive Officer, Executive Director and/or Chief Fiscal Officer if any of those positions is funded, either directly or through indirect cost recovery, more than 50 percent with Head Start funds.

Section 653 of the Head Start Act prohibits the use of any federal funds, including Head Start grant funds, to pay any portion of the compensation of an individual employed by a Head Start agency if that individual's compensation exceeds the rate payable for Level II of the Executive Schedule. Prior written approval must be obtained for the purchase of equipment and other capital expenditures as described in 45 C.F.R. § 75.439(a).

Prior written approval must also be obtained under 45 C.F.R. § 75.439(b)(3) and 45 C.F.R. Part 1303 Subpart E – Facilities to use Head Start grant funds for the initial or ongoing purchase, construction and major renovation of facilities. No Head Start grant funds may be used toward the payment of one-time expenses, principal and interest for the acquisition, construction or major renovation of a facility without prior written approval of the Administration for Children and Families.

Per Program Instructions ACF-PI-HS-17-03 and ACF-PI-HS-17-04, this award is subject to annual submission of the applicable SF-429A report (real property status), and submission of SF-428 report (tangible property) at the conclusion of the project.

## Attachment 2

### Terms and Conditions for Awards involving Property, if applicable

1. Under grant program regulations at 45 C.F.R. § 75.323, a property trust relationship exists for the benefit of the awarding program in all property the non-federal entity acquires or improves with the Administration for Children and Families (ACF) funds, including real property, equipment and supplies. The non-federal entity holds the property in trust for the beneficiaries of the project or program under which the property was acquired or improved. ACF requires the non-federal entity to record liens or other appropriate notices such as Notices of federal Interest to indicate that real property has been acquired or improved with federal award funds and that use and disposition conditions apply to the property. The federal interest in the property cannot be defeated by a recipient's failure to file an appropriate notice of federal interest. A recipient may not encumber or permit a third party to encumber any property where federal funds were used for purchase, construction or major renovation without ACF's written consent. Financing and refinancing a property with or without subordination of the federal interest are encumbrance actions and subject to formal ACF approval, including the submission of the SF-429 Attachment B Acquire or Improve Request form (along with the supporting documentation) and the SF-429 Attachment C Encumbrance Request form (along with supporting documentation) in GrantSolutions On-Line Data Collection (OLDC) system. For guidance and reporting information, see Real Property Guidance.

2. The federal interest in real property purchased, constructed or renovated with federal funds does not expire and remains in place until formal disposition. When real property is no longer needed either because the non-federal entity is leaving the program or for another reason, the non-federal entity must obtain disposition instructions from ACF in accordance with C.F.R. §75.318(c) (1)-(3) and ACF Policy, including the submission of the SF-429 Attachment C Disposition Request form (along with supporting documentation) in the GrantSolutions On-Line Data Collection (OLDC) system. For additional guidance and reporting information, see Real Property Guidance. While the awardee may indicate a disposition preference in the request for disposition instructions, ACF has the discretion to direct a different disposition option. The non-federal entity must request disposition instructions within 60 days of project expiration or notice of termination. If the non-federal entity fails to request disposition instructions, ACF will direct disposition. A recipient's failure to comply with ACF's disposition instructions will constitute a material violation of the terms and conditions of this grant award. Recipients are responsible for maintaining accurate and up-to-date records of any non-federal contributions, including payments of principal and interest on loans, made towards the purchase, construction, or renovation of real property, and itemized records of the funding source of such contributions. Recipients must produce those records when requesting disposition. In accordance with 45 C.F.R. §75.320(e) and ACF policy, the recipient must request disposition instructions utilizing the SF-428 cover page, Attachment C, and S form along with supporting documentation from ACF Office of

Grants Management for equipment purchased with federal funds and which is no longer needed either because the recipient is leaving the program or for another reason. For more guidance and reporting information, see Tangible Personal Property Guidance.

3. If there is a residual inventory of unused supplies exceeding \$5,000 in total aggregate value upon termination of support or completion of the project or program, the nonfederal entity must retain the supplies or use on other activities or sell them, but must, in either case, compensate the Federal government for its share. The amount of compensation must be computed in the same manner as equipment. See 45 C.F.R. §75.320(e)(2) for the calculation methodology. For more guidance and reporting information, see Tangible Personal Property Guidance.

4. The inventory of equipment, supplies, and real property acquired with Head Start funds under any preceding award must be transferred and recorded under the grant agreement number identified in field 12 of this Notice of Award.

5. Pursuant to 45 C.F.R. §75.317, a grant recipient must, at a minimum, provide the equivalent insurance coverage for real property and/or equipment acquired or improved with Federal funds, as provided to other property it owns. If a grant recipient uses federal funds to purchase or continue purchase (e.g. mortgage payments) on real property, including modular facility unit(s), it must maintain physical damage or destruction insurance at the full replacement value of the facility so long as it owns or occupies the facility. At a minimum, a grant recipient must obtain an insurance policy insuring against risk from physical destruction immediately upon acquiring real property or equipment, or upon completion of construction or modernization of a facility when federal funds were expended. The physical destruction insurance policy must insure the full-appraised value of the real property from risk of partial and total physical destruction, including flood insurance, or other special hazard riders, where appropriate. The policy must also include a requirement for the insurer to notify the Administration for Children and Families' Office of Grants Management of any changes in the policy or coverage, for example, loss payee endorsement.

### Attachment 3

**Head Start grant recipients must comply with the terms and conditions for the project period award in the specified timeframes.**

#### *Health and Safety*

- Conduct a screening of the health and safety environment of each center and/or family childcare home where services are provided according to the following schedule, as applicable:
  - within 45 days of the start of the program or school year;
  - within 45 days of children receiving services in a new center and/or family childcare home; and/or within 45 days of the start of the project period when the project period begins during the program or school year. See: <https://eclkc.ohs.acf.hhs.gov/publication/health-safety-screener>
- Complete a certification of compliance with all Office of Head Start (OHS) health and safety requirements within 75 days of the start of the program or school year, or within 75 days of the start of the project period when the project period begins during the program or school year.
- Submit the certification via the Head Start Enterprise System (HSES) under the DRS tab, NoA Conditions in the folder titled "Certification of Compliance with Health & Safety Requirements" and notify your Program and Grants Management Specialists of its availability in the Correspondence tab immediately thereafter.

#### *Governance*

- Conduct a screening of the organization's governance and leadership capacity within 60 calendar days of the start of the project period. See: <https://eclkc.ohs.acf.hhs.gov/organizational-leadership/article/governance-leadership-oversight-capacity-screener>
- Complete a certification that the governance and leadership capacity screening was conducted and a training plan was developed within 75 days of the start of the project period. See: <https://eclkc.ohs.acf.hhs.gov/organizational-leadership/article/governance-leadership-oversight-capacity-screener-certification>
- Submit the certification via in the Head Start Enterprise System (HSES) under the Financials tab, NoA Conditions in the folder titled "Certification of Governance and Leadership Capacity Screening" and notify your Program and Grants Management Specialists of its availability in the Correspondence tab immediately thereafter. See: <https://eclkc.ohs.acf.hhs.gov/designation-renewal-system>

### Early Childhood Education Convenings

County management regularly participates and plays leadership roles in a variety of community organizations and groups to coordinate with public and private entities and promote provision of child health, developmental, and program management services. Below are descriptions of these entities.

1. First 5 Contra Costa - Aims to change systems of services and supports for children ages 0-5 and their families. In addition to funding five Family Resource Centers, First 5 coordinates collective action through advocacy and community engagement, research, capacity building, and connecting families and child care providers to resources.
2. Contra Costa County Interagency Collaborative - A meeting of community-based organizations to share resources and service opportunities with one another to better the service delivery options to families in Contra Costa County.
3. Ensuring Opportunity Campaign to End Poverty - The goal is to end economic disparity by addressing the root causes of poverty through policy change, focusing on these policy areas: Housing, Food Security, Economic Security, Health Security and Budget Justice (the county budget process).
4. Early Learning Leadership Group - A think-tank group comprised of leaders in the field of early education who plan, strategize, advocate, and collaborate to achieve the best outcomes for children 0-5.
5. Comprehensive Prevention Planning Team - The mission is to create and oversee a countywide prevention plan which impacts the social determinants of health for our children, families, and community.
6. Reading Advantage - Distributes new and gently used books to local schools and community organizations throughout Contra Costa County.
7. Healthy and Active Before Five - A collaborative that advances health equity through local policy and environmental changes to support the health and well-being of children ages 0-5 and their families.
8. Local Planning Council for Early Care and Education - In partnership with public and private entities, works to improve childcare and early education opportunities in Contra Costa County.
9. Los Medanos College ECE Advisory Committee - Collaborate with educational entities to inform and shape the ECE field.
10. The Family Economic Security Partnership - Private and nonprofit collaboration dedicated to increasing the income and building the assets of low-income families in Contra Costa County.
11. Diablo Valley College Advisory Board - Collaborate with educational entities to inform and shape the ECE field.

Contra Costa County  
Employment and Human Services Department

12. Tandem, Partners in Early Learning - Works alongside school districts, early childhood education providers and community-based organizations to co-create equitable, high-quality early learning literacy experiences for children ages 0-5.
13. Oral Health Collaborative for Contra Costa County - Works in collaboration with schools and community partners to increase access to oral health services by linking children, youth and families to no or low-cost dental resources.
14. Contra Costa/Anthem Quarterly Community Advisory Committee - Looks at trends in our community and assesses the trends to ensure needs are met for the families living in the community.
15. Building Healthy Communities - Strives to implement healthy eating and physical activity practices within early childhood education programs.

## Project Summary

Marla Stuart, MSW PhD  
Head Start Executive Director  
Contra Costa County  
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Contra Costa County has been the continuous regional provider of Head Start since 1966, one of the longest serving providers in the nation. The County is the largest early childhood education provider in the county, and uniquely positioned to support children and families. Contra Costa Head Start families benefit from seamless coordination of services accessible through the full portfolio of County-operated programs including public assistance, nutrition assistance, health, housing, and child welfare. The County proposes to continue a commitment to accessible and high-quality Head Start services for our most economically and socially vulnerable families by applying for \$20,110,988 in federal funds with a \$5,027,747 in required match and 1,201 Head Start and Early Head Start slots. To achieve this number of slots, the County will overmatch the federal funds with an additional state and local funding totaling \$11,938,653. This application maintains continuity of services for currently served children and families. This application also improves services by dramatically increasing teacher compensation, introducing a new flex promote teacher classification which provides all qualified teachers the opportunity to reach the highest salary; expanding mental health services; and extending hours to 12 hours per day in some centers.

The need for Head Start services remains and increases as the county population grows. County centers, located in all low-income communities of the county, include full-day and part-day center-based services, a home visiting program, and a local option high-school based program for teenage mothers. Services provided by the County include 848 directly-operated slots, and extends long-term partnerships with four providers: Aspiranet (149 slots), KinderCare (152 slots), Mount Diablo Unified School District (20 slots), and Tiny Toes (32 slots).

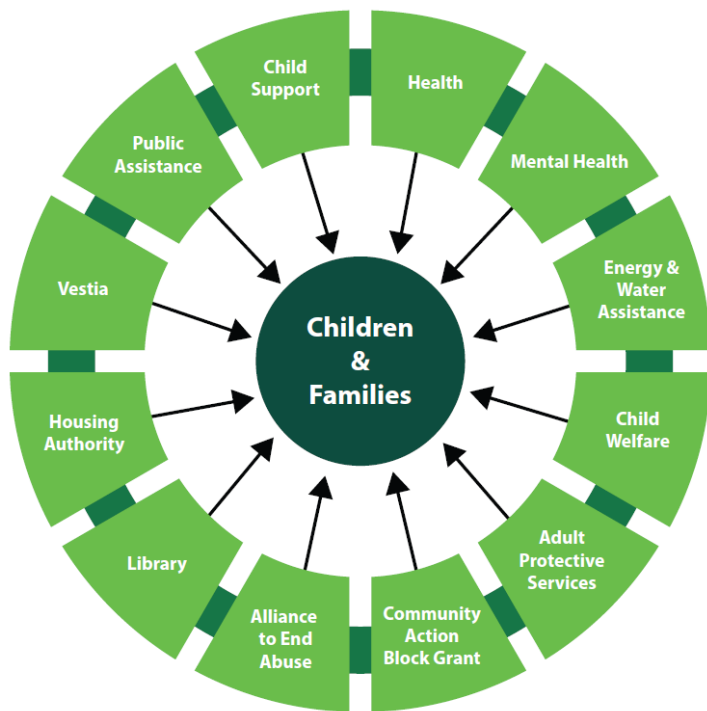
The County Head Start program maintains deep and long-standing collaborations with community-based organizations to foster collective action in support of young children. The management team averages 21 years of experience in early education and complex social service programs. The County's strong governance structure provides effective fiscal, administrative, and operational oversight. Through a systems approach and a culture of continuous improvement, positive child and family outcomes are achieved. As one example, in 2023 the program exceeded goals for all six school readiness domains and exceeded federal thresholds for all three CLASS domains.

A wide range of elected officials support this application, including Senator Laphonza Butler; Congress Members John Garamendi, Mark DeSaulnier, and Josh Harder; California Superintendent of Public Education, Tony Thurmond; Contra Costa County Superintendent of Schools Lynn Mackey; the Contra Costa County Mayors Conference and every city in which the County delivers services (Antioch, Brentwood, Concord, Oakley, Pittsburg, and Richmond).



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The Contra Costa County Head Start program, situated within the county portfolio of health and social services, provides seamless access to children and families to an array of supportive services that promote family wellbeing and support child school performance.

## 1. DEMONSTRATION OF NEED FOR SERVICES

### **How HS and/or EHS resources will be directed to the geographic areas of greatest need**

Poverty is the primary factor driving the County's selection of communities to serve. The County identified a set of cities with the highest need based on poverty rate: Richmond (14.3%), Bay Point (14.3%), Antioch (12.1%) Pittsburg (9.9%), Rodeo (9.6%), and Concord (9.2%).<sup>1</sup> Locating centers in these cities ensures Head Start (HS) and Early Head Start (EHS) services are provided to other, geographically-proximate communities of high poverty, such as San Pablo (11.8%). In order to ensure that low-income children living in comparatively more affluent cities would still have access to service, three centers were located within or nearby low-income housing developments in Brentwood and Oakley, in the easternmost part of the county. These centers also enabled services to be available to two less-populous (fewer than 2,000 residents) but high-poverty communities, Bethel Island (17.8%) and Byron (11.4%). Image 1 (page 83) illustrates the locations of the County's centers, showing that their locations ensure that nearly all low-income children in the county are within a 4-mile radius of a center. This image also shows how the County is divided into five Supervisorial Districts, and the elected Supervisors from each District comprise the Head Start governing body.

The County further validated these center placements by examining a set of other measures of need, some of which are shown in Table 1 (page 88). For instance, Bay Point has among the highest uninsured rate (13.2%), proportion of households eligible for Medi-Cal health insurance (56.8%), and unemployment rate (6.8%), providing evidence to support the placement of three centers in this community. The largest concentration of our HS/EHS seats is in the western part of the County, serving the communities of Richmond, North Richmond, and San

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<sup>1</sup> United States Census, *Table S1701 (2024)*, United States Census Bureau

Pablo; the data shows clearly how these communities suffer disproportionately from the effects of poverty, as Richmond has the highest poverty rate (14.3%) of any city in the County with a population above 2,000, North Richmond has by far the highest proportion of homeless individuals (8.3 out of 1,000 from the County's Point-In-Time homelessness count) and Richmond ranks second in that metric (4.21), and San Pablo has the County's highest rate of food insecurity (21.2% eligible for CalFresh) and health insurance need (66.0% of households eligible for Medi-Cal). The County has three centers to serve the low-income residents of Antioch, the second-largest city in the County and one in which every measure of poverty is significantly above the county average.

**The rationale for which ages of children are proposed to be served by program type**

The County proposes to continue to serve pregnant women, infants, toddlers, and preschoolers through the HS and EHS programs based on the needs of each community. Contra Costa County is home to an estimated 37,778 children aged 0-2 and 40,808 aged 3-5. Of these, 11.7% (9,195) fall below federal poverty level and an additional 3.7% (2,884) between 100-130% FPL, including an estimated 2,510 pregnant women. In order to meet the varied needs of these families, the County provides an array of different program models; Table 2 (page 89) summarizes the variety of proposed models, and Table 3 (page 90) identifies how many children can be served by each model at each location.

Additionally, the County utilizes data from the Contra Costa County Office of Education Local Planning Council for Early Care and Education, tasked with assessing the County's overall childcare needs. The most recent Annual Zip Code Funding Priorities<sup>2</sup>, continued to indicate a high need for accessible infant/toddler service in priority 1 areas of Antioch (94509, 94531),

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<sup>2</sup> LPC Priorities, [www.cdss.ca.gov/child-care-and-nutrition/specialized-programs/child-development/contractor-information/lpc-priorities](http://www.cdss.ca.gov/child-care-and-nutrition/specialized-programs/child-development/contractor-information/lpc-priorities).

Concord (94520, 94519, 94521), Bay Point (94520), Brentwood (94513), Oakley (94561), Pittsburg (94565), and Richmond (94803, 94804). Antioch, Brentwood, Concord, Bay Point, Antioch, and Oakley are also designated priority 1 areas for increased access to preschool services. The County proposes to serve infants/toddlers in 40% of federally funded slots through this application.

**If the proposed options are the most appropriate to meet the needs of the community**

The County proposes to continue operating HS and EHS center-based, EHS home-based, and locally-designed variation teen parent programs (45 CFR 1302.20). To reduce barriers to access and to meet unique needs of special populations, the County will include part day, full day, and extended day options (Table 2, page 89).

The County has a high need for full-day services, with many families commuting and single parents. Communities with the highest number of children in single female-headed families include Pittsburg (3,084), Concord (4,115), Richmond (5,490) and Antioch (7,312). Critically, several communities have much higher proportions of children in families headed by single females including Antioch (26.6%) and Rodeo (39.2%). The highest poverty rates among single male-headed families occur in Brentwood (13.4%) and Pittsburg (15.8%).<sup>3</sup> The cities of Richmond, Antioch, Concord, and Pittsburg have the highest number of children aged 0-5 living below the Federal Poverty Line (FPL). These communities remain areas of high need and that would benefit greatly from continued access to full-day, full-year Head Start services.

EHS is operated through full day center-based, home-based, and locally designed program options serving pregnant women and children birth through age two. Needs of eligible

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<sup>3</sup> Diane Godard, *2023-2025 Community Assessment* (May 2023), Community Services Bureau, Contra Costa County employment and Human Services Department, p. 20

pregnant women, infants, and toddlers across the county are met through the EHS home-based program option.

Community Assessment data presents a need for comprehensive prenatal and infant services. Most significantly, 14% of Contra Costa women with births experienced food insecurity during pregnancy. Relatedly, 21% of women had inadequate weight gain during pregnancy. Additionally, 8% of newborns have low birthweight, and infant mortality was 3.6 per 1,000 in 2022.<sup>4</sup> On a positive note, in recent years teen pregnancy has declined. Year-round weekly home visits and twice-monthly group socializations are conducted by our partner Aspiranet EHS home educators in partnership with families to promote high-quality learning experiences in the home. A minimum of 22 group socialization activities are provided over the course of the program year (45 CFR 1302.22).

**Analysis of access to other early childhood education programs in the geographic areas**

The County conducted an analysis of the availability of early childhood education programs and concluded that a substantial unmet need for early childhood education slots exists in the county. In April 2023, the county had 27,444 licensed childcare slots, including 5,682 in licensed family homes, 19,580 center-based preschool slots and 2,182 center-based infant slots providing the capacity to provide center-based service to only 48% of the county's population ages 3-5 and 5.8% ages 0-2 years.<sup>5</sup> Not only are there not enough slots available to serve the county's 0-5 population, but lack of accessibility is compounded by the high cost of care, further limiting access to low-income families. Cost of care continues to increase, exacerbated by the effects of the pandemic. Since 2019, costs for full-time care for infants have risen between 7%

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<sup>4</sup> All data about births from California Department of Public Health, Maternal Child and Adolescent Health Division online Data Dashboard, accessed 3/25/24.

<sup>5</sup> Diante Godard, *2023-2025 Community Assessment* (May 2023), Community Services Bureau, Contra Costa County employment and Human Services Department, p. 91-92

and 18% and for full-time childcare by 9-10%.<sup>6</sup> These findings further emphasize the need for the high-quality, cost-free early childhood education that HS and EHS programs provide.

Our strategy for allocating HS/EHS resources has also been informed by changes in the services provided by local school districts. Since 2021, the California Department of Education has provided funding to dramatically increase availability of Transitional Kindergarten (TK) services for four-year-olds through school districts. In 2022, Contra Costa County districts served only 2,300 children.<sup>7</sup> As of the 2025-2026 school year, universal TK will be available at no cost to all four-year-olds. In response, the County has increased its capacity to serve children under 4 by shifting resources to provide more toddler services and lowering preschool class sizes to enable centers to serve more three-year-olds. In 2022, we had 30% EHS slots and 70% HS slots. In this proposal, we have 36% EHS slots and 64% HS slots.

In identifying center locations, the County also continues to consider the availability of HS/EHS services in the community provided by other grant recipients. For example, the Unity Council operates a Head Start center with a licensed capacity to serve up to 186 children in the Monument Corridor community in Concord. As a result, the County's Concord center is located in a different part of the city, so as to not duplicate services. Similarly, the YMCA operates a number of centers in Pittsburgh and Antioch – which is why the County has not devoted as many resources to those parts of the county. As a bottom line, however, this analysis suggests that Head Start currently funds a total of approximately 2,155 seats – or around 12% of the county's 17,822 children aged 0-5 with household income under 130% of the federal poverty level. While some of these children are provided with early childhood education through school districts' TK

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<sup>6</sup> Diante Godard, *2023-2025 Community Assessment* (May 2023), Community Services Bureau, Contra Costa County employment and Human Services Department, p. iv

<sup>7</sup> California Department of Education, *Data & Statistics- Enrollment* (2022), [www.cde.ca.gov](http://www.cde.ca.gov)

programs, and others are cared for in state-funded centers or home-based programs, it is clear that a significant need for high-quality early childhood education services remains.

**The plan to enroll children with disabilities**

To facilitate enrollment and services to children with disabilities, the County maintains formalized agreements with the Contra Costa Special Education Local Plan Area (SELPA) (Second File p. 17), whose membership includes sixteen Local Education Agencies, and with the Regional Center of the East Bay (the county’s Part C agency), which serves infants and toddlers with developmental delays. Through use of its data management system (CLOUDS), the County continuously monitors progress towards ensuring children with disabilities comprise at least the required 10% of enrollment through the enrollment team’s daily processing of referrals, waitlist, and enrollment and through monthly reports to management.

The County remains firmly committed to not only enrolling but fully meeting the various needs of children with disabilities. As explained in Section 2 below, the County works with all school districts to support the developmental needs of children ages 3-5 with disabilities across the county, in each center and classroom. Through collaboration with Mt. Diablo Unified (Concord) and West Contra Costa School (Richmond) Districts, children in need of additional support as identified through their Individualized Education Plan (IEP) receive services in designated full-inclusion or special-day classrooms. The County also remains engaged in the community of disability advocates by participating in the Contra Costa County Developmental Disability Council and Contra Costa Interagency Care Collaboration. The County’s program design, community engagement, and teaching strategies have contributed to our ability to serve children with disabilities, representing 14% of children served in the 2022-2023 program year<sup>8</sup>.

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<sup>8</sup> Office of Head Start Head Start Enterprise System, *Program Information Report Summary Report (2023)*, 09CH010862-Contra Costa County Head Start

**How the need for full-day, full-year services in the community will be met**

In alignment with the Office of Head Start’s priorities, the County is proposing to provide full-day, full-year services through the majority of funded enrollment, with 83% (880 of 1,201) of center-based slots operating a full day, an increase of 155 new full-day slots. The County is proposing to convert an existing part-day room in North Richmond to full-day. Table 2 (page 89) details the planned number of hours per day, days per week, and weeks per year of program operation for each model. The County’s standard full-day, full-year model operates for 10 ½ hours per day, 5 days a week, 52 weeks per year. Sixty-six percent of children aged 0-5, live in families in which all parents work. In 2021, 86% of county workers commute with an average commute time of 37.8 minutes. Our strategic placement of centers throughout the county, such that virtually all families are within a four-mile distance of a County center, helps to ensure that parents have convenient access to high-quality early childhood education. Hours at select centers will be extended to better serve families with nontraditional work hours. These centers will allow drop off as early as 6 a.m. and pick up as late as 6 p.m.

**If applicable, how the proposed delegate agency is identified**

The County is not proposing a delegate agency.

**Engagement to improve service delivery, increase access, and prevent duplication**

The County’s Head Start governance structure, with an elected Board of County Supervisors serving as its governing board, is uniquely equipped to facilitate community engagement and ensure that decisions, including geographic locations of centers, are responsive to community needs. This distinguishes the County from other prospective Head Start entities in that the governing board is elected by and tasked with representing the entire population of the county and thereby directly accountable to the entire community. The County’s Head Start



leadership engages extensively and on an ongoing basis with the Supervisors, their staff members, and constituents from their districts, and all key programmatic and budgetary decisions must be approved, in hearings open to the public, by these elected representatives.

In addition, the County undertakes community engagement to improve service delivery, increase access to services, and prevent duplication through formalized partnerships, interagency agreements with school districts, and outreach. The County directly operates some programs, and partners with community providers via contract to deliver other programs. In this application the County proposes that partners operate 29% of the proposed seats, with the goal of increasing quality and access to childcare and development services in areas of need across the county. Selected through a competitive procurement process, the County proposes to partner with KinderCare Learning Centers, Mt. Diablo Unified School District, Tiny Toes and Aspiranet (see letters of commitment, Second File p. 20-23). The County and partners follow the same expectations in the areas of achieving early learning and development outcomes. Partners self-select an approach to service delivery, with County approval and oversight (Table 4, page 91). The County provides support to partners through monthly meetings, weekly site visits, ongoing training and data sharing, and quarterly Partner Learning Community Meetings. The County requires all partners and directly-operated sites to adhere to the same monitoring practices as outlined in Table 4 (page 91). These practices sustain improved service delivery, increasing the quality standards for childcare, and increasing access to high quality early education services across the county. Additionally, the County engages with two school districts, Mount Diablo Unified and West Contra Costa Unified, to operate full-inclusion and special-day service models in select Head Start classrooms in Concord and Richmond. This increases access to quality early education experiences in the least restrictive environments for our children with disabilities.

The County also engages in direct outreach to and engagement with the community. As a county government and the Head Start provider since 1966, we have deep roots in and connections to our communities. A specific example of how we engage, is the process to create the 2024/2025 Community Needs Assessment (CNA) and Community Action Plan (CAP), developed by the Economic Opportunity Council and funded by the Community Services Block Grant. To develop the CNA and CAP, the County convened a Community Action Plan Workgroup, conducted seven public hearings, and provided opportunities for public comment. These hearings took place in the community, including a homeless shelter for families, a free-lunch program, a library, and at a Head Start Policy Council Meeting. Through this process, 291 voices were heard. This process resulted in a set of findings and priorities that inform the County's work on its HS/EHS program and beyond.

## **2. ACHIEVING EARLY LEARNING AND DEVELOPMENT OUTCOMES**

### **Curricula and teaching practices**

The County uses *The Creative Curriculum for Infants, Toddlers and Two's* for EHS children, and *The Creative Curriculum for Preschool* for Head Start children. Both are evidence-based<sup>9</sup> and align with the Head Start Early Learning Outcomes Framework (ELOF), meeting requirements under 45 CFR 1302.32. The County also utilizes additional enhancements to support social and emotional learning.

*The Creative Curriculum* explicitly describes how each interest area in the classroom and specific teaching practices support children's development across the different ELOF domains and sub-domains. The curriculum assists teachers in understanding how children develop in the

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<sup>9</sup>Research Foundation: *The Creative Curriculum*, Teaching Strategies, Inc. (2010)

classroom environment through use of strategies such as Mighty Minutes -- playful and engaging activities to intentionally teach language, literacy, math, social studies, and physical skills. An independent, two-year impact study found evidence that *The Creative Curriculum* for Preschool is effective in helping children achieve positive results, specifically higher literacy and math outcomes and increased teacher effectiveness.<sup>10</sup>

The County enhances the curriculum to reinforce social-emotional learning, ensuring teaching practices promote progress towards school readiness goals. EHS classrooms utilize relationship-based, responsive caregiving approaches of the *Program for Infant and Toddler Care* and Head Start classrooms utilize *Second Step Early Learning*. Both assist staff with teaching social emotional skills including identifying feelings and self-regulation. Teaching staff also use strategies of *The California Teaching Pyramid Framework* to encourage social-emotional competence in children. *The Teaching Pyramid* provides a systematic framework that encourages appropriate behavior, prevents challenging behavior, and addresses problematic behavior.

To support their understanding of curriculum implementation, teaching teams receive ongoing training and technical assistance throughout the program year. Each teacher receives orientation and introductory training on the curricula during their on-boarding by the Education Manager. Annually, teachers receive an Education In-Service training that details the use of the curricula to support children's growth. Use of the curricula is evident by lesson plan review and ongoing classroom observations. Site Supervisors review and approve each classroom's lesson plan weekly, in addition to observing classrooms routinely. Our complex monitoring system also captures the use of curriculum through various monitoring tools, including the County's

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<sup>10</sup> TS-Curriculum-Effectiveness-Study-2013.pdf (teachingstrategies.com)

Curriculum Fidelity Tool (Table 5, page 92, #12). Careful and detailed analysis of assessment data also supports evaluating curricula implementation and effectiveness. This data analysis then drives our decisions for additional training on curricula, assessment, and other early education enhancements.

Teachers also implement Classroom Assessment Scoring System (CLASS™) strategies such as asking open-ended questions, modeling language, and using high level vocabulary with children. The program trains and encourages teachers to engage in conversations, use self-talk and parallel talk, and make real world connections to what students are currently learning. Teachers use techniques that foster a regard for student perspectives and help build a classroom community. They achieve this through children's classroom jobs and responsibilities, pictorial daily schedules, and by making room for student participation, allowing children to choose music and songs and assist at circle time and other times of the day. Teachers encourage children to make independent choices throughout the day. Lesson plans for infants and toddlers are open-ended and encourage teachers to look for signals that determine the children's interest level in the materials provided and activities presented.

Together, *The Creative Curriculum* and these enhancements provide children with developmentally appropriate educational content which supports engaged learning to promote progress in all developmental areas toward school readiness.

### **Establishing and measuring school readiness goals**

To assess school readiness, the County utilizes the Desired Result Developmental Profile 2015 (DRDP). The DRDP is a developmental assessment tool developed for children from early infancy up to kindergarten entry, including children with disabilities, and takes into consideration the specific cultural and linguistic characteristics of California's diverse population of young

children, with specific consideration for dual language learners (45 CFR 1302.33(c)). The DRDP addresses cultural and linguistic responsiveness in two primary ways: (1) “Teachers and providers observe and document children’s behavior in both the home language and English to obtain a more accurate profile of the children’s knowledge and skills across developmental domains,” and (2) “Teachers and providers rate children’s progress on two language development domains--Language and Literacy Development (LLD) and English-Language Development (ELD).”<sup>11</sup> The universal design of the DRDP makes it an effective assessment tool that gives all children of all ages the opportunity to demonstrate their knowledge and skills, including children with Individualized Education Plans (IEPs)/Individualized Family Service Plan (IFSPs), and children who are dual language learners.

Teachers complete the DRDP for each child with a tool specific to their age range three times a year: within 60 days of enrollment, at the mid-point of the school year, and at the end of the year. The assessment results inform program planning and decision-making at individual, group, and program levels. Each fall, the County utilizes the first (baseline) DRDP assessment data, in addition to previous years DRDP data, to create agency-focused school readiness goals. The County then develops specific, measurable objectives to improve school readiness and utilizes the second (mid-year) and third (year-end) assessments to measure progress towards school readiness.

The *Approaches to Learning-Self Regulation* domain assesses two critical areas for children’s overall school success: approaches to learning, and self-regulation. The goal of this domain is for children to be able to maintain attention and to freely explore the environment to learn more about people, materials, and events. The *Social and Emotional Development* domain

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<sup>11</sup> California Department of Education, *DRDP (2015) Preschool Fundamental View*, [www.desiredresults.us](http://www.desiredresults.us)

assesses children's developing thoughts and skills on how to understand others, interact with others, and form relationships with the children and adults around them. The goal is for children to gain social and emotional understanding through varying social interactions.

The *Language and Literacy* domain assesses children in their progress of developing fundamental language and literacy skills. The goal is to support children with communication and understanding of what makes up a written word. Language development is the foundation for reading and writing as children grow and learn. The *English-Language Development* domain assesses the progress of children who are dual language learners. Dual language learners may demonstrate knowledge and skills in both their home language and in English. The goal for children who are dual-language learners is to increase their level of English language capabilities to support with listening, speaking, and reading.

The *Cognition* domain focuses on observation, exploration, and investigation of objects and concepts. Through active exploration, the goal of this domain is to increase the child's knowledge and skills regarding spatial relationships and simple math operations. Lastly, the *Physical Development and Health* domain focuses on motor growth and the development of routines related to the child. The goal of this domain is for children to gradually develop their gross and fine motor skills while learning about personal care routines for themselves, including dressing themselves.<sup>12</sup>

Images 2 and 3 (pages 84 and 85) present the 2022-2023 results for each developmental domain for preschoolers and pre-kindergarteners, demonstrating that the implementation of curriculum, age-appropriate activities and materials, positive teacher/child interactions, and family engagement led to outcomes that met and exceeded the expected outcomes.

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<sup>12</sup> California Department of Education, *California Preschool Curriculum Framework* (2010), [www.cde.ca.gov](http://www.cde.ca.gov)

Finally, each year, the County also uses the DRDP to establish and assess an annual system-wide Parent, Family and Community Engagement (PFCE) goal and expected outcome. Family engagement is a crucial component in the journey towards school readiness. To support the selected goal, families receive monthly take-home activities with written guidance or other materials to help increase their knowledge on a particular area of focus. For the 2022-2023 program year, the County focused on increasing parents' success as lifelong educators by supporting their children's knowledge about nutrition and healthy food choices. Survey results indicate that the implementation of hands-on materials and written guidance over the year increased caregivers' ability to support their children in learning to feed themselves, understand good nutrition, and make healthy food choices at home. Image 4 (page 86) presents the 2022-2023 results of the PFCE goal, PD-HLTH 10, Nutrition. Improvements in child nutrition demonstrate the effectiveness of family engagement. The next Section explains how the County uses these results with staff, families, the Policy Council, and the governing body.

**School readiness goals established in consultation with the parents**

The County develops agency-level school readiness goals annually in consultation with parents, through the process outlined above related to the DRDP. Education Managers present the DRDP data analysis and proposed school readiness goals for each age group to the Policy Council's standing Program Services Subcommittee. Subcommittee members engage in discussion with the Education Team and provide valuable input. Based on parent feedback, changes are made before presentation to the full Policy Council, where parents/caregivers have another opportunity to engage in conversation regarding goal establishment. To close the loop, the Education Team shares the School Readiness Goals at center parent meetings. This consultation and information-sharing process continues with the mid- and year-end update.

Additionally, parents/caregivers have ample opportunity (e.g. weekly lesson plan reviews and parent meetings) to give input into the weekly lesson plan, which support school readiness goals, by reviewing and adding components that support children's growth in certain developmental areas, such as social and emotional development. Parent involvement in the creation of their child's individual school readiness goals is a crucial component to children's success. Families can collaboratively create their child's specific goals with the teacher at the first Parent /Teacher Conference. This shared process helps to bridge and enhance the home-to-school connection.

**Meeting the needs of infants, toddlers, and/or preschoolers with disabilities**

In 2022-2023, children with disabilities comprised 14% of children served by the County, exceeding requirements under 45 CFR 1302.14(b). To ensure appropriate disability services, the County employs three strategies: partnering with two school districts, participating in local learning collaboratives, and creating individualized lesson plans.

*Partnering with school districts:* The County engages families in the screening and assessment of their child. If at any time concerns are present, staff facilitate a family meeting to support with appropriate assessments and referrals. Additionally, County staff participate in the IEP/IFSP meeting to learn about the child's needs and to support the child's education in the program. The County's family services team is well equipped to support families and children with suspected or documented disabilities due to an established communication system with Contra Costa SELPA, which includes the Contra Cost County Office of Education, 15 school districts, and the Regional Center of the East Bay (the Individuals with Disabilities Education Act Part C agency). This collaboration provides opportunities and resources for children who require special education and services, as well as a smooth transition for children with disabilities from the County's Head Start program to public schools.



The County partners with Mt. Diablo Unified School District and West Contra Costa School District, to identify children with disabilities whose needs as identified in their IEP would be best supported by placement in designated full-inclusion or special-day Head Start classroom. Special-day classrooms are comprised of children with disabilities and instruction is led by School District specialists. Full-inclusion classrooms are comprised of both typically developing children and children with IEPs and are led by preschool teachers supported by School District specialists.

*Participating in local learning collaboratives.* To ensure continuous incorporation of emerging knowledge and approaches, County leadership participates in the Contra Costa County Developmental Disability Council and the Contra Costa Interagency Care Collaboration. The mission of the Developmental Disabilities Council of Contra Costa County is to promote the coordination, improvement, and growth of services and supports to individuals with developmental disabilities and their families and to advocate for their needs. Monthly council meetings focus on updates from the Regional Center, and State Disability Board, along with a presentation to educate the public on resources available in the community. The Contra Costa Interagency Care Collaboration is a monthly gathering of agencies across Contra Costa County that support children 0-5 years old. Agencies come together to share resources and network, building a robust partnership between agencies. Agencies that participate include the Early Childhood Mental Health Program, Contra Costa Health Services, West Contra Costa Unified School District, CocoKids, Vistability, Care Parent Network, First 5 Contra Costa, and Help Me Grow Contra Costa.

*Creating individualized lesson plans.* Teachers individualize daily lesson plans based on the child's goals as established in their IEP/IFSP. Specifically, each child is assigned a letter

code to document individualization on the lesson plan. Each week, Site Supervisors and at least one parent/caregiver review and approve lesson plans for each classroom. Lesson plans also include a safety component individualized to the needs of the classroom to ensure child health and safety remains an area of focus for all children and all classrooms.

**The plan to meet the needs of the applicant’s targeted population**

*Children in the child welfare system.* Because the County administers the child welfare system within the same Department as Head Start program (Image 5, p. 87), a seamless referral system exists meeting 45 CFR 1302.13 standards, and providing direct pathways for communication between Head Start and staff and child welfare social workers.

The County employs strength-based and trauma-informed strategies in working with families who are involved with the child welfare system. Family services staff build positive and goal-oriented relationships with caregivers and support in achievement of individual family goals, intentionally aligning directly with existing goals established by child welfare whenever possible (45 CFR 1302.52(d)). This individualized approach, employing strength-based Family Development Credential strategies as discussed later in this Section, supports diverse needs of children through an equity, inclusiveness, and cultural and linguistically responsive lens.

Additionally, Head Start Family Services staff support families involved in child welfare in accessing parenting classes including encouraging participation in our Head Start researched-based family development curriculum, *Make Parenting a Pleasure* (45 CFR 1302.51(b)). The County also supports family engagement for children whose parents are incarcerated, whether engaged with child welfare or otherwise. Through involvement with REadingADvantage’s *Storybook Connection* program, volunteers in the local county detention facilities work with incarcerated parents to teach the importance of reading to their child and provide a recordable

book that can then be brought to their child. Not only does this facilitate a love of reading, but it also helps to build and strengthen the bond between parent and child. Research has shown that recidivism rates decline for those that maintain healthy relationships with their children.<sup>13</sup>

*Dual language learners.* In 2022-2023, most children served by the County's Head Start program identified a primary home language as English (48%) or Spanish (45%). Of those reporting English as primary language, 15% of children were learning another language in addition to English at home. The remaining children spoke European/Slavic (2.4%) or Middle Eastern/South Asian (2.2%) languages, and less than 1% spoke Eastern Asian, African or Native Central/South American languages. *Creative Curriculum* includes many resources in both English and Spanish. Classrooms have color-coded bilingual labels in Spanish and English, and some have labels in additional languages as needed to support children with their home languages. The County supports dual language development through books, songs, classroom environment, and family involvement in the classroom. To further support language development and literacy outcomes, the County implements three literacy programs: *Tandem* (book share program), the *CSB Reads*, and *Storybook Connection*. Using multilingual, multicultural picture books as the starting point, these programs support learning across literacy, language, math, social-emotional learning.

The languages of children served informs the County's recruitment, hiring, and work assignment of bilingual and multilingual staff, further supporting dual language learner strategies. In 2022-2023, 63.5% of HS/EHS education staff were proficient in a language other than English, and 13% spoke more than two languages. At 40%, the more common language of

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<sup>13</sup> *Prison Reform: Reducing Recidivism by Strengthening the Federal Bureau of Prisons*, (Updated Nov. 2023) U.S. Department of Justice, [www.justice.gov](http://www.justice.gov)

dual proficiency was Spanish, followed by: 11% Middle Eastern/South Asian, 11% East Asian, and less than 1% Native North American, Pacific Island, and African languages.

*Homeless children.* From the first point of contact, the County supports children experiencing housing insecurity by identifying an ECE program that best meets the child's developmental and family support needs. Most services for housing-insecure families are administered by the County. Therefore, the County eligibility and enrollment staff utilize a county-developed housing screening tool at intake to identify those who are experiencing housing insecurity. All eligibility and enrollment staff have received training specific to supporting children experiencing homelessness, including completion of the National Center on Parent, Family, and Community Engagement's nine module *Supporting Children and Families Experiencing Homelessness* training, which includes knowledge checks, practice scenarios, and interactive learning modules designed to deepen understanding of family homelessness. Enrollment and Family Services staff are also trained on the McKinney-Vento Homelessness Assistance Act as it pertains to enrollment in Head Start. The County strives to build relationships with families as soon as possible following enrollment and the family services team utilizes a strength-based approach in conducting a family meeting, family assessment, and accessing resources. The Mental Health/Disabilities Manager, a content manager in the family services team (Organizational Chart, Second File p. 5), specializes in supporting homeless families and ensures adequate support and follow-up is provided, including support with applying for low-income housing. The Mental Health/Disabilities Manager is also part of a broad-based coalition, the Contra Costa County Council on Homelessness, to ensure unhoused families are part of an integrated system of care.

*Pregnant women.* The County provides EHS Services for pregnant teens (school-based program) and women (home visiting program) in partnership with two agencies: Crossroads High School and Aspiranet. Together with the county's family services team, they ensure the provision of services specific to needs of pregnant women, including education about and access to services for oral health, nutrition, infant care, and safe sleep practices. Crossroads High School collaborates with County-administered Family, Maternal, Child Health (FMCH) programs to monitor the health of mother and baby. Situated within the County family of services, expedited access to FMCH directly benefits our Head Start families. Using the evidence-based curricula *Growing Great Kids* and *Growing Great Families*, Aspiranet home visitors work from a strengthening-families approach to support parents' understanding of the importance of early parent-child relationships, basic care and health, attachment and bonding, healthy child development, and children's social/emotional competence. Clients are screened for depression by Aspiranet using the Patient Health Questionnaire (PHQ-4) at enrollment, birth, and 16 weeks postpartum.

**Meeting health, mental health, nutritional, and oral health needs**

Specialized managers oversee the integration of assessments and services throughout directly-operated and partner programs in the areas of health, mental health, nutrition, and oral health, as represented in the Organizational Chart on page 5 of Second File. In alignment with the Head Start Management Systems Wheel, managers collaborate to ensure alignment and seamless delivery of the full range of family services systems to meet child and family needs.<sup>14</sup> The County achieves this through monthly managers' meetings and workgroups, which include data discussions identifying health, mental health, nutritional, and oral health needs of program

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<sup>14</sup> Office of Head Start, *Management Systems Wheel*, [www.eclkc.ohs.acf.gov/organiational-leadership](http://www.eclkc.ohs.acf.gov/organiational-leadership).

participants. The County has established clear guidance via desk guides and procedures to guide the work of the family services team and ensure quality child and family outcomes.

*Health/Oral Health.* The County family services staff provide one-on-one educational opportunities for parents that build their understanding of a variety of health-related topics such as the Early and Periodic Screening, Diagnosis and Treatment Schedule (EPSDT); safe sleep practices that reduce the risk of Sudden Infant Death Syndrome and other sleep-related deaths; handwashing and tooth brushing practices at the Initial Home Visit; and side-by-side support to gain understanding of screening results, referrals, and navigating the health care system. In addition, the County provides a variety of group trainings on topics such as healthy eating and social and emotional well-being. Parent meetings, family meetings and other training provide learning opportunities for parents to ensure the delivery of high-quality health services.

The County teaching staff, through classroom activities and home visits, also model for parents the establishment of safe and healthy habits through practices such as handwashing, daily gum cleaning and tooth brushing, serving foods that are high in nutrients, low in fat and sugar, and meet the child's daily requirements, making water available for drinking, and supporting breastfeeding and on-demand feeding for infants and young toddlers. Children are brought to an "up-to-date" health status with family services staff support through access to preventive services, early intervention and ongoing treatment and care as identified through the completion of the Health History, 45-day hearing and vision screenings, and 90-day medical/dental exams, including screenings and assessments required per the Bright Futures EPSDT Schedule and immunizations per the Center for Disease Control and California regulations. The County completes the Screening Results Form for each child within 75 days of enrollment, and staff communicate with parents immediately when problems are suspected. The County values and

encourages parent input and staff observation, as they are critical to gaining understanding of the child's health.

*Nutrition.* The County offers a comprehensive system of child nutrition services for enrolled children and families. Nutrition services include well-balanced and nutritious meals that follow the United States Department of Agriculture's Food Program meal guidelines; nutrition screening and assessment; nutrition education at parent meetings and through menus and newsletters; a nutrition curriculum which promotes physical activity and healthy eating habits; and collaboration with community partners to support community-wide education aimed at reducing the persistent problem of childhood obesity.

*Mental Health.* For provision of mental health consultation services, the County collaborates with the Early Childhood Mental Health Program, a community-based organization whose mission is to promote the well-being and empowerment of our community by providing access to collaborative early intervention, mental health, and early education services that foster health development, strong relationships, healing, and resilience for infants, young children, and their families who face adversity. Over the past two years, a need for more mental health services has emerged as a common theme at public meetings throughout Contra Costa County. In response to this community priority, the County is proposing to expand mental health services with an increase in county employees. A new mental health team comprised of a Family Services Mental Health Supervisor and two Mental Health Specialists will support HS and EHS children, families, and staff. These staff will serve as leaders within a multi-disciplinary mental health team. These supports will provide County teachers more time and resources to best meet individualized mental health needs of children and families.

Positive health, mental health, nutrition, and oral health outcomes are achieved when working in partnership with families and empowering them as self-advocates. The County's family services staff continually assesses child and family strengths and needs and ensures successful referrals to all necessary services. Strengths-based family support skills are learned and practiced through the national Family Development Credentialing program (FDC) for family services workers. The FDC program provides family services workers with the knowledge and skills they need to coach families to set and reach their own goals for healthy self-reliance in their communities. Coaches and clients use the Family Development Plan to focus their sessions on reaching the client's goals. To earn the FDC, workers take 80 hours of classes based on *Empowerment Skills for Family Workers*<sup>15</sup>, complete a portfolio documenting their ability to apply these concepts and skills, and pass a standardized exam.

### **Observing teacher/home visitor practice and use for professional development**

The County administers a robust system of systematically observing teacher and home visitor practice as part of a multifaceted Ongoing Monitoring Plan, overseen by the Quality Monitoring Unit (QMU) and conducted by various County teams. CLASS-certified QMU staff monitor teacher-child interactions in a 50% sampling of preschool classrooms each year. Additional monitoring tools which observe teacher practice include Curriculum Fidelity (30% of centers conducted by QMU), the Child Safety & Transition Monitoring (100% of classrooms twice annually by senior managers), On-Site Content Area Compliance Checklist (100% of classrooms twice annually by family services managers), Education File Review (100% annually by family services and senior managers), Center Monitoring (30% of classrooms at each center annually by QMU), and Child Nutrition Health & Safety and Compliance (33% of centers

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<sup>15</sup> Forest, C (2015). *Empowerment skills for family workers*, Family Development Press.



annually by the nutrition manager). Home visitors are monitored using the County's Home Base Socialization and Home Visit Tools conducted annually by the QMU. Table 5 (page 94) outlines monitoring frequency, responsible individuals, and aggregated data review.

Each monitoring tool includes handbooks providing clear guidance to support compliance and data reliability. Compliance thresholds are set for each monitoring tool to determine the need for agency-wide corrective action plans which drive continuous quality improvement. Monitoring results are shared with Site Supervisors and teaching teams to inform opportunities for professional development and practice improvement.

At the beginning of the program year, coaching staff conduct the Teaching Pyramid Classroom Snapshot on each classroom to determine areas of strength and areas that may need improvement.

With this data, in addition to previous classroom CLASS scores and Creative Curriculum Fidelity monitoring data, an action plan for areas of focus and improvement is created with teaching staff and the site supervisors to support each classroom team. This data also drives selection of intensive coaching participants. The frequency of intensive coaching is based on need; however, coaching staff meet with participants no less than once per week for an average of 8-12 weeks. Along with the annual survey regarding training needs completed by each teacher, monitoring data is reviewed and analyzed by the Education Team and Assistant Directors (at the onset of the program year and quarterly thereafter) to determine potential training and professional development needs for staff in the upcoming program year. A calendar of 12 training topics is then created, and the training courses are specifically designed to build applicable skills. For example, the survey conducted in the Fall of 2023 resulted in a detailed training and discussion on temperament in children, and how to navigate adult conflict.

Data collected through the ongoing monitoring system is aggregated and analyzed semi-annually to determine strengths and areas of improvement. In school year 2022-2023, the County's average CLASS scores exceeded the Head Start Quality Thresholds in all domains: 6.39 for Emotional Support (threshold = 6); 6.09 for Classroom Organization (threshold = 6); and 4.44 for Instructional Support (threshold = 3).

**The process for selecting the assessment tool and plan to use child assessment data**

The County utilizes the DRDP, described above, as its assessment tool. The county has historically used the DRDP as it is required by the California Department of Education and Department of Social Services and aligns with the HS Early Learning Outcomes Framework (45 CFR 1302.33(b)). Teachers use the DRDP assessment data to create specific, individual child goals in collaboration with family members to support children in gaining the skills, behavior, and knowledge necessary for school success and life-long learning. Family engagement is essential to goal setting for each child individually. During the first parent-teacher conference, the DRDP data from the first assessment is shared to help families create appropriate goals for their individual children for the remainder of the program year. However, engagement begins as soon as possible with families regarding any concern with their child's development, through parental concerns, screenings, or child assessment. Teachers and family service staff facilitate family meetings which support parents/guardians with understanding their rights and the referral process. If appropriate, a referral is made to the applicable local education agency or the Regional Center of the East Bay (IDEA Part C agency).

The County works in partnership with families to collect and monitor child-level data by conducting health screenings, developmental assessments (DRDP), home visits, parent conferences and family partnership agreements to understand strengths and needs which results

in individualized programming for school readiness. This engagement begins at program entry through an in-depth health and developmental history conducted with caregivers to gain an understanding of the child's needs. Within 45 days of enrollment, all children receive vision, hearing, cognitive, and social-emotional screenings (utilizing the *Ages and Stages Questionnaire 3* and *Ages and Stages Questionnaire- Social Emotional*) to support identification of potential concerns including developmental delays. Parents/caregivers are engaged during Parent Conferences in creating individualized goals created for each child based on cumulation of data collected. The County recognizes the important role that parents/caregivers, as their child's first teacher, play in their child's development, encouraging parent to volunteer in the classroom and bring lessons into the home.

As stated above regarding school readiness goal establishment, the County aggregates and analyzes child-level assessment data to not only develop individualized goals for each child but create agency-wide goals.

**Coordination in providing child health, developmental, and program management services**

The County's Head Start program coordinates these services both within county government and throughout the community.

*Within the county.* As an embedded program within the county portfolio of services, (Image 5, page 87), Head Start children and families benefit from expedited access to services to meet their needs and achieve family goals. A notable example is our health manager's recent coordination to implement use of the County's well-child exam form as a template available to doctors via Contra Costa Health Services' electronic medical record system. This unique form clearly identifies all medical screenings and assessments required under the state's EPSDT program, and flags which of them are currently missed or not documented. More complete and

accurate data collection by Contra Costa Health Services allows Head Start staff to better determine the child's up-to-date status and mobilize support to achieving up-to-date status (45 CFR 1302.42(b)(i)), and helps parents and caregivers continue to follow recommended well-child schedules and obtain follow-up care (45 CFR 1302.42(c)-(d)).

*Throughout the community.* County management regularly participates and plays leadership roles in a variety of community organizations and groups to coordinate with public and private entities and promote provision of child health, developmental, and program management services. Below are descriptions of entities and the County's role and length of experience collaborating with each. As demonstrated by this list, the County's long and successful history with Head Start has left it with a broad and deep array of partnerships rooted throughout the community of Contra Costa County.

First 5 Contra Costa (26 years, Commissioner, 9 Commissioners) - Aims to change systems of services and supports for children ages 0-5 and their families. In addition to funding five Family Resource Centers, First 5 coordinates collective action through advocacy and community engagement, research, capacity building, and connecting families and child care providers to resources.

Contra Costa County Interagency Collaborative (10 years, founding member, 40 members) - A meeting of community-based organizations to share resources and service opportunities with one another to better the service delivery options to families in Contra Costa County.

Ensuring Opportunity Campaign to End Poverty (7 years, leadership team, 16 members) - The goal is to end economic disparity by addressing the root causes of poverty through policy

change, focusing on these policy areas: Housing, Food Security, Economic Security, Health Security and Budget Justice (the county budget process).

Early Learning Leadership Group (16 years, leadership team, 8 members) - A think-tank group comprised of leaders in the field of early education who plan, strategize, advocate, and collaborate to achieve the best outcomes for children 0-5.

Comprehensive Prevention Planning Team (6 years, team member, 35 members) - The mission is to create and oversee a countywide prevention plan which impacts the social determinants of health for our children, families, and community.

Reading Advantage (10 years, Board member, 9 members) - Distributes new and gently used books to local schools and community organizations throughout Contra Costa County.

Health and Active Before Five (3 years, Executive Board Member, 20 members) - A collaborative that advances health equity through local policy and environmental changes to support the health and well-being of children ages 0-5 and their families.

Local Planning Council for Early Care and Education (6 years, Board member, 20 members) - In partnership with public and private entities, works to improve childcare and early education opportunities in Contra Costa County.

Los Medanos College ECE Advisory Committee (6 years, member, 20 members)- Collaborate with educational entities to inform and shape the ECE field.

The Family Economic Security Partnership (15 years, member, 30 members) - Private and nonprofit collaboration dedicated to increasing the income and building the assets of low-income families in Contra Costa County.

Diablo Valley College Advisory Board (5 years, member, 20 members) - Collaborate with educational entities to inform and shape the ECE field.

Tandem, Partners in Early Learning (5 years, community partner, 5 members) - Works alongside school districts, early childhood education providers and community-based organizations to co-create equitable, high-quality early learning literacy experiences for children ages 0-5.

Oral Health Collaborative for Contra Costa County (15 years, participant, 25 members) - Works in collaboration with schools and community partners to increase access to oral health services by linking children, youth and families to no or low-cost dental resources.

Contra Costa/Anthem Quarterly Community Advisory Committee (5 years, participant, 20 members) - Looks at trends in our community and assesses the trends to ensure needs are met for the families living in the community.

Building Healthy Communities (7 years, partner, 25 members) - Strives to implement healthy eating and physical activity practices within early childhood education programs.

**Services to enrolled pregnant women post-pregnancy and transition planning process**

The County facilitates transitions at three stages. First, post pregnancy transitions. Second, toddler transitions. Third, kindergarten transitions. In 2023, the County transitioned 448 children to their next developmentally-appropriate care and education environment.

*Post-pregnancy transition.* County staff collaborate with the two partners (Aspiranet and Mt Diablo School District) to provide services to pregnant women to systematically ensure continuity of care when transitioning their infant to EHS. Planning begins at least six months before the transition occurs. Teachers use infant assessment data to prepare individualized transitions to the next school experience. Teachers and family services staff regularly communicate with families through the transition process to help the family with their child's

transition to preschool. In the 2022-23 program year, 100% of pregnant women receiving home-based EHS services subsequently enrolled their infant in the program.<sup>16</sup>

*Toddler transitions.* The County strives to transition children to new slot in close proximity, often within same location. Teachers implement toddler transition plans with the child and family at 30 months, 34 months, and 35-36 months. The toddler transition planning includes collaboration between Site Supervisors, the Family Services Team, and the Centralized Enrollment Unit in identifying a plan for each toddler's next educational experience. This plan includes updated eligibility determinations for Head Start which are conducted in advance of child's transition. The Enrollment, Recruitment, Selection, Enrollment, and Attendance (ERSEA) Manager monitor transitions. Based on family needs, such as relocation, the family services and enrollment teams support the transition to another childcare agency and enrollment, if possible, with childcare partners.

*Kindergarten transition.* Prior to the kindergarten registration period each year, site-based parent committee meetings provide Kindergarten Transition training and local school district kindergarten registration information. Teachers use the Getting Ready for Kindergarten Teaching Guide from *The Creative Curriculum* to plan activities during the last few weeks of school that focus on kindergarten readiness through literacy, math, arts, and technology. Teachers use the *Second Step* curriculum to support children's kindergarten transition. The last three *Second Step* lessons that focus on transitions to kindergarten are "Learning in Kindergarten", "Riding the Kindergarten Bus", and "Making New Friends in Kindergarten". Kindergarten transition plans for children with disabilities include engagement with the school district during IEP transition meetings and supporting families with understanding their rights and addressing any family

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<sup>16</sup> Office of Head Start Head Start Enterprise System, *Program Information Report Summary Report (2023)*, 09CH010862-Contra Costa County Head Start

concerns, priorities, or resources to support with the positive transition. For all transitions to kindergarten, the county provides backpacks with activities and supplies to support the parents/caregivers in preparing their child at home.

**Facilitating meaningful engagement of parents and reducing barriers to participation**

The County employs three strategies to ensure meaningful engagement with parents and caregivers to promote child wellness and school readiness (45 CFR 1302.34, 1302.52). First, staff remain flexible when scheduling home visits, parent conferences, and family meetings to reduce barriers to parent and caregiver participation, such as work hours or transportation. Second, the Policy Council meets in the evenings to allow working families to attend. Members receive reimbursement for their own childcare or can use the onsite childcare. Members and their children receive dinner and transportation reimbursement. Third, the County modifies the form of communications based on parent and caregiver preferences as identified in an annual Communication Survey. Based on survey results, for example, the County increased text messages and emails as primary forms of communication. Likewise, the County adopted Zoom to offer remote accessibility to the family curriculum, *Make Parenting a Pleasure*. Friday Flyers, a weekly collection of community resources announcing events in the Head Start program and the greater community, are now available to families on the web portal. A QR code posted on center Parent Boards links families directly to these electronic flyers, ensuring up-to-date information is readily available.



### 3. PAST PERFORMANCE

#### **Effectively administering a project the size, complexity, and scope of proposed program**

The County has been the provider of Head Start services in the county since 1966. The program has expanded over the years, and in the past decade, services have further expanded in scope. From 2015-2017, the County was awarded two EHS-Child Care Partnership grants, equating to an 84% increase in infant/toddler services for Contra Costa County. The County currently directly operates twelve centers and partners with eight community-based organizations to serve 1,916 child development slots through state and federal funding and has a proven record of effectively administering a program of the size, complexity, and scope of that which is proposed in this application.

All 12 directly-operated centers participate in the Quality Rating Improvement System (QRIS), also known as Quality Matters, a systematic approach to support teaching staff with continuous quality improvement. QRIS also supports families with their understanding of what a quality program looks like. Our 12 sites have received QRIS scores of levels 4 (mastering) or 5 (exceeding) standards in the areas of health and safety, quality teaching and environments, and staff qualifications/education. As one of the pioneers of layered funding models in California, the county leverages state child development alongside Head Start funding to ensure the community's low-income, foster, and homeless children have access to quality educational experiences, safe and nurturing caregiving, and comprehensive services. Each year, the County conducts a parent survey which yields high rates of satisfaction with our services. In 2023, 99% of parents felt their child was safe and happy in the program.

The County has received recognition for innovative practices. The County was the first agency in California to implement electronic attendance and received the Merit Award from the

California State Association of Counties (CSAC) in 2015, recognizing the County's locally-designed database, CLOUDS, as an efficient, cost saving system. The County received a CSAC Merit Award again in 2020 for its development of an innovative and safe communication system, again for CLOUDS, to connect with families during the COVID-19 pandemic. Over the years the County has supported programs across the nation as presenters and panelists at numerous state and national conferences, including the annual Head Start California and the National Head Start Association's Innovation Summit.

**Professional experience for the management team**

The County's success is attributed to the management team having a wealth of expertise and experience. The program is led by a group of senior managers comprised of the Director, Deputy Director, Division Managers, Assistant Directors, and Program Managers. This group has an average of 20 years of experience leading teams in the Head Start/Education field. Notably, the team brings forth expertise gained through attainment of the Mentoring and Administrative Credential and completion of programs such as the Head Start Academy, UCLA Anderson School of Management Fellows Program, and New Director Mentorship Program along with other leadership programs including Facilitative Leadership and the Leadership Challenge. Additional information on the qualifications of management staff is included below in Section 4.

The Head Start program benefits from the support of the county administration due to the level of oversight, internal controls and governance systems afforded by the County. Administrative staff's extensive experience in managing HS/EHS programs, including financial management competency, is detailed below in Section 6.

**Providing effective financial management in operating a HS and EHS program**

The County's Head Start program provides effective accounting and financial management. It formulates and maintains an adequate organizational structure that delineates lines of authority and responsibility; defines operational relationships; formulates lines of communication; and establishes a system of internal checks and controls. The financial management structure is comprised of the governing body that formulates financial policies, approves all budgets and contracts, and reviews operations and activities; the Head Start Policy Council Fiscal Subcommittee reviews, provides input and approves annual and supplemental budget changes; the EHSD Director is responsible for all financial operations; the Chief Financial Officer is responsible to the EHSD Director for all financial operations; the Departmental Fiscal Officer is responsible to the Chief Financial Officer for all financial operations; and all employees follow lines of authority per the organizational chart.

The County adheres to the eight standards of effective financial management that meet federal regulations through the following: Relates financial data to performance data and develops unit cost information whenever practical; Accurate, current and complete disclosure of financial results; Maintains records that identify source and application of funds; Effective control over and accountability for all funds, property, and other assets; Monthly comparisons of expenditures with budget; Written procedures to minimize time between transfer and disbursement of funds; Written procedures for determining reasonableness, allocability and allowability of costs in accordance with cost principles; and Accounting records that are supported by source documents.

The governing body sponsors the annual external audit of all federal funds (single audit) for all its accounts, books and records. Audit findings, if any, are reported to the Board and

County Administrator's Office for appropriate action. Corrective action on audit findings is immediately acted upon and implemented. The County maintains its accountability through its effective internal control structure which are integral parts of management. These controls include various methods used to safeguard assets and assure that they are used solely for authorized purposes, ensure reliability of accounting data, comply with management policies, grant terms and conditions, and federal and state regulations. There is a system of checks and balances to ensure accountability. The County maintains accountability by adhering to its accounting policies and procedures that conform to Generally Accepted Accounting Principles (GAAP) and the County Administrative Bulletins.

The most recent audit found the County complied, in all material respects, with the compliance requirements that could have direct and material effect on each of its major federal programs for the year ended June 30, 2022, included in the Federal Financial Review Attachments. The County received one finding: Reporting - Material Weakness in Internal Control over Compliance with Instance of Noncompliance. The County promptly implemented corrective action through development of a tracking tool ensuring compliance with Appendix A (I)(a) of 2 CFR Part 170 to report each obligation action greater than or equal to \$30,000 in federal funds for a subaward to a non-Federal entity no later than the end of the month following the month in which the obligation was made.

**Violations and actions taken to address them**

From 2015 through the present, the County received 12 mandatory program audits. Eleven produced no findings.<sup>17</sup> One produced significant findings.

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<sup>17</sup> *Audits with no findings.* 1) February, 2015 ACF Environmental Health and Safety Review; 2) March, 2015 ACF CLASS Review; 3) April, 2015 ACF Fiscal Integrity/ERSEA Review; 4) March, 2016 ACF Family Services and School Monitoring Review; 5) June, 2016 ACF Leadership, Governance, and Management Systems Review; 6)

In 2022, the Office of Head Start (OHS) conducted a review which resulted in findings: one area of non-compliance in Program Governance, three deficiencies in Safety Practices, one deficiency in Ongoing Monitoring and Continuous Improvement, and one deficiency in Ongoing Fiscal Capacity. The governing body, leadership team, and all staff immediately engaged to develop and implement a one-year Quality Improvement Plan (QIP) supported monthly by the OHS Training and Technical Assistance team. The Office of Head Start conducted follow-up reviews in November 2022 and February 2023 and concluded that all findings were corrected. This experience catalyzed positive organizational change. As a result of investments in systems, staff, and families, the County Head Start program is safer and more fiscally accountable.

*Program Governance.* The governing body reviewed and revised policies related to governance, internal controls, and complaints (HS Act 642(c)(E)(ii), 75.303(a)). This included implementation of a new Head Start Committee which receives and reviews detailed information and promotes this information to the full governing body for review and approval. This Committee provides more time for the governing body to engage with the leadership team and provide guidance. The governing body also expanded the contents of the monthly report to ensure it includes all required legal and fiscal information and approvals.

*Safety Practices.* The County created and implemented a new, ongoing Culture of Safety Initiative (45 CFR 1032.47). This initiative includes family and staff engagement, training and professional development, technology enhancements, reinforced safety practices, and reporting of unusual incidents. Some examples include instituting the use of white boards and visible

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March, 2019 ACF Focus Area 1 Review; 7) May, 2019 California Department of Education Contract Monitoring Review; ACF; 8) October 2019 ACF Onsite CLASS review; 9) February, 2020 ACF Focus Area Two; 10) April, 2021 California Department of Education review of governance and administration, contract monitoring, and a pilot program; 11) January, 2023 California Department of Social Services Program Integrity and Improvement; 12) May 2023 California Department of Social Services Contract Monitoring. Additionally, internally, the County Auditor Controller's Office conducts quarterly credit card audits with no findings since 2003.

zoning maps to support active supervision, adding “supervision” to all parent meeting agendas to reinforce expectations with families, adding safety helpers in all preschool classrooms so the children can participate in keeping classroom environments safe, and adding “safety” to the weekly lesson plans to ensure age-appropriate activities are planned and implemented to support safe environments.

*Ongoing Monitoring and Continuous Improvement.* The County improved its multi-tiered monitoring system and standardized the use of monitoring tools across directly-operated centers and partner services (45 CFR 1302.102(b)(1)(i-iv)). The updated monitoring procedures focus on compliance with child rights, child supervision, and health and safety practices. This includes daily targeted self-monitoring by teachers and site supervisors, and regular secondary-level monitoring by management. Standardized procedures and electronic tools produce daily and weekly aggregate monitoring reports for the County leadership team to quickly identify trends and take appropriate action. Monthly and semi-annual aggregate monitoring reports are shared with partners, the Policy Council, and the governing body. Table 5 (page 92) provides a full list and description of the 20 monitoring tools and how they are used.

*Fiscal Capacity.* Improvements were made to Internal Controls which include annual self-monitoring, quarterly monitoring of subrecipients, trainings on allowable costs and contract payment review, and updated policies on Internal Controls and procurement to closely align with federal regulations (45 CFR 75.303).

**Description of and actions taken to address ongoing under-enrollment**

Following the COVID-19 pandemic, like many programs nationwide, the County faced challenges reaching full enrollment. To address under-enrollment, in consultation with Region IX Head Start T/TA, the County conducted a root cause analysis and created an action plan to

address the primary contributing factor – vacancies. The County’s ability to maintain full enrollment has been hampered due to high vacancy rates and child recruitment challenges.

*High vacancy rates.* The County has implemented several strategies to grow the early education workforce amid nationwide staffing shortages. In fall 2023 the Board of Supervisors approved stipends for teaching staff to support recruitment and retention efforts, issued in two payments for a total of \$6,000 hiring and \$12,000 retention incentive. The County has also seen success in holding on-site hiring events for teaching staff, which was piloted at a community college in October 2023 and replicated at a community library in January 2024. In corroboration with two local community colleges, the County operates a work-study program. Through this program individuals interested in a career in early childhood education (ECE) are hired as Teacher Assistant Trainees with no prior experience required. They are supported with obtaining their 12 ECE units and applying for the Associate Teacher permit through the California Commission on Teacher Credentialing. In February 2024, the County began holding virtual open houses as information sessions to recruit for teaching positions, including engaging currently enrolled families with career development opportunities available through the work-study program. To support these strategies, the County has increased marketing using social media, community relationships, and our families. As such, the County has been able to hire 16 various classifications of teaching staff since January 2024. This has resulted in reopening two previously closed classrooms and enrolling three classrooms to capacity that were previously limited enrollment due to staffing.

*Child recruitment challenges.* Community reengagement activities have supported increased enrollment in two areas: child recruitment and reopening unallocated slots through partnerships. The COVID-19 pandemic impacted a primary recruitment strategy, in-person

community outreach fairs. The County's centralized enrollment unit, led by the ERSEA manager and comprised of staff specializing in eligibility, leads community outreach and recruitment. As stated in Section 1, a robust recruitment plan is developed each year, which includes community events. Since January 2023, the County has attended 25 community outreach events. In targeting recruitment of special populations, the County sends quarterly recruitment flyers to all county TANF and SNAP (CalWorks and CalFresh) households with children under five years old. Since September 2023, 13,733 Head Start recruitment flyers have been sent. The county also engaged the community in efforts to open slots displaced through departure of partnerships, by publishing a Request for Proposals to solicit new partner agencies and engaging existing partners whose location supports an increased need for Head Start services. As of February 2024, the County increased slots through its partnership with KinderCare.

The County recognizes that the flexibility to respond to changing community needs is a key factor in achieving full enrollment. Therefore, our proposed shift in increasing infant/toddler care and full-day services as outlined in Section 1 accounts for staffing capacity and the need for increased full-day and infant/toddler care.

#### **4. STAFFING, COMPENSATION, SUPPORTING A STRONG WORKFORCE**

##### **Program director and key program staff's qualifications**

From the governing body, through the executive team, management team, and direct service staff and partners, the County's Head Start team meets and exceeds the standards in 45 CFR 1302.91. The organizational chart and resumes begin on page 5 of the Second File. Section 6 below discusses the governing body and executive leadership. This Section discusses all other



key program staff which includes the required positions of Director, Chief Finance Officer, Education staff, and Family Services staff.

*Director.* The County Head Start Director exceeds qualification required 1302.91(b) whereby a minimum of a baccalaureate degree and experience in supervision of staff, fiscal management, and administration is required. Mary Jane (MJ) Robb, MA in Public Administration, started her county career 27 years ago with the County Head Start program. Her experience includes supervision, financial management, human resources, contracts management, facilities oversight, and program administration of complex social service programs. Ms. Robb is certified in Public Sector Human Resource Management, Employment Law for Human Resource Professionals, and Federal Government Grant Financial Management.

*Deputy Director.* Scott Thompson holds a Masters in Teaching and Masters in Social Policy and began his career as a middle and high school teacher with 15 years of experience in the Education field. Mr. Thompson's experience includes serving a Vice President of Programs for a national education non-profit, overseeing teacher training programs for over 300 teachers annually.

*Chief Financial Officer.* The County Head Start Fiscal Officer exceeds qualifications required under 1302.91(c) whereby a baccalaureate degree in accounting, business, fiscal management, or a related field is required. Navdeep Singh, MA in Business Administration, brings 18 years in public and private organizations leading fiscal and administrative functions. Ms. Singh's expertise includes the complex California social services funding models and process improvement.

*Senior Management.* As seen on the Organizational Chart (Second File, p. 5), the County is led by an experienced team of Division Managers who work closely with the Head Start

Director. All have proven knowledge and skill in managing large projects with significant financial impact, and these three individuals have a combined 56 years of experience working for the County's Head Start program. Directly overseeing clusters of child development centers are the County's Assistant Directors who possess strong knowledge of HS/EHS services, and state licensing and child development program regulations. Assistant Directors, Jessie Black and Linda Frazier-Stafford, each hold a bachelor's degree in ECE and Teacher Credentialing Program Director's Permits. They have a combined 50 years of experience in the field.

*Family, health, and disabilities management.* Family and community engagement, health, nutrition, and disabilities/mental health management staff have baccalaureate degrees in the discipline they oversee or related field, as required under 1302.91(d)(1). Family and Community Engagement Manager, Ana Araujo, has 21 years of Head Start experience and a BA in Industrial Design with coursework in Early Childhood Education. Ms. Araujo has certifications in the Family Development Credential, Culturally Responsive Parent Engagement, Positive Parent Program Facilitator, Make Parenting a Pleasure, The Incredible Years Parent Group Leader, Teaching Pyramid, Devereux Early Childhood Assessment Mentor, and Financial Parent Education. Health Manager, Catherine Lucero, has worked with families in the early education field for 42 years, including 24 years working with pregnant and parenting teens. Ms. Lucero has a MA in Human Development with Specialization in Leadership in Education and Human Services and is a Certified Lactation Consultant. Catherine maintains a Program Director permit as well as Child Nutrition Program, Family Support Standard and Case Management certifications. Nutrition Manager, Irene Figueroa, has worked in the early education field for 14 years, has a BA in Early Childhood Education and is under supervision of Senior Manager, Michelle Mankewich, who has a BS in Nutrition. Disabilities and Mental Health Manager,

Jacqueline Lopez, has a BA in Social Welfare and has certifications in Teaching Pyramid, Adult and Children Together Facilitator Training, California Sexual Assault Counselor Training, Domestic Violence and Trauma Informed Practice. Ms. Lopez has 19 years of experience in early childhood education.

*Education management.* Education managers have a baccalaureate or advanced degree in early childhood education and early education teaching experience, per 1302.91(d)(2). Education Manager, Afi Fiaxe, has a MA in Organizational Management and Development and BA in Special Education and Education and Home Economics. Ms. Fiaxe has 30 years of experience in the field. Education Manager, Latonya Saucer, has a BA degree in Early Childhood Education and 30 years of experience as an educator in the County's Head Start program.

*Child and family services staff.* In accordance with 1302.91(e), the County ensures that Family Services Assistant Managers and Clerks have at minimum a credential or certificate in social work, human services, family services, counseling, or a related field within 18 months of hire by enrolling staff in the Family Development Credential program as part of the County's training and technical assistance plan. Family Services staff also complete updated refresher training in the areas of mental health, health, nutrition and family and community engagement.

*Center-based teachers.* The County maintains strict staffing ratios at all centers, including partner centers, with a 1:8 teacher-to-child ratio for preschool children; 1:4 for toddlers; and 1:3 for infants under 18 months of age. All the County and partner Teachers and Associate Teachers meet or exceed the qualification requirements of the Head Start Act 648(a)(3)(B) and all teachers possess Child Development Teacher Permits issued by the California Commission on Teacher Credentialing. Possession of this permit requires a minimum of 24 ECE units of course work from an accredited college or university. As of June 2023, 98%

of County and partner Teachers and Master Teachers possess an Associate or Bachelor's degree in ECE or a closely related field. Teachers who do not have a degree currently are enrolled in college courses and are working diligently according to their Professional Development Plans. The Associate Teachers meet the requirements and possess Child Development Associate Teacher Permits. Possession of this permit requires a minimum of 12 units of course work in Early Care and Education from an accredited college or university. The permits are issued for five years and before their expiration date, each permit holder needs to renew her/his permit or upgrade it to a higher-level permit. All Teachers and Associate Teachers are required to maintain their respective Child Development Permits throughout the duration of their employment. This requires that every five years a teacher completes 105 hours of professional development training related to Early Care and Education, or to enroll in college classes leading to a degree in ECE or a related field. To maintain their permits, Associate Teachers must take college courses in ECE leading to Child Development Teacher Permit. In a five-year period, an Associate Teacher needs to complete at least 15 semester units leading toward a Teacher Permit. Each Associate Teacher has a maximum of 10 years to complete the requirements for a Teacher Permit and obtain 24 semester units in ECE and 16 semester units in general education. In addition, all the County Infant/Toddler Teachers and Associate Teachers, including those at partner sites, possess a minimum of six (6) ECE college units with a focus on infant and toddler development. The County provides ongoing training focusing on infant and toddler care and development, rooted in the Program for Infant/Toddler Care (PITC), as well as training on diverse early childhood education topics. The County teaching staff receive a minimum of 15 hours of professional development classroom-focused training annually provided by the County.

*Home visitors.* The home educators providing services to families with infants and toddlers through our partnership with Aspiranet meet the qualification requirements (1302.91(6)), possessing a minimum of 12 semester college units in ECE which also includes units focusing on infant and toddler development. Additionally, home educators are provided specialized training in structured child-focused home visiting; strength-based parent education; strategies for supporting early literacy and language skills, including strategies for working with families and children with limited English proficiency; strategies for helping families to cope with stress; comprehensive services and resources for families with young children; and diverse topics in early childhood education and development with focus on children ages birth to three.

**The plan to attract and retain qualified staff and evidence of competitive salaries**

In this challenging hiring environment, the County's governing body specifically prioritizes the recruitment and retention of qualified staff with increased salary opportunities and other strategies.

*Staff recruitment.* The teaching staff recruitment plan includes five strategies: financial incentives, robust incentives, a marketing campaign, expedited hiring processes, and ECE career development.

Financial incentives. For the 2023-2024 fiscal year, the governing body approved \$6,000 hiring bonuses for new teachers. This bonus has been provided to 16 new teachers totaling \$96,000. Additionally, in 2022, the governing body approved 20% salary increases over four years for all employees. To date, all County Head Start staff have received 10% increases. The remaining 10% will be added to salaries in FY24/25 and FY25/25. Finally, with this application, the County proposes to add an additional \$12,000 to the salaries of all teacher classifications.

Robust benefits. The County benefits package assists staff in maintaining health and financial security. Medical, dental, vision and life insurance options are available to County employees. Medical plan deductibles start at no additional cost to the employee. Additional benefits apply to Head Start staff including paid leave (vacation, personal holiday, administrative, sick leave), paid federal holidays, overtime pay and compensatory time, bilingual pay differential, deferred compensation, health care spending account, career development training reimbursement, professional development reimbursement, and commuter benefit program. The County also offers a defined benefit retirement plan which provides a fixed, pre-established benefit at retirement based on years of service and highest salary. For instance, an employee with a 20 years of services, and a maximum annual salary of \$100,000 will earn \$40,000 per year in retirement. The retirement plan supports financial security with inflation protection, survivorship benefits, and disability benefits. Additionally, the County Employee Assistance Program offers employees and their families, at no cost, a variety of resources, tools and confidential services including counseling, life coaching, digital emotional wellbeing, financial wellness, legal services, and discounts on products and services.

Marketing campaign. The County has developed a multifaceted marketing campaign that includes increased advertising of career opportunities on social media platforms, online job boards/sites, and local community periodicals. Advertisements highlight benefits of a career with the County's Head Start program including the hiring bonus. The County is mobilizing community-based organizations, sister-departments within the County, and Head Start families to expand advertising efforts.

Expedited hiring process. As stated in Section 3, the County designed and implemented a process by which applicants can complete an on-site interview during hiring fairs at locations

conveniently located within the community. These hiring events increase visibility of careers in the area of supporting healthy development of young children. Since October 2023, two hiring fairs at Contra Costa College and the Brentwood Library have included application and interview options.

ECE career development. The County's teacher career ladder begins with the Teacher Assistant Trainee work-study program, a crucial recruitment incentive. Work-study participants receive financial assistance for books and tuition, and support (e.g. tutoring for Dual Language Learners) with completing core courses to obtain permitting. Since 2018, 17 individuals have completed the TAT program. Additionally, amid the ECE workforce shortage and aligning with the proposed Head Start rule change to stabilize the workforce through increased compensation, the County proposes to create a flex-promote teaching series to provides all teachers the opportunity to achieve the highest salary. Historically, the governing body approves and funds a specific number of Teacher, Assistant Teacher, and Master Teacher positions, with Master Teachers having the highest level of qualifications and earning the highest salary. Existing teachers work to achieve the qualifications for Master Teacher but may wait for short or long periods until there is a vacancy in the classification. The County will negotiate with labor to convert these three existing classifications to a new flex-promote series which provides the opportunity for *all* teachers who achieve the minimum qualifications for Master Teacher (AA or BA in ECE or related, 2 years ECE teacher experience, and Master Teacher Permit from CA Commission on Teacher Credentialing) to flex promote into the Master Teacher classification. This innovation ensures that the highest paying classification, Master Teacher, is not limited to a small number of approved positions but attainable to any qualified teacher.

*Staff retention.* To support staff retention, the County recently offered bonuses, provides robust training and professional growth opportunities, and prioritizes wellness supports. These retention strategies foster a confident, competent, engaged, and productive team. According to the County HS/EHS Program 2022 Workforce Satisfaction Survey, 92% of respondents felt that the work they do contributes to the fulfillment of the agency's mission and 96% felt they create a positive working environment for colleagues and clients.

Retention bonuses. In FY23/24, the governing body approved two \$6,000 retention bonuses paid at two six-month intervals. In November, 146 teachers and site supervisors received the first bonus of \$6,000 or the applicable percentage for part-time staff for a total of \$790,815. The second bonus will be paid in July, 2024. As noted above, the County proposes to permanently add this \$12,000 to teacher salaries in FY24/25.

Professional growth. To support ongoing professional advancement, the County develops an annual training plan informed by the community assessment, self-assessment, Performance Indicator Report (PIR), on-going monitoring, federal and state reviews, individual staff annual performance goals, and staff surveys. In total, it meets the requirements of California's Community Care Licensing, Department of Education, and Department of Social Services, and Office of Head Start (45 CFR 1302.92). The annual training budget supports the implementation of the training plan which includes 1) position-specific new employee orientation; 2) ongoing *Creative Curriculum* training informed by curriculum fidelity monitoring and teacher surveys; 3) ongoing coaching and technical assistance delivered by education managers and the quality monitoring unit; 4) off-site training sponsored by other agencies; 5) monthly early closure days for just-in-time training such as running assessment reports for individual children, small caregiver groups, and entire classrooms; and 6) one-on-one intensive coaching based on CLASS



monitoring. Trainings include assessments learning and evaluations which supports continuous quality improvement of the training plan. In 2023, the County delivered 10 trainings.

Wellness supports. The County Wellness Initiative includes various programs to teach skills in stress management, maintain supportive environments for staff and families, improve the overall morale of the agency, and create a trauma-informed community. A multi-disciplinary team called SIA (Simple, Impactful, Actionable) develops and implements strategies to promote wellness and support individuals in Psychological First Aid. These strategies include, for instance, providing weighted blankets and white noise machines. These efforts are in addition to the Employee Assistance Program, one of the many benefits for County employees. Yearlong workshops on *Reflective Supervision*, (12 sessions in 2023) focus on enhancing staff's ability to provide empathetic, nonjudgmental environments in which honesty and a sense of safe space can strengthen trust and foster trauma-responsive efforts, are well-received across classifications. Staff also received training in *Culturally Responsive Self-Care Practices for Early Childhood Educators*, in addition to a *Mindfulness Training for Children and Adults* in May 2023 which provides strategies and tools recognizing that self-care is not one size fits all. This deep commitment to creating and maintaining staff wellness fosters the same environment for the infants, toddlers, and families we serve, resulting in more healing environments and trauma-informed systems.

**Strategies to understand and use information on wages for similar positions**

The County utilized two reports to ensure that County teacher salaries align with local norms: the 2022 Head Start California Salary Study and the 2024 UC Berkeley Study First 5 Contra Costa County study of community-wide early childhood care and education and wages (Table 6, page 95). First, the table illustrates that the FY24/25 proposed teacher salaries are 38%

higher than FY23/24 at the lowest step and 25% higher at the top step. Second, the table illustrates that the County teacher salaries are higher than the regional averages.

**ustainable mechanism for providing competitive compensation to staff**

To maintain competitive salaries and to multiply the number of slots, the County partners with the California Department of Education (CDE) and the California Department of Social Services (CDSS), participates in the Quality Rating Improvement Scale, benefits from low facility costs, and contributes County funding.

*Partnership with CDE/CDSS.* The County has received state funding for early childhood education since 1981. Since 2021-2022, CDE/CDSS funding increases have totaled 45%. The eligibility standard for CDE/CDSS services is 85% of the state median income which is, for example, \$83,336 annually for an infant/toddler in a family of three in 2024. However, CDE/CDSS accepts the Head Start income eligibility standard of 130% of the federal poverty level. Layering Head Start and CDE/CDSS funding increases the number of slots for the lowest-income families. In this grant application budget for FY24/25, Head Start funding (\$20,110,998) supports 651 slots, CDE/CDSS funding (\$5,022,747) supports 163 slots through the required 20% match of local funds, and the County overmatches an additional \$11,938,653 in CDE/CDSS funding representing an 32% additional revenue and an additional 387 slots.

*Facility costs.* The County realizes substantial operational cost saving as four of the facilities are county-owned with no mortgage and 10 are leased from other governments for an average monthly lease of \$3,355 per facility.

*County funding.* Contra Costa County benefits from a local, 20-year, ½ cent sales tax which produced \$238 million in county revenue in FY22/23. A Community Advisory Board (CAB) develops and maintains priorities for this funding. Increasing funding for early childhood

education salaries is a standing priority. Additionally, the CAB maintains a high priority for expanding mental health services. In this application, the County overmatch funding includes \$1,000,000 from this local fund to support the increased mental health services and increased salaries.

**Career development opportunities for professionals, paraprofessionals, and other staff**

The County provides ongoing training and professional development to support staff in fulfilling their roles and responsibilities and to ensure high-quality services (45 CFR 1302.91(a)). The County's training and technical assistance plan is updated annually to ensure resources are supporting these goals, accessing internal and external training opportunities such as Head Start conferences.

The County also provides ongoing professional development and technical assistance to maintain effective teaching practices. Annual curriculum refresher and bimonthly early closure training reinforce understanding and implementation of curriculum components, effective teaching strategies, health & safety, DRDP assessments, family engagement, and comprehensive services. Additionally, the County conducts a staff survey to identify training topics of interest and need. Supervisors work with their teachers to develop and support the achievement of individualized professional goals through the annual performance review process.

The County has designed and fully implemented a comprehensive career ladder for early educators. Teacher Assistant Trainees are supported in attainment of qualifications to become a permitted Associate Teacher. Through individualized professional development planning, staff have advancement opportunities including placement in Teacher, Master Teacher and three levels of Site Supervisor classifications. With each individual employee, Site Supervisors collaboratively complete a Professional Development Plan that connects the employee's

professional goals to training and educational opportunities that support attainment of such goals. Each plan specifically outlines the high-quality activities that will improve the knowledge and skills of staff as relevant to their roles and functions in a manner that will improve delivery of program services to enrolled children and families. Supervisors ensure that plans are regularly evaluated for impact on teacher and staff effectiveness.

Likewise, the County develops an annual schedule of training specific to the responsibilities of the family services staff. Staff engage in monthly meetings featuring presentations and training from visiting experts and the County's health, nutrition, disabilities/mental health, and parent, family, and community engagement managers. The family services staff is supported in their career development and internal advancement opportunities as entry level clerks may gain experience to be promoted to a senior level and apply for a family services assistant manager and/or manager position.

**Plan to evaluate job applicants.**

The County Head Start Program is a Bureau within the Employment and Human Services Department (EHSD), within the Contra Costa County (CCC) government. Job descriptions, which include required qualifications and competencies per 45 CFR 1302.91, are maintained by CCC Human Resources and are evaluated and updated as necessary every three years, or more often if needed. Vacancies are identified by the County Head Start leadership team. The hiring process is collaboratively coordinated by the Head Start leadership team, EHSD Personnel and CCC Human Resources. Hiring steps include posting and advertising a position, collecting applications, evaluating applicants, interviewing and scoring applicants, and making job offers. Related specifically to applicant evaluation, CCC Human Resources evaluates minimum qualifications and refers minimally qualified applications to the County Head Start. The Head

Start hiring managers review applicant experience and education, facilitate interviews and scoring, and identify applicants most capable of providing compliant and high-quality services. EHSD Personnel extends the offer of employment and manages all hiring activities. EHSD Personnel also conducts the initial New Employee Orientation. The Head Start program provides additional orientation content based on a specific orientation checklist for each Head Start classification. Existing staff considered for promotional opportunities undergo the same process, in addition to requiring a satisfactory annual performance evaluation.

## **5. PLANNING AND IMPLEMENTATION**

### **State and local licensing requirements for each proposed age group.**

The 12 County directly-operated centers and the 6 partner centers are all fully licensed for each age group served.

### **Appropriate facilities to meet requirements.**

As the current Head Start recipient, the County already maintains facilities that provide HS/EHS services as proposed in this application. All centers are currently fully licensed for each age group served.

The County proposes start-up funding of \$1,308,372 to renovate the foundation of two buildings at the George Miller Head Start Center in Concord, of which one is administrative and one holds classrooms with 20 infant-toddler slots. A 2021 appraisal indicated foundation and structural damage from soil conditions (e.g. cracking in floor tiles and separating wall panels), requiring foundation work to restore the structural integrity. This project can be completed with no disruption in services as a separate facility exists that can be temporarily licensed during construction.

Implementing this restoration requires 15 months including the following activities. 1) Obtain pre-approval, including for the 1303 application and receiving ACF approval (4 months); 2) Plan the logistics for the construction including developing architectural specs, securing a contractor, and ensuring no disruptions (5 months); 3) Complete the construction. (6 months); 4) Obtain all clearances including Head Start post-construction checklist.

**Plans for alternative service provision during start-up, until facilities are fully operational**

There will be no disruption in services to the currently 815 enrolled children and families. The County operates existing, fully-licensed facilities for the age groups as proposed in this application.

**Plan to acquire facilities in accordance with federal Head Start regulations**

The County owns or rents all necessary facilities for the proposed directly-operated services. The County partners already own or rent all necessary facilities for the proposed partner services. No plans for alternative service provision during start-up will be required.

**Recruitment, hiring, and training of qualified staff to support HS/EHS programming**

The County and partners currently employ teachers, site supervisors, family support teams, and all additional support personnel who are fully-qualified, trained, and currently providing EHS/HS programming.

This proposal includes the following new positions which will need to be filled: 8 teachers, 3 mental health professionals, 12 family services staff, 1 fiscal analyst, and 12 custodians. Classifications for all of these positions exist. Upon governing body acceptance of new funding, the Head Start leadership will initiate the recruitment and hiring process. Hiring these new positions does not delay the start of services. The existing program meets all Head Start Act requirements and Performance Standards. Mental Health consultation through the Early

Childhood Mental Health program will continue without interruption. The three new mental health professionals will expand these existing services.

## **6. ORGANIZATIONAL CAPACITY AND GOVERNANCE**

### **Senior executive managers and governing board management capacity**

*Governing Board and Executive Director.* The Contra Costa County Board of Supervisors, an elected body comprised of five members, governs the County Head Start program. The governing body meets the composition requirements as members who oversee a public entity and are selected to their positions by public election under Section 642(c)(1)(b)(v) of the Head Start Act. The governing body has an average of 14 years governing Head Start with a range from 26 years for Supervisor John Gioia to 2 years for the newest member, Supervisor Ken Carlson.

The governing body is supported by the County Administrator, County Counsel, the County Finance Officer, the Auditor Controller's Office, the Head Start Executive Director, and the full Head Start team. Marla Stuart, the County Head Start Executive Director since 2022, has 35 years of progressively larger responsibility in administering complex social services programs. Dr. Stuart holds a PhD in Social Welfare and a Master's degree in social work. As the Director of the county Employment and Human Services Department, Dr. Stuart leads five program bureaus that collectively build brighter futures across the lifespan. These include the Community Services Bureau which administers the Head Start Program; the Children and Family Services Bureau with the Child Protective Services hotline, foster care, independent living services, and adoption; the Workforce Services Bureau with SNAP, TANF, and Medicaid; the Workforce Development Board working to enhance workforce capacity including early childhood education workforce; and the Aging and Adult Services Bureau which includes adult

protective services and in-home supportive services. Embedded within this Department, the Head Start program directly accesses these services for children and families, as well as the full range of services provided by all County departments, as illustrated in Image 1, page 83.

*Policy Council and parents in decision making.* The 28 member Policy Council (1 member for every 60 children) includes parent-elected community and parent representatives with at least 51% of members who are parents or guardians of currently enrolled children. All members stand for reelection annually. Through an annual in-depth orientation and ongoing training opportunities, the County management team ensures Policy Council members have knowledge necessary to perform their duties and capacity to engage in decision-making. The Policy Council meets monthly and standing and ad hoc subcommittees meet at the necessary frequency to review information about provide input, and report to the full Policy Council regarding all aspects of the program. The monthly report to the Policy Council includes program operations, federal communications, fiscal updates, monitoring data, program highlights and events, attendance and enrollment, and nutrition information. The Policy Council also receives intermittent updates including, for example, semi-annual program monitoring reports, self-assessment, and community assessment. Policy council approvals include all funding opportunities, the County's selection criteria, corrective action plans (if necessary), planning procedures, and all new or revised policies and procedures.

The County's current governance structure will not require any change to meet the Head Start Program Performance Standards.

*Representation of diverse community served.* The governing body encourages programs and actions that promote diversity, equity, inclusion and access. As such, the County Head Start program benefits from strategies at all levels:



Head Start program. The County launched a DEI Community of Practice (CoP) in 2020, in partnership with the Office of Head Start with three goals: 1) to engage in dialogue and deepen understandings related to equity, 2) to strengthen capacity to embed equity into program policies and practices, and 3) to create more equitable, inclusive, culturally, and linguistically responsive environments for children and families. As a result, for example, interview questionnaires have been revised to standardize equitable hiring practices across classifications.

Employment and Human Services Department. The EHSD DEI Core Team develops and executes strategies to improve and secure fair treatment, access, opportunity, and advancement for all EHSD employees and to improve and secure fair treatment, access, opportunity, and support for all clients. Examples include the following. EHSD ensures language access by providing the Language Line phone translation service to all employees, including Head Start staff. In 2023, through Language Line, EHSD translated 64,236 conversations in 67 languages. EHSD also ensures language and visual access to all webpages by enabling translation of main pages from English into 10 languages. “Page Assist” provides personalization options to enhance users’ visual experience (colors, fonts, font size, cursor size, text spacing contrast, formatting, etc.). In 2023, the DEI Core Team hosted a Hair Care Drive collecting over 2,100 hair care and personal hygiene products for African American (and other) foster youth, published mixed media infographics celebrating DEI months, sponsored artwork and poetry contests, and established a DEI staff library.

Contra Costa County: The Board of Supervisor deeply values diverse community input and, as such, sponsors 72 Board appointment commissions. Through these commissions, Board members continually hear about community needs. Twelve commissions specifically help inform and shape the Board’s considerations when they serve as the Head Start governing body. They

include African American Holistic Wellness Hub Steering Committee, Alcohol and Other Drugs Advisory Board, Commission for Women and Girls, Council on Homelessness, Developmental Disabilities Council, Economic Opportunity Council (hosted by EHSD), Family and Children's Trust Committee (hosted by EHSD), First 5, Housing Authority, Juvenile Justice Coordinating Council, Local Planning and Advisory Council for Early Care and Education, Workforce Development Board (hosted by EHSD). As the County Board of Supervisors, the Head Start governing body holds vast knowledge about and is deeply committed to improving the economic and social conditions experienced by families eligible for Head Start services.

In 2023, and after extensive community input, the County opened a new department, the Office of Racial Equity and Social Justice. A Committee of the Board of Supervisors, the Equity Committee, supports this office. This Board Committee is comprised of Supervisor Federal Glover, the chair of the Head Start governing body, and Supervisor John Gioia, the chair of the Head Start Committee. As such, the work of this Equity Committee directly educates and informs the Head Start governing body.

*Monitor overall agency priorities and operational systems.* To provide effective oversight of program operations and accountability for federal funds, each month the governing body receives a report, provides direction, and approves actions related to enrollment, attendance, meals, expenditures (including credit cards), contracts, applications, monitoring reports, audits, communications from the Office of Head Start, and current events. Additionally, these monthly reports include annual information including enrollment priorities, the Annual Self-Assessment, updates on program goals and objectives, school readiness goals and updates, the annual report, and the community assessment, In sum, the monthly reports to and actions by the governing body included all elements required in the Head Start Act 642 (c)(E)(iv). As part

of their monitoring function, governing body members especially enjoy visiting Head Start centers and engaging with children, families, and staff.

Monthly reports are reviewed and vetted by the Head Start Executive Director, the County Administrators Office, and other County entities as necessary (e.g. County Counsel reviews contracts). Reports are provided to governing body members and posted publicly 96 hours before a meeting to ensure that governing body members and the public have adequate time to review reports and formulate questions.

In submitting this grant application, the governing body established eight priorities that align with the five Office of Head Start priorities (Table 7, page 96).

Related to **child health and safety**, the governing body prioritizes the full and complete implementation of the daily, weekly, monthly, and quarterly monitoring program (Table 5, page 92) to ensure the highest level of safety for all children, staff, and visitors in directly-operated and partner sites and services.

Related to **partnerships with state systems**, the governing body prioritizes utilizing state funding to extend hours from a maximum of 10.5 per day to 12 per day. Additionally, the governing body prioritizes maximizing the Head Start funding contribution by providing matching state and local funding for 32% above the 20% minimum match amount as described above.

Related to **reaching children and families** of greatest need, the governing body prioritizes distribution slots equitably based on economic need.

Related to **investing in the workforce**, the governing body proposes to increase County teacher salaries by \$12,000 (in addition to the 20% increase for all employees from FY22/23 through FY25/26), and to increase partner rates by 24% so they may also increase their salaries.

Related to **quality environments**, and in response to community input, the governing body is providing an additional \$1,000,000 in local funds to expand County Head Start mental health services by creating a new team of three employees to support and train family services and teaching staff in directly-operated and partner services.

*Community assessments, annual self-assessments, and ongoing monitoring.* The County annually conducts (via contract) a community assessment which includes comprehensive community data, and which informs decision making and drives priorities and program goals. Information from the 2023-2025 community assessment supports this application. Additionally, the annual self-assessment includes a) input from management, the governing body and the Policy Council, and b) data and file reviews, site observations, and interviews. The self-assessment provides an opportunity to monitor progress towards achieving program goals, compliance with performance standards, and effectiveness across management systems. The 2023 Self-Assessment is included in the Second File, page 13. As previously described, the County's ongoing monitoring system (Table 5, page 92) produces regular aggregate reports which are analyzed by the management team to identify trends and to take necessary corrective actions, and then presented to the governing body. These monthly reports enable the governing body to understand programmatic needs and outcomes, and to provide effective oversight.

**The ability to plan, constitute, train the governing body in compliance with regulations**

The governing body meets governing body composition requirements as members who oversee a public entity and are selected to their positions with the public entity by public election under Section 642(c)(1)(b)(v) of the Head Start Act. No changes are needed to meet the requirements of the Head Start Act.

Upon election of a new member of the governing body, the Head Start Executive Director schedules an initial HS governance training within 180 days of appointment 45CFR1302.12(m)(3). The Executive Director trained the governing body's newest member, Supervisor Ken Carlson, 11 days after his appointment. The governing body receives annual and other training as necessary regarding their responsibilities as illustrated in the Head Start Management Wheel. This includes but is not limited to management procedures and functions; federal laws and regulatory compliance; the Head Start philosophy and the role of parents and the Policy Council in shared governance; and communication and collaboration between the governing board, the Policy Council and program management. The most recent governance training occurred March 19, 2024, and utilized *Head Start A to Z Guiding Principles* as the foundation for training materials and including all eligibility training elements under 45 CFR 1302.12(m).

**Systems for planning, communication, recordkeeping, self-assessment, monitoring**

The County planning calendar provides a road map and timeline for program planning, communication, recordkeeping, and self-assessment. The County monitoring plan drives monitoring activities (Table 5, page 92).

*Program Planning.* The Head Start management team ensures on-going planning at varying levels including meetings, staff summits, and management retreats. The planning calendar includes methods to ensure consultation with the governing body, the Policy Council, and program staff. The management team updates the planning calendar annually and edits through the year as necessary.

*Communication.* The County communication policy emphasizes courteous and confidential communication. The County employs several methods of communication such as

staff summits; trainings; regularly scheduled meetings; daily interactions; staff newsletters; internal memos; published policies and procedures; regular and ad hoc reports; and e-mail. External communications occur at community-based collaborations, meetings, and discussion groups.

*Recordkeeping.* The County's recordkeeping systems starts with the management information system, CLOUDS (Child Location, Observation, and Utilization Data System). Developed for the County under the direction of County staff, CLOUDS uses cloud computing to provide real-time information regarding all program systems and services and automates most processes such as enrollment, attendance, meal counts, head counts, monitoring and assessments. Real-time data entry occurs at any location using mobile technology, enhancing immediate data capture abilities within classrooms. As one example, teachers in every classroom, including both directly-operated and partner centers, use iPads to complete a daily monitoring tool immediately upon arrival to ensure the classroom environment is safe and ready for children. Any concerns are flagged as needing attention. Management reviews these assessments by mid-morning and facilitates remediation where necessary. As another example, parents record the arrival of their child on an iPad which changes the color of the border around the child's picture, creating an easily visible indicator for the teachers of which children are present. As a third example, management staff complete the quarterly Child Transition and Safety Monitoring Tool, entering their findings in real time on an iPad or phone resulting in an immediate report for action.

The County Head Start program exists within the Contra Costa County network, within which Head Start maintains secure storage of all emails and electronic files according to program guidelines, including all documentation within CLOUDS, maintaining confidentiality and HIPAA compliance, and meeting retention requirements. Training materials, guidelines, policies

and procedures are available to staff at all locations through this secure network. Staff are required to utilize county devices to ensure the security of information storage and safe communication of information. Additionally, all staff are required to complete annual cybersecurity and anti-phishing training. Compliance is monitored by EHSD staff development and reported to EHSD Executive Committee. The County maintains paper files in locked cabinets with sign-out protocols.

*Self-assessment.* The County conducts the annual self-assessment is conducted in partnership with childcare partners, parents, members of the governing body, and community representatives. In 2023, the County focused on of Classroom Assessment Scoring System (CLASS), program management and governance, quality education and child development program services, quality family and community engagement services, classroom health and safety practices, and fiscal oversight. The self-assessment allowed the County to celebrate significant improvements and continue discussions about further opportunities for improvement. There were no areas of concern requiring corrective action. See the Second File, page 13 for the 2023 Self Assessment.

*Monitoring.* The ongoing monitoring process, accompanied by handbooks and training to ensure appropriate and accurate implementation (Table 5 on page 92), is comprehensive in scope and overseen by a compliance analyst. Designated staff at all operational levels including teachers, site supervisors, family services staff, managers, senior management, the Head Start Director, the Policy Council members and members of the governing body participate in ongoing monitoring processes based on their expertise and function. and. In 2023, the County four monitoring trainings attended by 21 partner staff and 173 County staff. Any individual

conducting a monitoring task communicates concerns to the appropriate staff responsible and all staff involved in a situation document corrective action taken in CLOUDS until closed.

This comprehensive, coordinated, ongoing monitoring system provides a sophisticated method to examine service delivery at directly-operated and partnership locations that includes health and safety, mental health and disabilities services, family services, enrollment processes, education and early childhood development, child and family outcomes, human resources, and fiscal monitoring. CLOUDS provides real-time data capture and tracking of monitoring findings to closure. Aggregate reports identify issues to improve areas performing well. Bi-monthly monitoring meetings inclusive of partner agencies review recent monitoring data and discuss strengths and areas for improvement. The system allows program managers to note trends and isolated incidences and assists them in conducting root cause analysis and developing plans for improvement as appropriate in a timely fashion. Senior managers receive roll-up reports that verify corrections are made. The Executive Director, the Policy Council, and the governing body receive summaries of strengths and weaknesses, information about corrections, and provide feedback. This County ground-up and top-down monitoring program provides the foundation for the safe and excellent Head Start program administered by Contra Costa County.

## **7. BUDGET AND BUDGET JUSTIFICATION**

### **1. Head Start Budget Narrative**

The County proposes a Head Start (HS) budget of \$10,100,529. This budget supports direct costs of \$9,236,714, indirect costs of \$716,102 computed at 19% of salaries and T/TA costs of \$147,713. Budgeted expenditures reflect the program and priorities described above. The budget includes all required categories.

#### **(6a) Personnel**

**\$3,315,898**

Personnel costs include increased salaries for all staff of 5%, and an additional increase in salaries for teachers and site supervisors of \$12,000. Costs also include new mental health staff.



Personnel costs are computed based on the twelve months budgeted salaries and projected cost of vacant positions. Total budgeted salaries are based on the percentage of time worked in the Head Start program.

**1. Program Managers** **\$561,526**

All Program Managers or Family Services staff will devote 10% of their time to the HS Program with total salaries at \$450,431. This consists of twenty-four (24) Family Services Managers (FSM) with combined salaries at \$443,773, and eight (8) Family Services Assistant Managers (FSAM) with total salaries at \$117,753. FSMs and FSAMs manage a program of family services that includes the delivery of health, mental health, disabilities, nutrition, education, parent involvement, or social services to federal program eligible families and their children 3–5 years of age in childcare programs, and low-income residents in the HS Program.

**2. Child Site Supervisors** **\$249,331**

Fifteen (15) Site Supervisors with salaries at \$249,331 will devote 24% of their time to the HS Program. They provide the day-to-day administration of general childcare, infant/toddler care and/or pre-school services, and perform other related work as required.

**3. Teachers** **\$751,780**

To support recruitment and retention, teachers will receive higher salaries. This includes Master Teachers, Teachers, Associate Teachers, and Teacher Assistant Trainees. The 141 teachers devote on average 11% of their time to the HS program. Other teaching staff salaries in collaboration with the State are charged to the State and allocated to the HS Program under “Other - Family Services with State Child Development Program”.

**4. Home Educators** **\$-0**

This is a contract service, and costs are included in contracts.

**5. Health Services Personnel** **\$72,165**

Three mental health positions will provide mental health support to teachers, staff, and in classrooms. These positions will devote on average 24% of their time to the HS program. One (1) Mental Health Clinical Supervisor with salaries of \$24,055 and two (2) Mental Health Clinical Specialists with salaries of \$48,110.

**6. Nutrition Services Personnel** **\$79,525**

Nutrition Services Personnel will devote 18% of their time to the HS program. This includes two (2) Child Nutrition Cook with combined salaries at \$15,920, four (4) Child Nutrition Food Services Transporter with combined salaries at \$27,707, three (3) Child Nutrition Assistants with combined salaries at \$22,724 and one (1) Child Nutrition Food Operation Supervisor with salary at \$13,175. Also included under the Child Nutrition Program is a Nutritionist. The Nutritionist must possess and maintain throughout the duration of employment current registration as a Dietitian issued by the Commission on Dietetic Registration/Academy of Nutrition and Dietetics. Responsibilities includes overseeing and addressing nutritional issues such as abnormal weight and/or hemoglobin

and food allergies, reviewing menus to ensure compliance with certain USDA and Child and Adult Care Food Program (CACFP) guidelines, modifying meals for children with special dietary needs, and conducting CACFP facility reviews.

**7. Head Start Director** **\$16,059**

The Head Start Director will devote approximately 11% of time to the Head start program, including overall leadership guidance and activities (e.g. HS conferences/trainings, Policy Council activities). The Director's total salary of \$168,208 for FY2024-25 will not exceed the 2023 Executive Level II threshold of \$212,100 per year.

**8. Managers** **\$198,055**

Included in this budget is the Head Start Deputy Director who will devote 11% of time to the Head start program with a salary of \$15,748, as well as three (3) Division Managers with total salaries in the amount of \$124,873 will devote 33% of their time to the HS Program. One (1) Division Manager is responsible for the overall operations of the grantee's Children and Family Services which includes planning and implementing quality programs. Also included are four (4) Assistant Directors with total salaries of \$57,433 who will devote approximately 19% of time to Head Start. The Assistant Directors facilitate the: 1) Finance Committee, compliance/licensing, nutrition, purchasing and contracts; 2) Communications Committee, Head start Family Childcare Providers, Facilities and Quality Initiative, 3) Policy Council, Recruitment and Enrollment, Grants/Funding, and Family Services, including Disabilities and Mental Health, (4) Staff and Training Committees, Personnel, Partnerships, Home-based, and Training, and (5) Program Monitoring.

**9. Clerical Personnel** **\$802,021**

Included in this category are Clerical staff who devote on average 32% of time to Head Start. There are twenty-eight (28) Senior Clerks with total salaries at \$390,320, eighteen (18) Intermediate Clerks with combined salaries at \$292,967, one (1) Secretary Advanced Level with salary at \$9,824, three (3) Clerks Experienced Level with total salaries at \$46,338, one (1) Clerk-Specialist level with salary at \$32,163 and one (1) Clerk-Senior level with salary at \$30,409.

**10. Fiscal Personnel** **\$62,711**

Fiscal staff will devote 11% of their time to Head Start. The Fiscal Officer has a salary of \$11,702. Three (3) Accountant III at \$28,685, one (1) Accountant II at \$7,913, one (1) Accountant I at \$6,999 and one (1) Accounting Technician at \$7,412 to the HS Program.

**11. Other Administrative Personnel** **\$331,849**

The positions included in this Section are staff that devote approximately 30% of their time to the HS Program. This consists of eight (8) Administrative Services Assistant IIIs with total salaries of \$212,876, and two (2) Administrative Assistant Services II with total salaries at \$84,187. The role of the ASA series is program administrators responsible for administrative support activities in the HS Program. Also included in this category is one (1) Sr. Business Systems Analyst with salaries at \$12,711, one (1)

Business Systems Analyst with salaries at \$10,515, and two (2) Community Services Building Services Worker with combined salaries at \$11,562. Percentages are based on estimates of time spent with activities that can be directly related to the HS Program.

**12. Cleaning Staff** **\$190,876**

Specialty cleaning staff will clean classrooms to the required specifications. Cleaning staff will devote on average 55% of their time cleaning HS classrooms. Two (2) Institutional Service Worker leads with salaries at \$38,548 and ten (10) Institutional Service Workers with salaries at \$152,328.

**(6b) Fringe Benefits** **\$2,406,005**

The County has a defined benefit retirement plan which provides a fixed, pre-established benefit for employees at retirement. The amount of the benefit is calculated by factors such as salary and a member’s retirement service credit. Defined benefit pensions are based on a formula set by law, in this case the *County Employees Retirement Law of 1937 (CERL or 1937 Act)*, and the *California Public Employees’ Pension Reform Act of 2013 (PEPRA)*. PEPRA became effective on January 1, 2013. This law made substantial changes in public employee benefits, both for new and for existing retirement system members. These changes include new benefit tiers for members entering public retirement systems on or after January 1, 2013. Employer contribution rates and every other aspect of the administration of retirement benefits are determined by CCCERA, the board of retirement, and the actuaries that provide services to the board of retirement. The County’s other fringes include health, dental and life insurance, State Unemployment Insurance (SUI), Workers Compensation and Deferred Compensation, etc.

**Regular Personnel Fringe Benefit** **2,406,005**

Percentage of fringe benefits based on the County Budget is as follows:

<b>Fringe Benefits</b>	<b>%</b>	<b>Regular HS Staff</b>
Social Security (FICA), State	11.37%	\$414,489
Disability, Unemployment (FUTA)	0.17%	6,197
Stat and Workers Comp	1.41%	51,401
Health/Dental/Life Insurance	26.23%	956,206
Retirement	25.20%	918,656
Other (Supplemental)	1.62%	59,056
<b>Total Fringe Benefits</b>	<b>66%</b>	<b>\$2,406,005</b>

**(6c) Travel** **\$19,153**

This estimate is for airline expenses included in the Training and Technical Assistance (T/TA) Budget.

**(6d) Equipment** **\$-0-**

**(6e) Supplies** **\$190,114**

Included are office supplies, children and family services supplies, transition supplies for children transitioning to kindergarten, computer supplies to support the HS classroom/site workstations/computers, health/safety, mental health/disabilities, and household supplies. The budget also includes allowable employee health and welfare costs for the improvement of working conditions, employer-employee relations, employee health, and employee welfare. The County has a Wellness Program for the well-being of its staff, as well as a Peer Recognition Program. Small purchases like pedometers for its “I Walk Challenge” and mugs for its Peer recognition program are budgeted under this category. This budget item is supported under the provision of Uniform Guidance 45 Part § 75.437 Employee health and welfare costs, which states that “Costs incurred in accordance with the non-Federal entity's documented policies for the improvement of working conditions, employer-employee relations, employee health, and employee performance are allowable.”

**(6f) Contractual** **\$1,365,910**

Includes expenses incurred in outsourcing services such as hiring temporary administrative support, contract with LVN Health Consultant, as well as costs for various childcare partners for the implementation of the HS Program.

**1. Administrative Services** **\$-0-**

**2. Health / Disabilities Services** **\$237,892**

A specialized Health Consultant will work with child health and safety, infectious disease prevention and control, disease intervention and management, and tuberculosis testing for parents and staff. The health consultant’s contract is \$78,050 with hourly rate at \$50.00 for 1,561 hours with \$45,485 being charged to HS. A contract will be created for Mental Health Services with an estimated cost of \$192,407 and a contractor to be determined.

**3. Food Services** **\$-0-**

**4. Training and Technical Assistance** **\$190,280**

The provision of T/TA under the HS budget is for One Solution Technology contract charges for the CLOUD System. Total contract for 2024 is \$49,934, 25% of which is charged to the HS budget for six-months. There are contracts for Leadership Trainings (\$98,853), Conferences (19,690) and Family Development Credential (\$21,80.)

Details and description of training and staff development are included under the T/TA budget.

**5. Delegate Agency Costs** **\$0**

Contra Costa County will not utilize a delegate agency.

**6. Other Contracts** **\$937,738**

The County has contracted with various childcare providers so that HS children will receive enhanced services at various contractors’ centers to bring them up to HS Performance Standards adding family services and children/family outcome measures through the HS comprehensive services provided to children under the California State

Preschool Program (CSPP). Higher slot rates will be paid to providers in the new proposal to allow them to invest in their programs.

**(6g) Construction** **\$ - 0 -**

**(6h) Other** **\$1,939,634**

**1. Building Occupancy Costs** **\$278,731**

Site rents are related to HS share of rent costs at the Grantee’s Childcare Sites, partially determined by Contra Costa County’s Public Works Department.

**2. Utilities and Telephone** **\$84,328**

Projected costs are related to HS’s share of utility and phone costs with the HS Program, based on the available HS slots at the sites.

**3. Building & Child Liability Insurance** **\$2,847**

Building insurance & child liability insurance is determined by the County’s Risk Management Department.

**4. Building Maintenance/Repair & Other Occupancy** **\$328,946**

Buildings are properly maintained and/or repaired to ensure the health and safety of HS children and costs are partially determined by the County’s Public Works Department.

**5. Local Travel** **\$2,095**

This is to reimburse HS staff for mileage incurred during work related travel, estimated at 3,150 miles in 2023 at 65.5 cents per mile.

**6. Nutrition Services** **\$260,836**

Child Nutrition costs to cover children’s meals within the HS Program.

*USDA and CACFP reimbursements* *(\$95,901)*

**The Child and Adult Care Food Program (CACFP) is a federal program that provides reimbursements for nutritious meals and snacks** to eligible children and adults who are enrolled for care at participating childcare centers, day care homes, and adult day care centers.

**7. Parent Services** **\$608**

These are costs associated with Policy Council parents' activities at sites, PC/BOS luncheon and appreciation meetings including venue and food costs (\$521), as well as childcare and mileage reimbursement (\$87). This was presented and approved by the Policy Council Parent Services Committee.

**8. Accounting and Legal Services** **\$50,967**

Accounting and legal services are determined by the Auditor Controller’s Office and the Department of Information Technology.

**9. Publications/Advertising/Printing** **\$18,553**

This covers outreach printing costs (\$1,665) as well as job announcements, newspaper/website ads, digital marketing for teaching staff (\$16,888) to recruit new staff for the HS Program using new media such as buses.

**10. Training and Staff Development** **\$94,275**

This budget includes Family, Community and Parent Engagement (\$27,750), Mandatory Trainings (\$20,208) and Agency Memberships (\$46,318). Investing in staff and teacher training is a priority in this budget.

**11. Other** **\$913,348**

Site Security Guards (\$186,674): These are HS's share of security guard services at sites that are considered at risk and to ensure the safety of our children and staff, including the increased need for security at Brookside.

Cleaning Services (\$214,091): These are costs for specialty cleaning supplies for cleaning staff to clean and sanitize HS classrooms and other areas.

Vehicle Operating/Maintenance and Repair (\$89,492): These are HS's estimated cost associated with the county vehicles, as determined by the County's Public Works Department.

Equipment Maintenance, Repair & Rental (\$28,745): These are HS's share of classroom equipment maintenance and repair costs to make sure that equipment is properly maintained and/or repaired, as determined by the County's Public Works Department.

DHHS-211 Database (\$7,834): This is the HS Program's share of costs related to the 211 database project which houses resources and referral information for hundreds of agencies and programs specializing in health services, mental health, childcare and transportation needs.

Other Operating Expenses (\$122,888): These are other allocated costs such as county administration, Human Resources services, processing of payroll, contracts, purchasing and other County functions.

Family Services with State Child Development Program (\$263,625): The County implemented a layer 2 funding model that provides a unique opportunity to leverage and maximize resources utilizing Child Development funds. This budget line item funds estimated costs in a classroom with this collaboration model in which enrolled children that are served may include an enhanced curriculum, classroom supplies, materials, minor equipment, training and education for teachers, enhanced pay for teachers who meet HS education requirements, increased staffing to meet HS required staff-child ratio and group size requirements, and minor facility renovations or equipment needed to meet HS Performance Standards. These enhancements are paid for by HS that directly benefit HS children but are also expected to benefit other children sharing a classroom or service

environment with enrolled children. This budget represents the total estimated cost of enhanced services for the HS share in this collaborative program.

**(6i) Total Direct Charges (Summary of lines (6a) – (6h))** **\$9,236,714**

**(6j) Indirect Costs** **\$716,102**

Indirect Cost rate is calculated at 19% of direct salaries and wages (see File 2, page 24)

<b>(6k) TOTAL FEDERAL BUDGET (PA 22)</b>	<b>\$9,952,816</b>
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**TRAINING AND TECHNICAL ASSISTANCE BUDGET (T/TA - PA 20)** **\$147,713**

Listed in the Training and Technical Assistance (T/TA) document is the County’s itemized trainings, T/TA priorities, strategies and outcomes expected for the year. Training costs are budgeted for Mandatory Trainings, Conferences and Training by Content Area. Detailed description, purpose and number of staff attending the training is budgeted as much as practicable. However, if the specific training may not materialize due to any unforeseen events, the County has the flexibility to substitute the training/conference to similar or comparative training that is HS program-related in content and purpose. Budgeted training expenses include registration fees, air travel for out-of-state conferences, hotel costs, meal allowances, mileage, shuttle expenses, toll fees, training materials and other miscellaneous expenses related to staff development including food and venue.

**(6f) Contractual** **\$12,521**

4. Training and Technical Assistance **\$12,521**

T/TA includes the HS program’s share in various training providers, coaches and consultants for Family Development Credentials (\$12,521).

**(6h) Other** **\$135,192**

7. Parent Services **\$16,650**

These costs include parent conference registration fees and training (including food and venue costs), Policy Council orientation and parent trainings, materials and translation costs (including food and venue costs), and Policy Council meetings (including food and venue costs). These were presented and approved by the Policy Council.

10. Training or Staff Development **\$118,542**

Training costs are budgeted for mandatory training, conferences, and training by content area. The T/TA budget addresses the following training topics on Mental Health, Disabilities, Health, and Safety; Education, Curriculum and Home Based for Partners; Parent, Family and Community Engagement; Nutrition and Food Services; Program Regulations and Federal, State and Local Initiatives; Management Systems; Information technology and Business Systems; Continuing Education Program and Staff Development; and Mandatory trainings. The training needs of HS staff and parents will

be met by workshops, conferences, and various professional leadership training. Details of these training categories are included in the schedule of the T/TA budget.

<b>(6k) TOTAL T and T/A BUDGET (PA 20)</b>	<b>\$147,713</b>
<b>(6k) TOTAL FEDERAL BUDGET (PA 22 and PA 20)</b>	<b>\$10,100,529</b>
<b>TOTAL NON-FEDERAL BUDGET</b>	<b>\$2,525,132</b>

For the twelve-months budget, Non-federal share or in-kind consist of:

**State Preschool Programs** **\$2,431,892**

This amount is determined by the County’s contract with California Department of Education Preschool Program, for the collaboration portion with the State’s Child Development Program. The State portion of the CSPP contract is \$22,353,205.

**Other – Volunteers (2,775 hours x \$33.60)** **\$93,240**

This is primarily coming from volunteer services recruited from volunteer hour match through parents and from other members in the community, valued at \$33.60 per hour, derived at by using the average rate per hour of an Associate Teacher at \$20.20 with fringe benefits and additional paid time off fringe of \$13.40 Total volunteer hours for half- year 2024 is estimated at 5,000 hours, with parents volunteering one hour per day assisting at our thirteen (13) child care centers for 6 months at 20 days based on the State’s Days of Operation. If these hours are not met due to lack of parent and community volunteers, in-kind can be generated from the balance of the State contract.

<b>TOTAL HEAD START FEDERAL AND NON-FEDERAL BUDGET</b>	<b>\$12,625,661</b>
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**2. Early Head Start Budget Narrative**

Contra Costa County is requesting a Early Head Start (EHS) budget in the amount of \$10,010,459 in response to Funding Opportunity Number: HHS-2024-OHS-CH-R9-0104. This budget supports all direct costs of \$9,317,849, indirect cost of \$574,172, computed at 19% of salaries, and T/TA costs of \$118,438. Budgeted expenses reflect priorities of Contra Costa of child health and safety, partnership with state systems, reaching children and families most in need, investing in a highly skilled workforce through competitive salaries, benefits, support and training, and quality environments which strengthen the key components needed to keep the program operating most effectively. The budget includes the cost of direct salaries for teaching staff, personnel and fringe benefits, supplies, and childcare partners, training, and other costs such as building occupancy costs, utilities, and other operating expenses necessary to operate the EHS Program, as well as all required comprehensive services to eligible preschool children and families.

**(6a) Personnel** **\$2,658,692**

Personnel costs include an increase in salaries for all staff, and an additional increase in salaries for teachers and site supervisors. Costs also include new mental health staff. Personnel costs are



computed based on the twelve months budgeted salaries and projected cost of vacant positions. Total budgeted salaries are based on the percentage of time worked in the Early Head Start program.

**1. Program Managers** **\$450,232**

All Program Managers or Family Services staff will devote 13% of their time to the EHS Program with total salaries at \$450,232. This consists of twenty-four (24) Family Services Managers (CSM) with combined salaries at \$355,818, and eight (8) Family Services Assistant Managers (CSAM) with combined salaries at \$94,414. CSMs and CSAMs manage a program of comprehensive services that includes the delivery of health, mental health, disabilities, nutrition, education, parent involvement, or social services to federal program eligible families and their children 3–5 years of age in childcare programs, and low-income residents in the HS Program.

**2. Sites Supervisors** **\$199,914**

Fifteen (15) Site Supervisors with total salaries at \$199,914 will devote 13% of their time to the EHS Program. They provide the day-to-day administration of general childcare, infant/toddler care and/or pre-school services, and perform other related work as required.

**3. Teachers** **\$602,779**

Teachers will receive higher salaries to retain staff and to attract new teachers to become a part of Contra Costa’s Early Head Start program. Teaching staff salaries reflect increased salaries to help in teacher recruitment and retention and teachers will be able to move up to higher paying positions based on experience and proper qualifications. This consists of Master Teachers, Teachers, Associate Teachers, and Teacher Assistant Trainees. The 141 teachers in the teaching staff devote on average 11% of their time to the EHS program. Other teaching staff salaries in collaboration with the State are charged to the State and allocated to the EHS Program under “Other - Family Services with State Child Development Program”.

**4. Home Educators - (none)** **\$-0-**

**5. Disabilities Services Personnel - (none)** **\$57,862**

Three mental health positions will provide mental health support in the classroom. These positions will devote on average 21% of their time on the EHS program. One (1) CS Mental Health Clinical Supervisor will be added at \$19,287 and two (2) MH Clinical Specialists at \$38,575.

**6. Nutrition Services Personnel** **\$63,763**

Nutrition Services Personnel will devote 10% of their time to the EHS program. This includes two (2) Child Nutrition Cook with combined salaries at \$12,764, four (4) Child Nutrition Food Services Transporter with combined salaries at \$22,216, three (3) Child Nutrition Assistants with combined salaries at \$18,220 and one (1) Child Nutrition Food Operation Supervisor with salaries at \$10,563. Also included under the Child Nutrition Program is the Nutritionist who is a Family Services Manager, budgeted under the Program Managers. The Nutritionist must possess and maintain throughout the duration of employment current registration as a Dietitian issued by the Commission on Dietetic

Registration/Academy of Nutrition and Dietetics. Her responsibility includes overseeing and addressing nutritional issues such as abnormal weight and/or hemoglobin and food allergies, reviews menus to ensure compliance with certain USDA and Child and Adult Care Food Program (CACFP) guidelines, modifies meals for children with special dietary needs, and conducts CACFP facility reviews.

**7. Head Start Director** **\$12,876**

The Head Start Director will devote approximately 6% of time on the EHS program, based on the Director's time spent on overall leadership guidance and activities (e.g. EHS conferences/trainings, Policy Council activities) directly related to the EHS program. The Director's total salary of \$168,208 for FY2024-25 will not exceed the 2023 Executive Level II threshold of \$212,100 per year.

**8. Managers** **\$158,801**

Included in this budget is the HS Deputy Director will devote 11% of time to the HS program with salaries of \$12,627, as well as three (3) Division Managers with total salaries at \$100,124 will devote 29% of their time to the EHS Program. One (1) Division Manager is responsible for the overall operations of the grantee's Children and Family Services which includes planning and implementing quality programs. The other Division Manager is responsible for the overall administrative and analysis systems, grant planning and implementation, and new projects/programs for the bureau. Also included are four (4) Assistant Directors with combined salaries at \$46,050 who will devote approximately 8% of their time to the EHS Program The Assistant Director position has primary responsibility in the following areas: (1) the Finance Committee, compliance/licensing, nutrition, purchasing and contracts; (2) the Communications Committee, HS Family Child Care Providers, Facilities and Quality Initiative, (3) the HS Policy Council, Recruitment and Enrollment, Grants/Funding, and Family Services, including Disabilities and Mental Health, (4) Staff and Training Committees, Personnel, Partnerships, Home-based, and Training, and (5) Program Monitoring.

**9. Clerical Personnel** **\$643,062**

Included in this category are Clerical staff who will devote on average 12% of their time to the EHS Program. There are twenty-eight (28) Senior Clerks with total salaries of \$312,959, eighteen (18) Intermediate Clerks with total salaries of \$234,901, one (1) Secretary Advanced Level with salary of \$7,877, three (3) Clerks Experienced Level with total salaries of \$37,154, one (1) Clerk-Specialist Level with salary of \$24,382, and one (1) Clerk-Senior level with salary of \$25,789.

**10. Fiscal Personnel** **\$50,282**

Fiscal staff will devote 8% of their time on average to the Head Start Program. The Fiscal Officer has a salary at \$9,383. Three (3) Accountant III at \$23,000, one (1) Accountant II at \$6,345, one (1) Accountant I at \$5,611 and one (1) Accounting Technician at \$5,943 to the EHS Program.

**11. Other Administrative Personnel** **\$266,077**

The positions included in this Section are staff that devote approximately 13% of their time to the EHS Program. This consists of eight (8) Administrative Services Assistant IIIs with combined salaries at \$170,684, and two (2) Administrative Assistant Services II with combined salaries at \$67,501. The role of the ASA series is program administrators responsible for administrative support activities in the HS Program. Also included in this category is one (1) Sr. Business Systems Analyst with salaries at \$10,191, one (1) Business Systems Analyst with salaries at \$8,431, and two (2) Community Services Building Services Worker with combined salaries at \$9,270. Percentages are based on estimates of time spent with activities that can be directly related to the EHS Program.

**12. Cleaning Staff \$153,045**

Specialty cleaning staff will clean classrooms to the required specifications. Cleaning staff will devote on average 21% of their time cleaning EHS classrooms. Two (2) Institutional Service Worker leads with salaries of \$30,908 and ten (10) Institutional Service Workers salaries of \$122,137.

**(6b) Fringe Benefits \$1,929,138**

The County has a defined benefit retirement plan which provides a fixed, pre-established benefit for employees at retirement. The amount of the benefit is calculated by factors such as salary and a member’s retirement service credit. Defined benefit pensions are based on a formula set by law, in this case the *County Employees Retirement Law of 1937 (CERL or 1937 Act)*, and the *California Public Employees’ Pension Reform Act of 2013 (PEPRA)*. PEPRA became effective on January 1, 2013. This law made substantial changes in public employee benefits, both for new and for existing retirement system members. These changes include new benefit tiers for members entering public retirement systems on or after January 1, 2013. Employer contribution rates and every other aspect of the administration of retirement benefits are determined by CCCERA, the board of retirement, and the actuaries that provide services to the board of retirement. The County’s other fringes include health, dental and life insurance, State Unemployment Insurance (SUI), Workers Compensation and Deferred Compensation, etc.

**Regular Personnel Fringe Benefit \$1,929,138**

Percentage of fringe benefits based on the County Budget is as follows:

<b>Fringe Benefits</b>	<b>%</b>	<b>Regular HS Staff</b>
Social Security (FICA), State	11.37%	\$332,339
Disability, Unemployment (FUTA)	0.17%	4,969
Stat and Workers Comp	1.41%	41,213
Health/Dental/Life Insurance	26.23%	766,686
Retirement	25.70%	736,580
Other (Supplemental)	1.62%	47,351
<b>Total Fringe Benefits</b>	<b>66%</b>	<b>\$1,929,138</b>

<b>(6c) Travel</b>	<b>\$15,537</b>
This estimate is for airline expenses included in the Training and Technical Assistance (T/TA) Budget.	
<b>(6d) Equipment</b>	<b>\$-0-</b>
<b>(6e) Supplies</b>	<b>\$152,434</b>
Included are office supplies, children and family services supplies, transition supplies for children transitioning to kindergarten, computer supplies to support the EHS classroom/site workstations/computers, health/safety, mental health/disabilities, and household supplies. The budget also includes allowable employee health and welfare costs for the improvement of working conditions, employer-employee relations, employee health, and employee welfare. The County has a Wellness Program for the well-being of its staff, as well as a Peer Recognition Program. Small purchases like pedometers for its “I Walk Challenge” and mugs for its Peer recognition program are budgeted under this category. This budget item is supported under the provision of Uniform Guidance 45 Part § 75.437 Employee health and welfare costs, which states that “Costs incurred in accordance with the non-Federal entity's documented policies for the improvement of working conditions, employer-employee relations, employee health, and employee performance are allowable.”	
<b>(6f) Contractual</b>	<b>\$3,068,886</b>
Includes expenses incurred in outsourcing services such as hiring temporary administrative support, contract with LVN Health Consultant, as well as costs for various childcare partners for the implementation of the HS Program.	
<b>1. Administrative Services</b>	<b>\$-0-</b>
This represents costs associated with acquiring temporary administrative support from outside for-profit agencies required throughout the year to support the HS program needs.	
<b>2. Health / Disabilities Services</b>	<b>\$190,743</b>
A specialized Health Consultant will work with child health and safety, infectious disease prevention and control, disease intervention and management, and tuberculosis testing for parents and staff. The health consultant’s contract is \$78,050 with hourly rate at \$50.00 for 1,561 hours with \$36,470 being charged to EHS. A contract will be created for Mental Health Services with an estimated cost of \$154,273 and a contractor to be determined.	
<b>3. Food Services</b>	<b>\$-0-</b>
<b>4. Training and Technical Assistance</b>	<b>\$152,567</b>
The provision of T/TA under the EHS budget is for One Solution Technology contract charges for the CLOUD System. Total contract for 2024 is \$40,037, 25% of which is charged to the HS budget for six-months. There are also contracts for Leadership Trainings (\$79,260), Conferences (\$15,787) and Family Development Credential (\$17,482) Details and description of training and staff development are included under the T/TA budget.	

<b>5. Delegate Agency Costs</b>	<b>\$-0-</b>
Contra Costa County will no longer utilize a delegate agency in the new proposal.	
<b>6. Other Contracts</b>	<b>\$2,725,556</b>
The County has contracted with various childcare providers so that EHS children will receive enhanced services at various contractors' centers to bring them up to EHS Performance Standards adding family services and children/family outcome measures through the EHS comprehensive services provided to children under the California State Preschool Program (CSPP). Higher slot rates will be paid to providers in the new proposal to allow them to invest in their programs.	
<b>(6g) Construction</b>	<b>-\$-0-</b>
<b>(6h) Other</b>	<b>\$1,493,342</b>
<b>1. Building Occupancy Costs</b>	<b>\$223,487</b>
Site rents are related to EHS share of rent costs at the Grantee's Childcare Sites, partially determined by Contra Costa County's Public Works Department.	
<b>2. Utilities and Telephone</b>	<b>\$67,614</b>
Projected costs are related to EHS's share of utility and phone costs with the HS Program, based on the available HS slots at the sites.	
<b>3. Building &amp; Child Liability Insurance</b>	<b>\$2,283</b>
Building insurance & child liability insurance is determined by the County's Risk Management Department.	
<b>4. Building Maintenance/Repair &amp; Other Occupancy</b>	<b>\$263,749</b>
Buildings are properly maintained and/or repaired to ensure the health and safety of EHS children and costs are partially determined by the County's Public Works Department.	
<b>5. Local Travel</b>	<b>\$1,680</b>
This is to reimburse EHS staff for mileage incurred during work related travel, estimated at 2,530 miles in 2023 at 65.5 cents per mile.	
<b>6. Nutrition Services</b>	<b>\$209,139</b>
Child Nutrition costs to cover children's meals within the HS Program.	
<i>USDA and CACFP reimbursement</i>	<i>(\$76,894)</i>
<b>The Child and Adult Care Food Program (CACFP) is a federal program that provides reimbursements for nutritious meals and snacks to eligible children and adults who are enrolled for care at participating childcare centers, day care homes, and adult day care centers.</b>	
<b>7. Parent Services</b>	<b>\$487</b>
These are costs associated with Policy Council parents' activities at sites, PC/BOS luncheon and appreciation meetings including venue and food costs (\$417), as well as childcare and	

mileage reimbursement (\$70). This was presented and approved by the Policy Council Parent Services Committee.

**8. Accounting and Legal Services** **\$40,866**

Accounting and legal services are determined by the Auditor Controller's Office and the Department of Information Technology.

**9. Publications/Advertising/Printing** **\$14,876**

This covers outreach printing costs (\$1,335) as well as job announcements, newspaper/website ads, digital marketing for teaching staff (\$13,541) to recruit new staff for the EHS Program using new media such as buses.

**10. Training and Staff Development** **\$75,590**

This budget includes Family, Community and Parent Engagement (\$22,250), Mandatory Trainings (\$16,202) and Agency Memberships (\$37,138). Investing in staff and teacher training is a priority in this budget.

**11. Other** **\$670,464**

Site Security Guards (\$149,676): These are EHS's share of security guard services at sites that are considered at risk and to ensure safety of our children and staff, including the increased need of security at Brookside.

Cleaning Services (\$109,798): These are costs for specialty cleaning supplies for cleaning staff to clean and sanitize EHS classrooms and other areas.

Vehicle Operating/Maintenance and Repair (\$71,754): These are EHS's estimated cost associated with the county vehicles, as determined by the County's Public Works Department.

Equipment Maintenance, Repair & Rental (\$23,048): These are EHS's share of classroom equipment maintenance and repair costs to make sure that equipment is properly maintained and/or repaired, as determined by the County's Public Works Department.

DHHS-211 Database (\$6,281): This is the EHS Program's share of costs related to the 211 database project which houses resources and referral information for hundreds of agencies and programs specializing in health services, mental health, childcare and transportation needs.

Other Operating Expenses (\$98,531): These are other allocated costs such as county administration, Human Resources services, processing of payroll, contracts, purchasing and other County functions.

Family Services with State Child Development Program: \$211,375

The County implemented a layer 2 funding model that provides a unique opportunity to leverage and maximize resources utilizing Child Development funds. This budget line item funds estimated costs in a classroom with this collaboration model in which enrolled children

that are served may include an enhanced curriculum, classroom supplies, materials, minor equipment, training and education for teachers, enhanced pay for teachers who meet HS education requirements, increased staffing to meet HS required staff-child ratio and group size requirements, and minor facility renovations or equipment needed to meet HS Performance Standards. These enhancements are paid for by HS that directly benefit HS children but are also expected to benefit other children sharing a classroom or service environment with enrolled children. This budget represents the total estimated cost of enhanced services for the HS share in this collaborative program.

**(6i) Total Direct Charges (Summary of lines (6a) – (6h))** **\$9,317,849**

**(6j) Indirect Costs** **\$ 574,172**  
 Indirect Cost rate is calculated at 19% of direct salaries and wages.

<b>(6k) TOTAL FEDERAL BUDGET (PA 22)</b>	<b>\$9,892,021</b>
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**TRAINING AND TECHNICAL ASSISTANCE BUDGET (T/TA - PA 20)      \$118,438**

Listed in the Training and Technical Assistance (T/TA) document is the County’s itemized trainings, T/TA priorities, strategies and outcomes expected for the year. Training costs are budgeted for Mandatory Trainings, Conferences and Training by Content Area. Detailed description, purpose and number of staff attending the training is budgeted as much as practicable. However, if the specific training may not materialize due to any unforeseen events, the County has the flexibility to substitute the training/conference to similar or comparative training that is EHS program-related in content and purpose. Budgeted training expenses include registration fees, air travel for out-of-state conferences, hotel costs, meal allowances, mileage, shuttle expenses, toll fees, training materials and other miscellaneous expenses related to staff development including food and venue.

**(6f) Contractual** **\$10,040**

4. Training and Technical Assistance  
 T/TA includes the EHS program’s share in various training providers, coaches and consultants for Family Development Credentials (\$10,040).

**(6h) Other** **\$108,398**

7. Parent Services **\$13,350**

These costs include parent conference registration fees and training (including food and venue costs), Policy Council orientation and parent trainings, materials and translation costs (including food and venue costs), and Policy Council meetings (including food and venue costs). These were presented and approved by the Policy Council.

10. Training or Staff Development **\$95,048**

Training costs are budgeted for mandatory training, conferences and training by content area. The T/TA budget addresses the following training topics on Mental Health, Disabilities, Health and Safety; Education, Curriculum and Home Based for Partners; Parent, Family and Community Engagement; Nutrition and Food Services; Program Regulations and Federal,

State and Local Initiatives; Management Systems; Information technology and Business Systems; Continuing Education Program and Staff Development; and Mandatory trainings. The training needs of EHS staff and parents will be met by workshops, conferences and various professional leadership training. Details of these training categories are included in the schedule of the T/TA budget.

<b>(6k) TOTAL T and T/A BUDGET (PA 20)</b>	<b>\$118,438</b>
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<b>(6k) TOTAL FEDERAL BUDGET (PA 22 and PA 20)</b>	<b>\$10,010,459</b>
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<b>TOTAL NON-FEDERAL BUDGET</b>	<b>\$2,502,615</b>
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For the twelve-months budget, Non-federal share or in-kind consist of:

<b>State Preschool Programs</b>	<b>\$2,427,855</b>
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This amount is determined by the County’s contract with California Department of Education Preschool Program, for the collaboration portion with the State’s Child Development Program. The State portion of the CSPP contract is \$22,353,205.

<b>Other – Volunteers (2,225 hours x \$33.60)</b>	<b>\$74,760</b>
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This is primarily coming from volunteer services recruited from volunteer hour match through parents and from other members in the community, valued at \$33.60 per hour, derived at by using the average rate per hour of an Associate Teacher at \$20.20 with fringe benefits and additional paid time off fringe of \$13.40 Total volunteer hours for half- year 2024 is estimated at 5,000 hours, with parents volunteering one hour per day assisting at our thirteen (13) child care centers for 6 months at 20 days based on the State’s Days of Operation. If these hours are not met due to lack of parent and community volunteers, in-kind can be generated from the balance of the State contract.

<b>TOTAL EARLY HEAD START FEDERAL AND NON-FEDERAL BUDGET</b>	<b>\$12,513,074</b>
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<b>TOTAL FEDERAL AND NON-FEDERAL BUDGET</b>	<b>\$25,138,735</b>
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### 3. Head Start Start-Up Budget Narrative

Contra Costa County is requesting a Start-up budget in the amount of \$1,308,372 in response to Funding Opportunity Number: HHS-2024-OHS-CH-R9-0104. Start-up costs are requested to repair the foundation of Building 7 and Building 8 at the George Miller Center in Concord, CA. The George Miller Center has 100 Head Start slots and 28 Early Head Start slots for a total of 128 slots. The foundation repairs are necessary to provide a safe environment for all participants and staff of Contra Costa County’s Head Start and Early Head Start program. The modular buildings were paid for with Federal funds and the land under the building is owned by Contra Costa County.

<b>(6a) Personnel</b>	<b>\$-0-</b>
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<b>(6b) Fringe Benefits</b>	<b>\$-0-</b>
<b>(6c) Travel</b>	<b>\$-0-</b>
<b>(6d) Equipment</b>	<b>\$-0-</b>
<b>(6e) Supplies</b>	<b>\$-0-</b>
<b>(6f) Contractual</b>	<b>\$-0-</b>
<b>(6g) New Construction</b>	<b>\$-0-</b>
<b>1. Major Renovations</b>	<b>1,308,372</b>

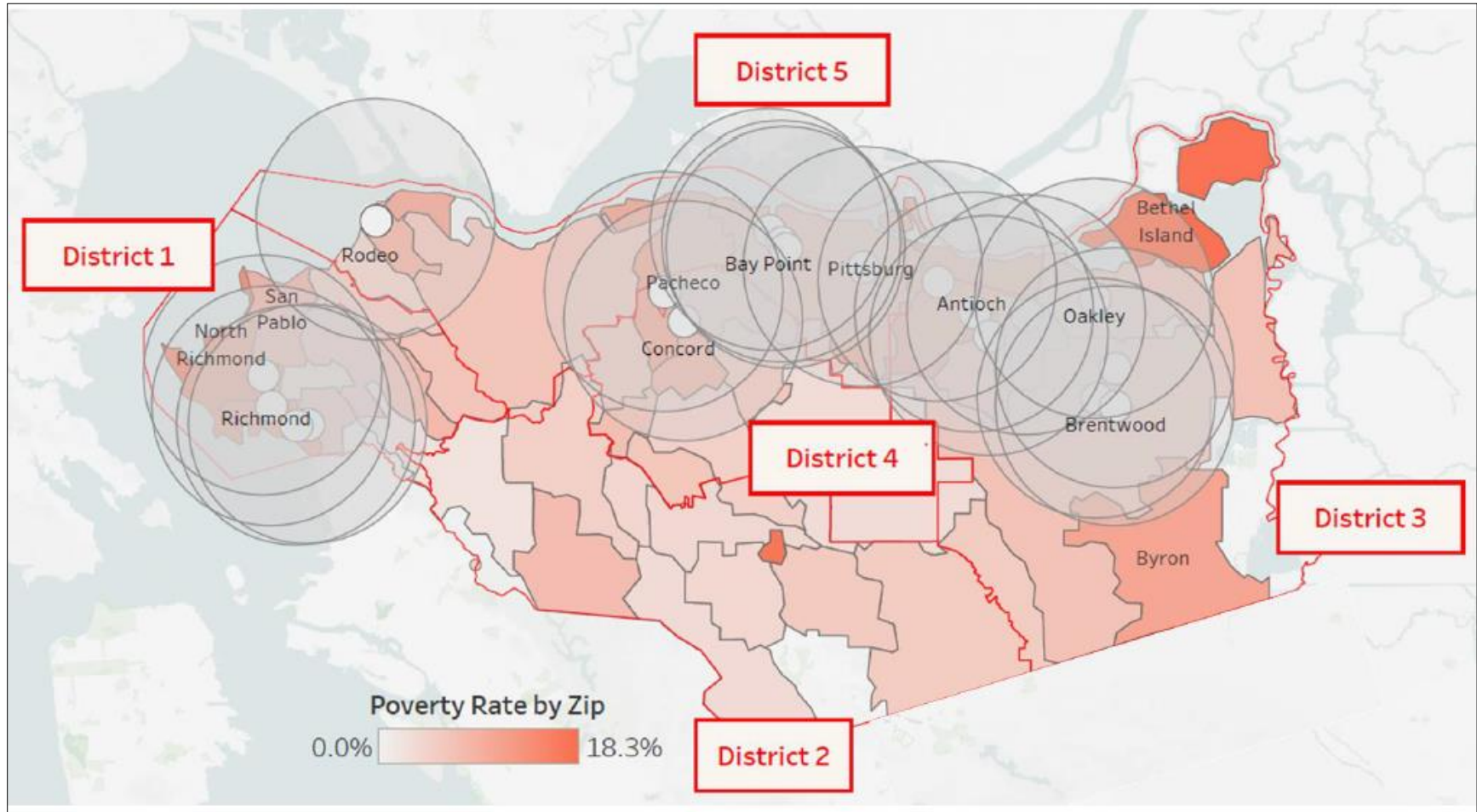
2. Major foundation work needs to be completed to stabilize the buildings. The estimated costs are as follows:

Building 8	\$636,641	Site work, foundation repairs and other structural repairs
Building 7	\$527,789	Site work, foundation repairs and other structural repairs
Soft Costs	\$25,000	Permits and other costs
Subtotal	\$1,189,429	
Contingency	\$118,943	10% of costs
Total	\$1,308,372	

<b>3. Acquisition of Buildings/Modular Units</b>	<b>\$-0-</b>
<b>(6h) Other</b>	<b>\$-0-</b>
<b>(6i) Total Direct Charges (Summary of lines (6a) – (6h))</b>	<b>\$1,308,372</b>
<b>(6j) Indirect Costs</b>	<b>\$-0-</b>

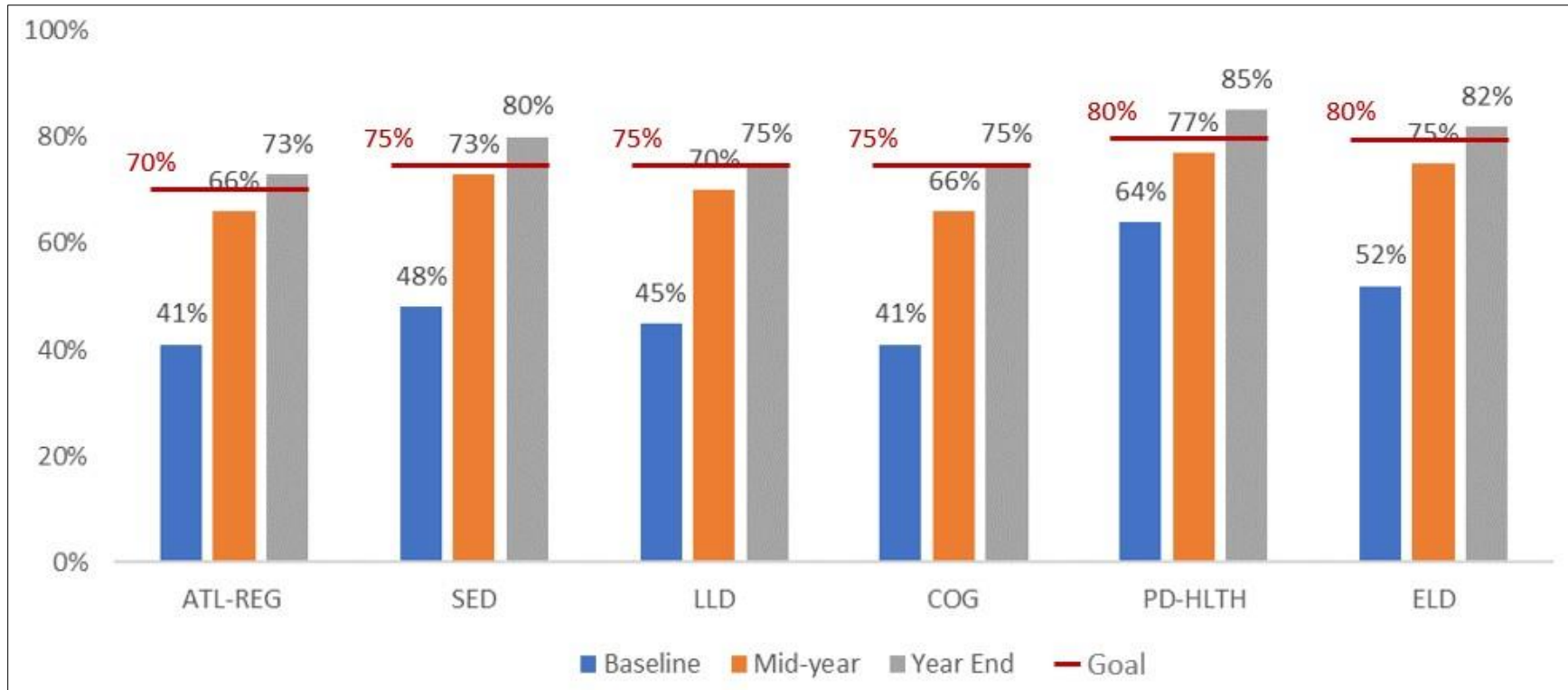
<b>(6k) TOTAL START-UP BUDGET</b>	<b>\$1,308,372</b>
<b>(6k) TOTAL T and TA BUDGET</b>	<b>\$-0-</b>
<b>(6k) TOTAL START-UP BUDGET</b>	<b>\$1,308,372</b>
<b>TOTAL NON-FEDERAL BUDGET</b>	<b>\$327,093</b>
<b>TOTAL FEDERAL AND NON-FEDERAL START-UP BUDGET</b>	<b>\$1,635,465</b>

**Image 1. Poverty by District and Proposed Center Locations with 8-mile Diameters**



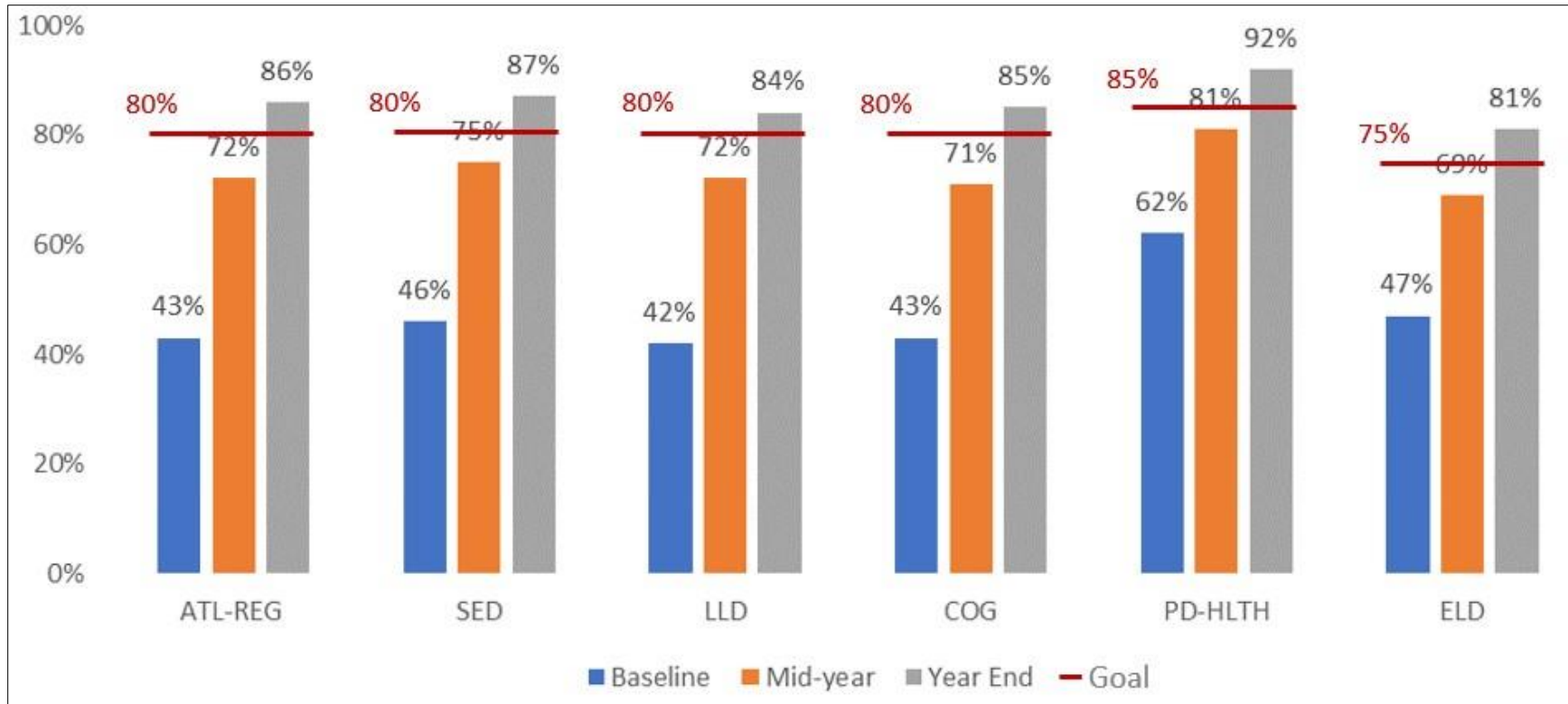
Note: Map does not include 149 Home Visiting slots as they are county-wide

**Image 2: 2023 Preschooler School-Readiness Outcomes Data**



**Image 2** illustrates the percentages of children that scored at, or above the Building Earlier level for each domain for Preschool children: Approaches to Learning-Self Regulation (**ATL-REG**), Social and Emotional Development (**SED**), Language and Literacy Development (**LLD**), English Language Development (**ELD**), Cognition Including Math and Science (**COG**), Physical Development–Health (**PD-HLTH**).

**Image 3: 2023 Pre-K School-Readiness Outcomes Data**



**Image 3** illustrates the percentages of children that scored at or above the Building Later level for each domain for Pre-Kindergarten children: Approaches to Learning-Self Regulation (**ATL-REG**), Social and Emotional Development (**SED**), Language and Literacy Development (**LLD**), English Language Development (**ELD**), Cognition Including Math and Science (**COG**), Physical Development–Health (**PD-HLTH**).

**Image 4: 2023 Nutrition, Parent Engagement Outcomes Data**

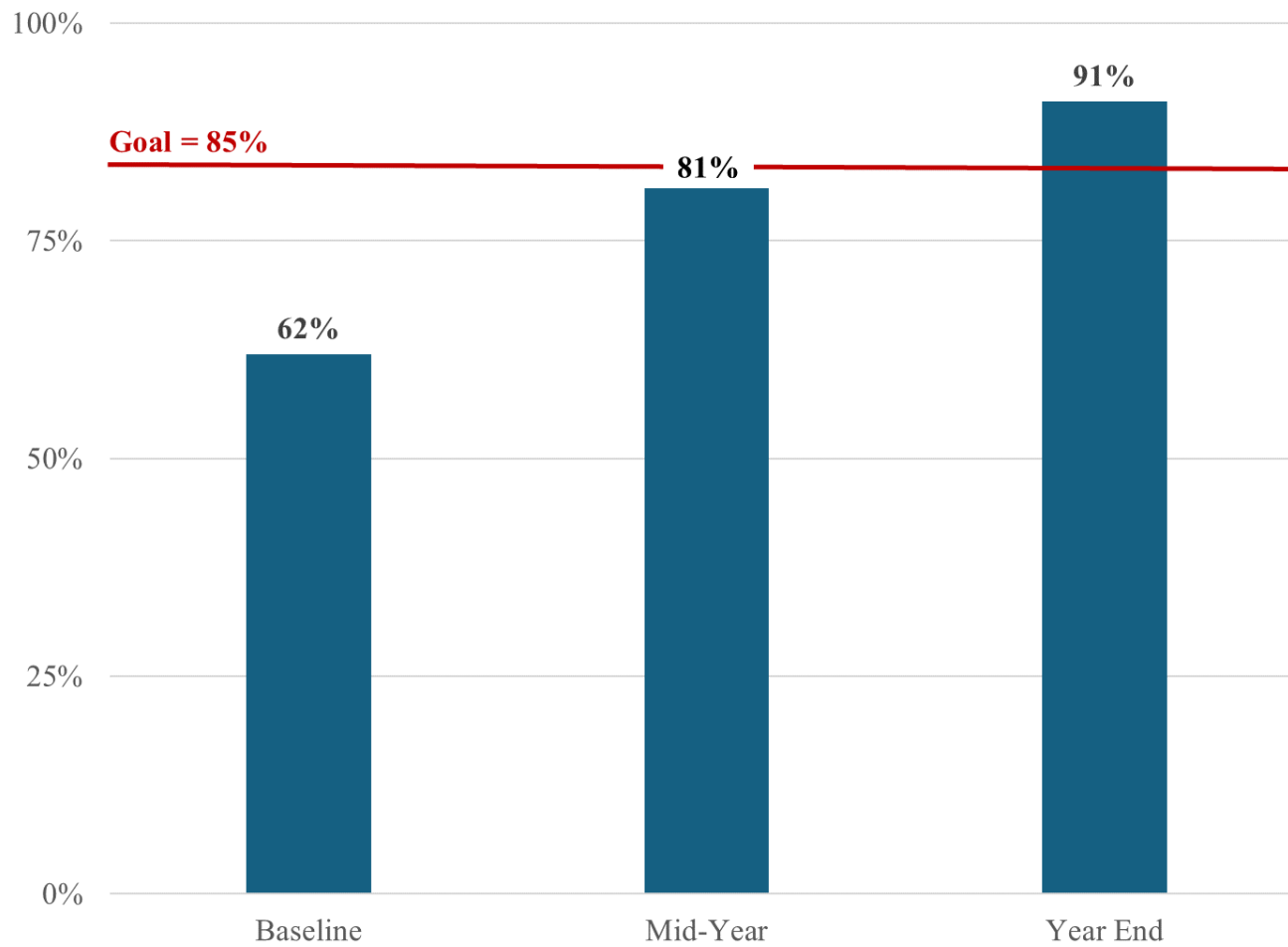
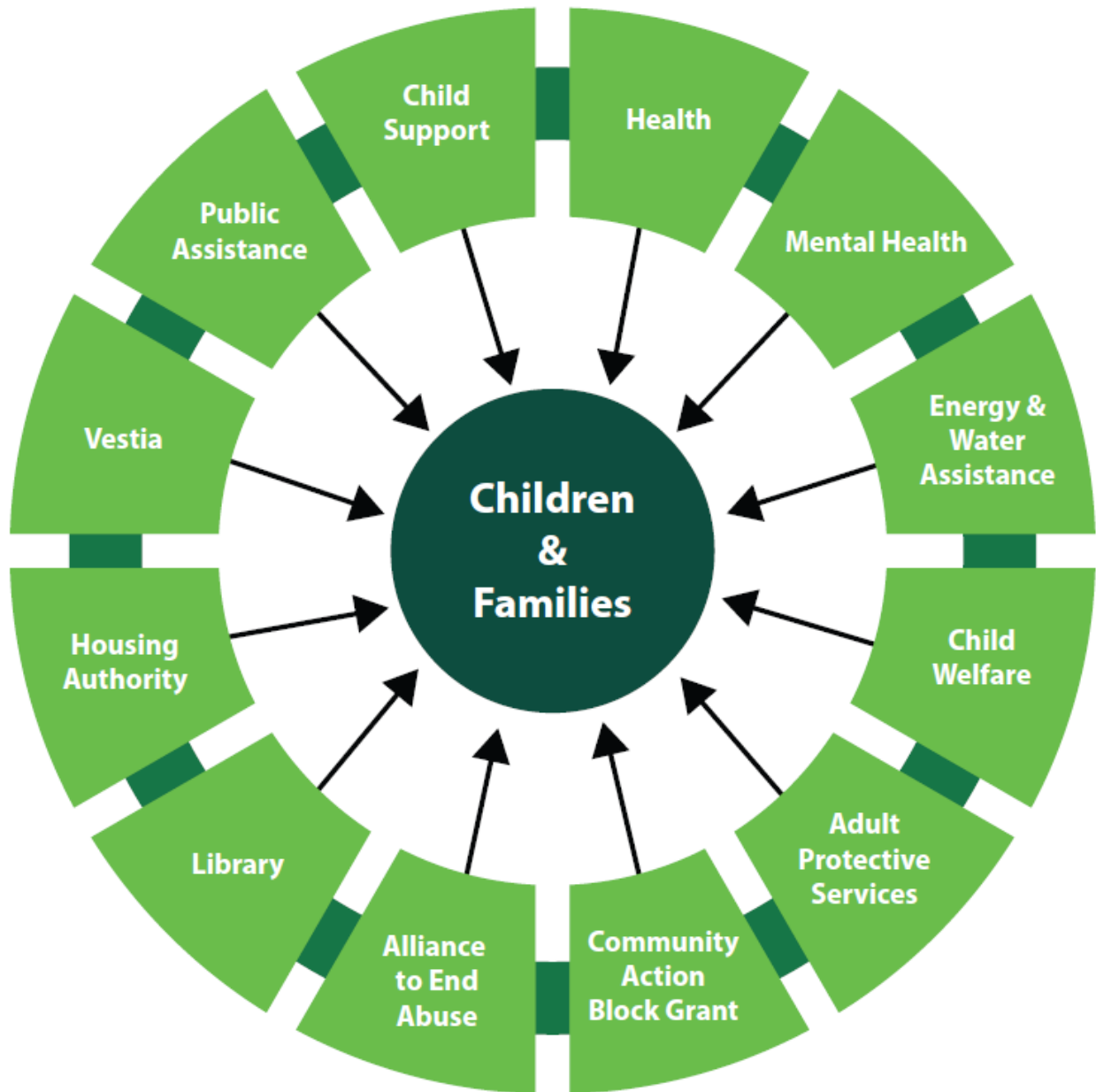


Image 4 illustrates the percentage of children that scored at or above “Building Later Level” on the DRDP Physical Development-Health: Nutrition measure (PD-HLTH 10). This measure illustrates improvement in child nutrition through a year of Parent, Family and Community Engagement (PFCE) related to

**Image 5. Head Start embedded in the Contra Costa County Portfolio of Services**



Contra Costa Head Start children and families are embedded within the full portfolio of Contra Costa County (CCC) services. This facilitates seamless access for Contra Costa Head Start children and families to all CCC services. Family Services workers maintain direct access to workers delivering this full array of services.

**Table 1. Evidence of Community Need**

<b>Bold indicates higher need than county average</b>							
<b>District</b>	<b>City</b>	<b>Poverty Rate</b>	<b>Point in Time</b>	<b>CalFresh Households</b>	<b>Health Access</b>		<b>Unemployment Rate</b>
			<b>Homeless Count per 1,000</b>		<b>Uninsured Rate</b>	<b>Medi-Cal Households</b>	
	<b>Countywide</b>	8.3%	1.42	8.9%	4.7%	25.6%	3.8%
<b>1</b>	Richmond	<b>14.3%</b>	<b>4.21</b>	<b>14.9%</b>	<b>8.0%</b>	<b>41.8%</b>	<b>4.6%</b>
	N. Richmond	<b>10.0%</b>	<b>8.30</b>	0.4%	<b>8.8%</b>	0.9%	2.1%
	San Pablo	<b>11.8%</b>	<b>1.50</b>	<b>21.2%</b>	<b>8.2%</b>	<b>66.0%</b>	<b>5.1%</b>
<b>3</b>	Bethel Island	<b>17.8%</b>	<b>3.01</b>	<b>20.9%</b>	4.2%	<b>41.5%</b>	<b>9.2%</b>
	Brentwood	6.9%	0.57	7.4%	2.2%	21.2%	3.8%
	Byron	<b>11.4%</b>	<b>2.61</b>	6.5%	<b>6.8%</b>	22.5%	<b>4.2%</b>
	Oakley	7.0%	1.33	<b>10.5%</b>	3.9%	28.5%	<b>4.0%</b>
<b>4 &amp; 5</b>	Concord	<b>9.2%</b>	<b>1.93</b>	<b>10.1%</b>	<b>5.8%</b>	<b>31.3%</b>	3.3%
<b>3 &amp; 5</b>	Antioch	<b>12.1%</b>	<b>2.90</b>	<b>17.8%</b>	<b>6.4%</b>	<b>40.8%</b>	<b>5.1%</b>
	Bay Point	<b>14.3%</b>	<b>2.05</b>	<b>17.8%</b>	<b>13.2%</b>	<b>56.8%</b>	<b>6.8%</b>
	Pacheco	7.6%	<b>3.97</b>	<b>9.5%</b>	<b>9.4%</b>	<b>26.9%</b>	<b>4.1%</b>
	Pittsburg	9.9%	0.76	<b>15.5%</b>	<b>6.7%</b>	<b>40.8%</b>	<b>4.7%</b>
	Rodeo	9.6%	<b>3.86</b>	<b>15.6%</b>	4.0%	<b>35.5%</b>	<b>4.9%</b>
Sources <sup>1</sup>		Table SI701	PITH3	CalSAWS	Table S2701	CalSAWS	Table DP03

<sup>1</sup>Sources: Tables are from the Census. PITH3 is the Contra Costa County 2023 Point In Time Homeless Count. CalSAWS is the California public assistance system in which all eligibility is determined and maintained, benefits are issued, and cases are managed.

Contra Costa County Head Start/Early Head Start Application

**Table 2. Program Options**

<b>Program Option</b>	<b>Operation</b>	<b>Part Day</b>	<b>Full Day</b>	<b>Extended Hours</b>	<b>Home Visits</b>
<b>EHS Center-Based</b>	Hours / day		10.5	12	
	Days / week		5	5	
	Weeks / year		52	52	
<b>HS Center-Based</b>	Hours / day	3.5	10.5	12	
	Days / week	4	5	5	
	Weeks / year	36.5	52	52	
<b>EHS Home-Based</b>	Hours / day				1.5
	Days / week				1
	Weeks / year				52
<b>EHS Teen Program (Locally Designed)</b>	Hours / day		6.5		
	Days / week		5		
	Weeks / year		35.5		

Blank cells are not applicable



Contra Costa County Head Start/Early Head Start Application

**Table 3. Proposed Sites**

District	City	Center	Provider	Program Option	Age		Center Based Hours		
					EHS	HS	Half Day	Full Day	Ext Hours
	County-wide	Aspiranet (home visiting)	Partner	Home-based	149	0			
1	Richmond	Balboa	County	Center-based	32	132	52	112	
		Crescent Park	County	Center-based	30	20		50	
		George Miller III	County	Center-based	0	220	40	180	
		Verde	County	Center-based	0	40		40	
3	Brentwood	Los Nogales	County	Center-based	16	20		36	
		Marsh Creek	County	Center-based	0	40	40		
		Tiny Toes	Partner	Center-based	8	24		32	
	Oakley	Los Arboles	County	Center-based	16	20		36	
4, 5	Concord	MDUSD Crossroads	Partner	School-based	20	0		20	
		George Miller	County	Center-based	28	100	40	88	
3, 5	Antioch	KinderCare E. Antioch	Partner	Center-based	20	0			20
		KinderCare Lone Tree	Partner	Center-based	16	24			40
		KinderCare Mahogany	Partner	Center-based	32	20			52
Bay Point	Bay Point	Ambrose	County	Center-based	22	0		22	
		Lavonia Allen	County	Center-based	16	20		36	
		Riverview	County	Center-based	0	40		40	
	Pittsburg	KinderCare Pittsburg	Partner	Center-based	16	24			40
	Rodeo	Bayo Vista	County	Center-based	16	20		36	
<b>TOTAL</b>					<b>437</b>	<b>764</b>	<b>172</b>	<b>728</b>	<b>152</b>

**Table 4. County and Partner Responsibilities**

<b>County Functions for All Services (County Operated and Partner Operated)</b>	
<ol style="list-style-type: none"> <li>1. Recruitment and Enrollment</li> <li>2. Family Services Systems and Oversight                             <ol style="list-style-type: none"> <li>a. Health</li> <li>b. Nutrition</li> <li>c. Family and Community Engagement</li> <li>d. Mental Health and Disabilities</li> </ol> </li> <li>3. Program Information Report (PIR)</li> <li>4. Contract Monitoring</li> </ol>	
<b>County Functions for County Operated Services</b>	<b>Partner Functions for Partner Operated Services</b>
<ol style="list-style-type: none"> <li>5. Attendance Promotion and Monitoring</li> <li>6. Meals Provision</li> <li>7. Education and Child Development</li> <li>8. Developmental Screenings</li> <li>9. Curriculum, Adoption and Implementation</li> <li>10. Desired Results Developmental Profile (DRDP)</li> <li>11. Facilities Procurement and Maintenance</li> <li>12. Family Services</li> </ol>	<ol style="list-style-type: none"> <li>1. Attendance Promotion and Monitoring</li> <li>2. Meals Provision</li> <li>3. Education and Child Development</li> <li>4. Developmental Screenings</li> <li>5. Curriculum, Adoption and Implementation</li> <li>6. Desired Results Developmental Profile (DRDP)</li> <li>7. Facilities Procurement and Maintenance</li> <li>8. Family Services (optional service enhancement option)</li> </ol>

Contra Costa County Head Start/Early Head Start Application

**Table 5. Continuous Monitoring Program**

<b>Tool</b>	<b>Frequency</b>	<b>Responsible</b>	<b>Aggregated Data Review</b>
1. Daily Health & Safety Classroom Checklist	100% Classrooms Daily	Teachers	<b>Bi-Weekly:</b> Cluster Assistant Directors (AD), Partner Staff <b>Monthly:</b> Sr. Managers, EHSD Director, Policy Council (PC), Board of Supervisors (BOS) <b>Semi-Annually:</b> Monitoring & Self-Assessment Subcommittee
2. Daily Playground Safety Checklist	100% Playgrounds Daily	Teachers	<b>Bi-Weekly:</b> Cluster Assistant Directors (AD), Partner Staff <b>Monthly:</b> Sr. Managers, EHSD Director, PC, BOS <b>Semi-Annually:</b> Ongoing Monitoring & Self-Assessment Subcommittee
3. Weekly Facility Safety Checklist	100% Centers Weekly	Site Supervisors	<b>Bi-Weekly:</b> Cluster Assistant Directors (AD), Partner Staff <b>Monthly:</b> Sr. Managers, EHSD Director, PC, BOS <b>Semi-Annually:</b> Ongoing Monitoring & Self-Assessment Subcommittee
4. Monthly Playground Safety Checklist	100% Playgrounds Monthly	Site Supervisors	<b>Monthly:</b> Sr. Managers, EHSD Director, PC, BOS <b>Semi-Annually:</b> Ongoing Monitoring & Self-Assessment Subcommittee
5. Child Transition & Safety Monitoring	100% classrooms 2x a year	Senior Managers	<b>Monthly:</b> Sr. Managers, EHSD Director, PC, BOS <b>Semi-Annually:</b> Ongoing Monitoring & Self-Assessment Subcommittee
6. On Site Content Area Compliance Checklist	100% classrooms 2x a year	Family Services Managers	<b>Semi-Annually:</b> Sr. Management, EHSD Director, BOS, PC, Ongoing Monitoring & Self-Assessment Committee
7. Education File Review & Family Services File Reviews	100% 1X a year	Family Services Managers & Sr. Managers	<b>Annually:</b> Sr. Management, EHSD Director, BOS, PC, Ongoing Monitoring & Self-Assessment Committee

Contra Costa County Head Start/Early Head Start Application

<b>Tool</b>	<b>Frequency</b>	<b>Responsible</b>	<b>Aggregated Data Review</b>
8. Center Health & Safety Checklist	100% Centers Quarterly	Health and Safety Officer	<b>Semi-Annually:</b> Sr. Management, EHSD Director, BOS, PC, Ongoing Monitoring & Self-Assessment Committee
9. CACFP	100% Centers 3x a year	Nutrition Manager	<b>Semi-Annually:</b> Sr. Management, EHSD Director, BOS, PC, Ongoing Monitoring & Self-Assessment Committee
10. CLASS	At least 50% of preschool classrooms 1x per year	Quality Monitoring Unit Manager	<b>Annually:</b> Sr. Management, EHSD Director, BOS, PC, Ongoing Monitoring & Self-Assessment Committee
11. Environmental Rating Scale (ERS)	All classrooms 1x per year  QMU staff validate 20-30% of the classrooms.	Each County/Partner teaching team conducts ERS (by classroom).	<b>Annually:</b> Sr. Management, EHSD Director, BOS, PC, Ongoing Monitoring & Self-Assessment Committee
12. Curriculum Fidelity	30% monitoring of all directly-operated, partner, & delegate centers.	Quality Monitoring Unit Manager	<b>Annually:</b> Sr. Management, EHSD Director, BOS, PC, Ongoing Monitoring & Self-Assessment Committee
13. Center Monitoring	30% sample of classrooms at each center annually	Quality Monitoring Unit Manager	<b>Annually:</b> Sr. Management, EHSD Director, BOS, PC, Ongoing Monitoring & Self-Assessment Committee

Contra Costa County Head Start/Early Head Start Application

<b>Tool</b>	<b>Frequency</b>	<b>Responsible</b>	<b>Aggregated Data Review</b>
14. Ages & Stages Questionnaires	100% of children annually	Teachers & Site Supervisors	<b>Annually:</b> Sr. Management, EHSD Director, BOS, PC, Ongoing Monitoring & Self-Assessment Committee (Included in File Reviews)
15. Desired Results Developmental Profile	100% of children 3x a year	Teachers & Site Supervisors	<b>Semi-Annually:</b> Sr. Management, EHSD Director, BOS, PC, Ongoing Monitoring & Self-Assessment Committee
16. Parent Satisfaction Surveys & Parent Interest Surveys	1x annually	Teachers & Family Services Team	<b>Annually:</b> Sr. Management, EHSD Director, BOS, PC (Included in Program Self Evaluation and Annual Report)
17. MOU Reviews	Ongoing	Contract Analysts	<b>Annually:</b> Sr. Management
18. Social Media Interactions	Ongoing	Social Media team (DMs, Analysts)	<b>Annually:</b> Sr. Management
19. Site Meetings	1x monthly	Site Supervisors	<b>Semi-Annually:</b> Education Team
20. Post Workshop Knowledge Checks	1x bi-monthly	Assistant Directors, Education Team	<b>Quarterly:</b> Education Leadership

Contra Costa County Head Start/Early Head Start Application

**Table 6: Maximum Annual Teaching Salary Comparison to Neighboring Head Start Recipients**

<b>Contra Costa County Salary Information</b>	<b>Location</b>	<b>Teacher Annual Salary Range</b>	
		<b>Min</b>	<b>Max</b>
Head Start Current	Contra Costa	\$36,054 <sup>1</sup>	\$60,733 <sup>1</sup>
Head Start Proposed with 5% + \$12,000 increase	Contra Costa	\$49,857	\$75,770
Increase from FY23/24 to FY24/25		↑38%	↑25%
<b>California and Bay Area Salary Comparators Information</b>			
2023 UC Berkley Study - All centers <sup>2</sup>	Contra Costa	\$41,600	\$52,000
2023 UC Berkley Study - Head Start/Title 5 <sup>2</sup>	Contra Costa	\$43,680	\$54,080
	Comparators Average	\$40,747	\$51,428
	County Head Start as % of Average	122%	147%

<sup>1</sup>Contra Costa County minimum salary is Step 1 for the classification of Associate Teacher. Contra Costa maximum salary is Step 5 for classification of Master Teacher. This illustrates the salary progress available to all teachers who earn the required qualifications with the new flex-promote series.

<sup>2</sup> UC Berkeley Study: Powell, Muruvi, Austin, Copeman Petig, (January 2024). The Early Care and Education Workforce of Contra Costa County, [www.first5coco.org](http://www.first5coco.org).

<sup>3</sup>Head Start California, Compensation & Benefits Study (February 2022).

**Table 7. OHS and Contra Costa County Governing Board Priorities**

OHS Priorities <sup>18</sup>	Related County Governing Body Priorities
I. <b>Child Health and Safety:</b> Reduce or eliminate children’s risk of exposure to harm and hazards.	<ul style="list-style-type: none"> <li>• Continue to implement daily, weekly, monthly, and quarterly monitoring to identify and remove environmental harm and hazards.</li> </ul>
II. <b>Partnerships with State Systems:</b> Expand Head Start programs’ capacity to coordinate services with state systems and national programs.	<ul style="list-style-type: none"> <li>• Use state funding to extend hours to support commuting parents working varied shifts.</li> <li>• Maximize receipt of state funding by matching more than the required 20%</li> </ul>
III. <b>Reaching Children and Families:</b> Ensuring that Head Start resources are targeted to children, families, and communities of greatest need.	<ul style="list-style-type: none"> <li>• Distribute slots equitably throughout the county based on economic need.</li> <li>• Increase the number of slots to serve closer to 100% of eligible children and families.</li> <li>• Shift slots from Head Start to Early Head Start given that California public schools now offer free Transitional Kindergarten for children aged 4</li> </ul>
IV. <b>Investing in the Workforce:</b> Supporting a highly skilled workforce with competitive pay, benefits, and access to supports for staff wellness.	<ul style="list-style-type: none"> <li>• Attempt to achieve parity with local school district pre-school teacher salaries by increasing salaries for county employees and increasing rates for partners.</li> </ul>
IV. <b>Quality Environments:</b> Strengthening the key components of infrastructure that assist Head Start programs with operating most effectively.	<ul style="list-style-type: none"> <li>• Expand mental health for children and families.</li> </ul>

<sup>18</sup> Head Start Work Is Heart Work: OHS Priorities | ECLKC (hhs.gov)

**BOARD OF SUPERVISORS OF CONTRA COSTA COUNTY,  
CALIFORNIA**

**Adopted this Order on July 13, 2023 by the following vote:**

**AYES:**

**NOES:**

**ABSENT:**

**ABSTAIN:**

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**RESOLUTION NO. 2023/274**

**RESOLUTION OF THE BOARD OF SUPERVISORS ESTABLISHING THE FORMAL  
GOVERNANCE STRUCTURE FOR THE CONTRA COSTA COUNTY HEAD START  
PROGRAM**

The Contra Costa County Board of Supervisors resolves as follows:

The formal governance structure for the Contra Costa County Head Start program is established by the Board of Supervisors as follows:

**I. GENERAL**

This policy of the Board of Supervisors establishes and describes the formal structure of program governance for the Contra Costa County Head Start program, including the oversight of quality services for children and families and procedures for making decisions related to program design and implementation. To the extent that the provisions of this policy conflict with the provisions of the 2019-2021 Community Services Bureau Policies & Procedures Manual approved by the Board of Supervisors on July 30, 2019 (attached as Exhibit A), this policy will prevail and be given full effect. This policy supersedes Head Start Agency Governance Policy No. 22-60, approved by the Board of Supervisors on October 18, 2022. This policy of the Board of Supervisors, as approved by resolution by the Board of Supervisors, binds the Board of Supervisors to its legal and fiscal responsibilities, as set forth herein.

**II. REFERENCES**

- A. Head Start Program Performance Standards (45 CFR 1301.2) (see 45 CFR chapter XII)
- B. Head Start Act section 642(c)(1) (see 42 U.S.C. 9837)
- C. Contra Costa County Administrative Bulletins 100 (General), 200 (Budget & Fiscal), 300 600 (Payroll & Timekeeping), 400 (Personnel), 500 (Property & Equipment), 600 (Purchasing)



- D. Employment & Human Services Department Manual, Memoranda, and other requirements

### III. POLICY OF THE BOARD OF SUPERVISORS

- A. Governing Body. The five members of the Contra Costa County Board of Supervisors serve as the governing body (“Board”) of the County’s Head Start Agency (“agency”) which operates the County’s Head Start program (“Program”).

- 1. Responsibilities. The Board shall:

- a. have legal and fiscal responsibility for administering and overseeing programs under the Head Start Act, including the safeguarding of Federal funds;
- b. adopt practices that assure active, independent, and informed governance of the Head Start agency, including practices consistent with Head Start Act section 642, subsection (d)(1), and fully participate in the development, planning, and evaluation of the Head Start programs involved;
- c. be responsible for ensuring compliance with Federal laws (including regulations) and applicable State, tribal, and local laws (including regulations); and
- d. be responsible for other activities, including:
  - (1) selecting delegate agencies and the service areas for such agencies;
  - (2) establishing procedures and criteria for recruitment, selection, and enrollment of children;
  - (3) reviewing all applications for funding and amendments to applications for funding for programs under the Head Start Act;
  - (4) establishing procedures and guidelines for accessing and collecting information described in Head Start Act section 642, subsection (d)(2);
  - (5) reviewing and approving all major policies of the agency, including:
    - (a) the annual self-assessment and financial audit;
    - (b) the agency's progress in carrying out the programmatic and fiscal provisions in such agency's grant application, including implementation of corrective actions; and

- (c) personnel policies of the agency regarding the hiring, evaluation, termination, and compensation of agency employees;
- (6) developing procedures for how members of the Policy Council are selected, consistent with Head Start Act section 642(c), paragraph (2)(B). The Board adopted bylaws of the Policy Council on April 27, 2021. Any amendments to the Policy Council bylaws shall be approved by the Board in accordance with the Head Start Act. The number of members for the Policy Council is determined by multiplying the total number of Head Start and Early Head Start slots at each site by 1/60 (one representative for each 60 slots);
  - (7) approving financial management, accounting, and reporting policies, and compliance with laws and regulations related to financial statements, including the:
    - (a) approval of all major financial expenditures of the agency;
    - (b) annual approval of the operating budget of the agency;
    - (c) selection (except when a financial auditor is assigned by the State under State law or is assigned under local law) of independent financial auditors who shall report all critical accounting policies and practices to the governing body; and
    - (d) monitoring of the agency's actions to correct any audit findings and of other action necessary to comply with applicable laws (including regulations) governing financial statement and accounting practices;
  - (8) reviewing results from monitoring conducted under Head Start Act section 641A(c), including appropriate follow-up activities;
  - (9) approving personnel policies and procedures, including policies and procedures regarding the hiring, evaluation, compensation, and termination of the Executive Director, Head Start Director, Director of Human Resources, Chief Fiscal Officer, and any other person in an equivalent position with the agency;
  - (10) establishing, adopting, and periodically updating written standards of conduct that establish standards and formal procedures for disclosing, addressing, and resolving:
    - (a) any conflict of interest, and any appearance of a conflict of interest, by members of the Board, officers and employees of the Head Start agency, and consultants and agents who provide services or furnish goods to the Head Start agency; and

- (b) complaints, including investigations, when appropriate; and
  - (11) to the extent practicable and appropriate, at the discretion of the Board, establishing advisory committees to oversee key responsibilities related to program governance and improvement of the Program involved.
  - (12) Each Board member shall visit at least one Head Start center in the Board member's district annually.
2. Monthly Report. A monthly report addressing, but not limited to, the topics specified below will be sent to all members of the Board. The Head Start Executive Director and the Head Start Director will present the monthly report at a public meeting to the Board, who will receive and discuss the report and provide any direction at the meeting.
- a. Program financial statements including credit card expenditures;
  - b. Program information summaries;
  - c. Program enrollment reports including attendance reports for children whose care is partially subsidized by another public entity;
  - d. Meals and snacks provided through programs of the Department of Agriculture;
  - e. Community needs assessment;
  - f. Communication and guidance from the Head Start Secretary;
  - g. Program information reports; and
  - h. Tracking of complaints, including the status of their resolution and any corrective actions.
3. Conflict of Interest. Members of the Board hold their position as a result of public election. Under Head Start Act section 642(c)(1)(D), members of the Board are authorized to serve as members of the governing body of the agency. Members receive compensation in their capacity as elected members of the Contra Costa County Board of Supervisors and do not receive any additional compensation as members of the governing body of the agency. Members of the Board must not have a financial conflict of interest with the Program, including with the delegate agency. Board members must report to the Program all their immediate family members who are employed by the County or by the delegate agency, and the County will report such information to the Head Start Secretary.
4. Training. The Board will receive annual training, including, at a minimum, governance training. Appropriate training and technical assistance shall be provided to the members of the Board to ensure the Board members understand the information the members receive and can effectively oversee and participate in the programs of the Head Start agency. New

Board members who take office after the annual training for that year will receive the annual training within three months after taking office. This training shall be in addition to all existing training requirements for elected officials as required under state law.

- B. Head Start Oversight Committee. The Head Start Oversight Committee is established, as authorized by 45 CFR 1301.2(c). The Head Start Oversight Committee is an advisory committee of the Board of Supervisors. The Committee is comprised of two members of the Board, appointed annually by the Board. The Committee shall meet every other month, or more frequently as necessary. The Committee will make recommendations to the Board on key responsibilities related to program governance and improvement of the Head Start Program. The Board does not delegate to the Committee any of the Board's legal and fiscal responsibilities under the Head Start Act or Head Start Performance Standards.
- C. Head Start Executive Director. The Board designates the Employment & Human Services Department Director as the Head Start Executive Director ("Executive Director"). No Head Start funds will be utilized to pay any part of the incumbent's salary. The Board does not delegate to the Executive Director any of the Board's legal and fiscal responsibilities under the Head Start Act or Head Start Performance Standards. All duties and responsibilities assigned to the Executive Director do not replace the administrative responsibilities of the Board. The Executive Director has the following duties:
1. To carry out and implement the programmatic and fiscal obligations of the Head Start grant, as directed by the Board;
  2. To access and collect information necessary for the Monthly Report (see above) and present the Monthly Report to the Board;
  3. To hire, evaluate, and terminate Program employees, including the Head Start Director, in accordance with the applicable Memoranda of Understanding, the Personnel Management Regulations, and the Salary Regulations, all of which were adopted by the Contra Costa County Board of Supervisors;
  4. To implement, consistent with this policy and the Head Start Act, the selection of members of the Policy Council at each site, by multiplying the total number of Head Start and Early Head Start slots at each site by 1/60 (one representative for each 60 slots). The Board shall ensure that Policy Council members are selected as outlined in Head Start Act section 642(c) (1)(E)(iv)(5)(VII);
  5. To recommend, subject to Board approval, actions to correct audit findings pertaining to financial statement and accounting practices and to monitor Program operations to cure the audit findings; and
  6. To ensure compliance with all other Head Start Act and Program Performance Standards requirements not otherwise explicitly identified in this policy.

D. Policy Council. The Policy Council is elected by the parents of the children currently enrolled in the Program and is comprised of parents of children currently enrolled in the Program, including the delegate agency, and members at large of the community served by the Program, including parents of children formerly enrolled in the Program. The majority of the Policy Council membership must be comprised of parents of children currently enrolled in the Program. The Policy Council is responsible for the direction of the Program, including Program design and operation, and long- and short-term planning goals and objectives, taking into account the annual communitywide strategic planning and needs assessment and self-assessment.

1. Responsibilities. The Policy Council will approve and submit to the Board decisions about the following:
  - a. Activities to support the active involvement of parents in supporting program operations, including policies to ensure that the County is responsive to community and parent needs;
  - b. Program recruitment, selection, and enrollment priorities;
  - c. Applications for funding and amendments to applications for funding for programs, prior to the submission of the funding applications;
  - d. Budget planning for program expenditures, including policies for reimbursement and participation in Policy Council activities;
  - e. Policy Council bylaws. The Board adopted the bylaws of the Policy Council on April 27, 2021. Any amendments to the Policy Council bylaws shall be approved by the Board in accordance with the Head Start Act;
  - f. Program personnel policies and decisions regarding the employment of program staff, consistent with Head Start Act section 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; and
  - g. Developing procedures for how Policy Council members are elected; and
  - h. Recommendations on the selection of delegate agencies and the service areas for such agencies.
2. Conflict of Interest. Members of the Policy Council must not have a conflict of interest with the County, including any delegate agency, and must not receive compensation for serving on the Policy Council or for providing services to the County.
3. Training. Appropriate training and technical assistance shall be provided to the members of the Policy Council to ensure the members understand the information the members receive and can effectively oversee and participate in the programs of the Head Start agency. This training shall be in addition to all existing training requirements for advisory body officials as required under state law.

CONTRA COSTA COUNTY EMPLOYMENT & HUMAN SERVICES  
DEPARTMENT COMMUNITY SERVICES BUREAU

# POLICIES AND PROCEDURES

SECTION 1-PROGRAM GOVERNANCE  
**2019-21**

Board of Supervisors Approved: 07/30/19

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## PART I. Program Governance

### A. Service Area

Contra Costa County Employment and Human Services Department, Community Services Bureau (CSB) is the designated Community Action Agency for Contra Costa County. CSB is the Head Start and Early Head Start Grantee for Contra Costa and also administers the California Department of Education Child Development Programs, Community Services Block Grant, Stage II/Alternative Payment Programs, Low-Income Home Energy Assistance and Weatherization Programs.

### B. Service Recipients

The Bureau's services are directed towards building self-sufficiency among the county's low-income residents and vulnerable populations. CSB serves pregnant women and children ranging in age from birth through kindergarten, individuals and families. All service recipients served under the various CSB funding streams must meet the eligibility requirements of the funding source.

### C. Program Governance

**1. The Board of Supervisors:** The Board of Supervisors (BOS) is a body of publically elected officials. Their role is to oversee the operations of county departments and to exercise executive and administrative authority through the county government and county administration. The BOS is also charged with responsibility and oversight to the Head Start and Early Head Start grants as outlined (please refer to part 8).

**2. Policy Council Composition and Formation:** The County Board of Supervisors and the Policy Council determine the total size of the Policy Council, procedures for electing parent members, and selection of community representatives.

Policy Council composition is reviewed annually to ensure it meets the General Membership guidelines of HSPS 1301.1(a); 1301.3(b)(c). Consideration is given to the number of Head Start and Early Head Start currently enrolled children along with program options (Full Day, Part Day, and Home Base). The following steps explain how to determine Policy Council composition:

- Determine the total number of Head Start and Early Head Start slots
- Determine the total HS/EHS slots for each site by program option based on the current CSB slot map (HS/Full Day, HS/Part Day, EHS/FD, and Home Base (EHS/HS collectively). Calculate the percentage of each program option (multiply the number of program option slots for each site by the total number of slots). This will give you the percentage of membership that each option should represent.
- The number of representatives is determined using the formula  $1/60$  (1 representative per site for every 60 HS or EHS slots).

This information is included in the Policy Council By-laws approved annually by the Board of Supervisors and the Policy Council. The term for members is one year, September to August. Parent representatives will be (re)elected annually by each center's parent committee. Community representatives will be selected annually. The maximum number of one-year terms an individual can serve

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is five. No grantee, delegate or childcare partner staff or members of their immediate family may serve on the Policy Council or on the Delegate Agency's Policy Committee. Immediate family is defined as any parent, child, sibling, grandparent, significant other, co-parent or spouse of staff. At least 51% of the Policy Council members must be parents of currently enrolled children.

Reimbursements are provided to parent representatives to support participation in their policy council or policy committee's meetings/activities as stated in the Policy Council Bylaws and Policy Council Handbook.

**3. Procedures for Electing Parent Representatives to the Policy Council:** The parent committees at each site will elect parent representatives as early as possible in the program year. This is done by voting at the parent meetings. Parent representatives must be parents of currently enrolled children in the program.

**4. Procedures for Electing Community Representatives to the Policy Council:** Community representatives are enlisted from the local community. They represent past parents and local community agencies. All Community Representatives must be elected by the Policy Council. Membership for Individual Community Representatives is also limited to 5 one-year terms. CFR 1301.3(d)(1)(4)

- **Past Parent Community Representatives:** The past parent representatives must submit a letter to the Policy Council requesting consideration to be a community representative. Letters are read during a business meeting, and the Policy Council must vote to approve the parent's request. If the Policy Council receives more requests than vacancies, all letters are read for consideration, the Policy Council votes, and the majority decision rules.
- **Community Agency Representatives:** The Policy Council determines which community agencies are invited to participate on the Council. Agencies are drawn from the local community and are familiar with resources and services for low-income children and families. CSB staff and Policy Council members assist by contacting agencies to seek interest in joining and requesting the name of an agency representative to be elected onto the Policy Council as early in the program year as possible. Agency representatives are presented and considered for approval by the Policy Council.

**5. Parent Committee:** The Parent Committee must carry out at least the following minimum responsibilities:

- Advise center staff in developing and implementing local program policies, activities, and services.
- Maintain communication between Policy Council and Policy Committee at the delegate level.
- Plan, conduct, and participate in informal, as well as formal, programs and activities for children, parents and staff.

**6. Policy Council Responsibilities:** The Policy Council has policy-making authority and is governed by its By-laws. Annually the Policy Council and Board of Supervisors are oriented to CSB Program Services and receive training on:

- Policy Council Roles and Responsibilities

- Program Governance\_responsibilities
- Head Start Performance Standards
- Head Start Philosophy
- Gran Cycle Process
- Share Decision Making Process and Parliamentary Procedures
- County code of Conduct and Conflict of Interests
- Eligibility, Recruitment, Selection, Enrollment, Attendance ERSEA

A make-up orientation is also provided for members joining later in the program year. A joint training with the Board of Supervisors is also scheduled annually.

**7. Governance and Management Responsibilities:** The following chart outlines the required Board and Policy Council Approvals:

Procedure/Plan/Application	Approval Required		Frequency of Approval
	Governing Body BOS	Policy Council	
1. Planning Procedure (Road Map) (Planning Calendar)	X	X	Annually
2. Goals and Objectives (included in the Grant application)	X	X	Annually
3. Child Recruitment/Selection Procedures (Selection Criteria/ Recruitment Plan)	X	X	Annually
4. Budget and Grant Application	X	X	Annually - and as needed for supplements
5. Self-Assessment Plan for Corrections (if applicable)	X	X	Annually
6. Board Composition Requirements for non-governmental agencies	N/A	N/A	One-time (until changed)

7. Board and PC Conflict of Interest requirements (included in Bylaws)	X	X	One-time (until changed)
8. PC Bylaws - Board approval of PC Composition Procedure for how PC members are selected	X	X	One-Time (until changed)
9. Financial Management Accounting & Reporting Policies including audit	X	N/A	One-time (until changed)
10. Policies and Procedures including:  a) Policy defining roles/ responsibilities of governing board members for implementing a high quality program b) Dispute Resolution & Impasse Procedure c) Procedures to resolve community complaints, conduct investigations d) Personnel Policies & Procedures e) Hiring/Termination procedures for Executive, Head Start, Fiscal, HR Directors and program staff.	X	X	One-Time (until changed)

Items Requiring Reports to the BOS and PC:

Required Report	Frequency
a) Budget, Credit Card Expenses reports	Monthly
b) Program Reports	Monthly

c) Enrollment Reports	Monthly
d) USDA Meals/Snack	Monthly
e) Financial Audit	Annually
f) Self-Assessment	Annually
g) Community Strategic Planning Goals and Objectives	Jan/June Updates
h) Communication from the Secretary/Human Health Services	As Released
i) Program Information Report PIR	Annually
j) Ongoing Monitoring Results	Semi-Annual
k) School Readiness Goals-Data	As Released (3 times a year)

**8. Responsibilities of Board of Supervisors, Policy Council, Employment and Human Services Executive Director and Community Services Bureau Director:**

**i. Background**

The responsibilities of the Board of Supervisors, Policy Council, and Director of Program Services are described in the Head Start Performance Standards. The Performance Standards describe certain responsibilities for the Director of the Head Start program, leaving decisions regarding other responsibilities to Executive Directors of the local Head Start Grantee.

**ii. Reference**

- Head Start Performance Standards, 45 CFR 1301.1 and CFR 1301.5

- Policy

The Employment and Human Services (EHSD) Director and the Community Services Bureau Director shall ensure that the Policy Council and the Board of Supervisors are routinely and frequently informed of, and trained on, management procedures and functions, as well as the Federal laws and regulatory compliance issues required to ensure a quality program. Mutual communication and understanding between the governing board, the policy council and program management are fundamental prerequisites for a healthy Head Start Program. The EHSD Director and the Community Services Bureau Director will also ensure that the Board of Supervisors has an understanding and appreciation of the Head Start Philosophy and the role of parents and Policy Council in shared governance. Careful and complete communication and planning will ensure effective oversight and appropriate actions and interventions that will foster the mutual understanding and actions of all entities responsible to maintain a quality Head Start Program.

### iii. Procedures

- The Employment and Human Services Department (EHSD) Director will provide a report to the County Administrator’s Office monthly.
- Report topics will include all required monthly report items noted in section 7, Enrollment and Average Daily Attendance, and may additionally include, but are not limited to:
  - Fiscal/budget issues
  - Personnel matters
  - Facility issues
  - Policies and Procedures
  - Program planning
  - Annual Self-Assessment
  - Annual independent audit
  - Grant development and submission
  - Correspondence with ACF
  - Program issues
  - Regulatory changes
  - Family Engagement
  - Planning for joint Board of Supervisors/ Policy Council training activities
- The report will be sent monthly to the Health and Human Services Committee of the Board of Supervisors, to be included on the agenda by the Board of Supervisors and provided to the Chair of the Policy Council.
- The Employment and Human Services Director and Community Services Bureau Director will jointly meet throughout the program year, individually, with each member of the BOS to review reports, give updates and advice, and train on new regulations and initiatives.

**9. Role of Policy Council in the Annual Grant Development Process:** Throughout the year, the Policy Council is involved in the grant process through a variety of ways:

- The Program Services subcommittee meets throughout the year to review/discuss and update the annual program goals and objectives and the annual parent services budget and activities.

- The Fiscal subcommittee meets monthly to develop, adjust and approve the program budget for the coming year’s grant and tracks it throughout the year.
- The Policy Council approves the annual program goals and objectives.
- The Policy Council reviews the Community Assessment annual updates and the full easement every five years.
- The Policy Council also reviews and approves the Annual Planning Calendar, Child Recruitment and Selection Criteria, the Self-Assessment Plan for Corrective Actions, all of which are included in the submission of the Annual Grant Application.

Once these components of the grant are reviewed and approved, the Policy Council approves the full grant in the fall before submission to ACF.

## **10. Resolution of Disputes between the Board of Supervisors and the Policy Council (Impasse Policy)**

### **i. Background**

The Performance Standards require that Head Start grantees establish a policy and necessary implementation procedures for the resolution of internal disputes between the Board of Supervisors and the Policy Council.

### **ii. Reference**

Head Start Performance Standards, 45 CFR 1301.6

### **iii. Policy**

The Chairpersons of the Board of Supervisors and the Policy Council will monitor actions and decisions of each body as they relate to their respective responsibilities. It is the policy of Contra Costa County to resolve any disagreements between the Board of Supervisors and the Head Start Policy Council fairly and within required timelines. Whenever possible, disagreements will be resolved through processes of mediation and conciliation, including discussion, compromise, and consensus seeking between parties, and, if necessary, professional mediation.

### **iv. Administrative Procedure**

- **Informal Resolution:** In the event that a conflict exists, they will notify each other in writing within 30 days and give reasons why it does not accept the decision of the other, and then they will initiate informal discussions between representatives of the two bodies and seek a mutually acceptable resolution.
- **Mediation:** If informal resolution is not effective, the Chairpersons of the Board of Supervisors and the Policy Council shall request that the Community Services Bureau Director identify mutually agreeable qualified third party to provide professional mediation services. The mediator will use conciliation, compromise and consensus seeking between the two bodies. The mediation process shall be non-binding.
- **Arbitration:** If no resolution is reached with a mediator, the Chairpersons of the Board of Supervisors and Policy Council shall request that the Community Services Bureau Director identify

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mutually agreeable arbitrator, whose decision is final.

## 11. Resolution of Community Complaints

- i. "Community complaint" is defined as any complaint from anyone other than staff
- ii. The Policy Council is generally responsible for (and has the legal and fiscal responsibility for guiding/directing/carrying-out the establishment) the method of hearing and resolving community complaints about the Contra Costa County Community Services Bureau
- iii. Process for Solving Disputes/Complaints: Any parent (enrolled or applying for services) or community member may report a complaint to a program staff member of any of our program/sites, i.e. Site Supervisor, Teacher, Associate Teacher, or Comprehensive Services, Analyst, or clerical staff. If the complaint comes in by phone, the staff member documents that complaint. Complaints may come from sources other than the site, i.e. Board of Supervisors. Anyone receiving a complaint will immediately contact a program manager by phone with the following information:
  - Step 1: Document the complaint in writing to include the following information: Contact information of the complainant: Name, Address, Phone Number, email (if appropriate); Information Shared: When was the occurrence? Person/s involved? What happened? Where did it occur? And what was the impact? Other information that the complainant wishes to share may also be documented. If the complaint comes in by phone: program staff document call, note time, date and name of the staff member name
  - Step 2: Complaint goes first to the Site Supervisor who must discuss the details with their Assistant Director within 24 hours of the report. The Assistant Director works with the program staff to attempt resolution within 48 hours.
  - Step 3: Complaints not resolved within 48 hours will be brought to the attention of the Division Manager, Bureau Director, or their designee.
  - Step 4: If the complaint is then resolved, the Bureau Director will send a memo to all involved, stating remedial actions to be taken by staff and the time line for these actions.
  - Step 5: If satisfactory resolution is still not achieved, the Bureau Director will request the EHSD Director to review all documentation. When the complaint is then resolved, the EHSD Director will send a memo to all involved, stating remedial actions to be taken by staff and the time line for these actions.
  - In addition, Manager, Supervisors and Assistant Directors maintain the "Client Concern Log" to document and track all program concerns/complaints and resolutions.

## Part II. Communications

### A. General Description

All staff is expected to communicate within the department and externally using the following communication tools:

- Common, not technical terms
- A professional tone
- Assurance that the approach is based on each family’s cultural/linguistic preferences
- Adherence to the principles of Facilitative Leadership
- Encouragement of a team approach
- Ensure that translation services are available when needed

## B. Internal Communication

Employees must follow County policy with regards to courtesy and confidentiality. High staff morale is dependent on friendly greetings, active listening and a display of a helpful attitude toward team members. The following are methods of internal communication with program staff:

- Staff summits
- Regularly scheduled staff meetings at varying levels, such as:
  - Senior Administrative Management
  - Senior Management
  - Comprehensive Services
  - Cluster-based
  - Site-level
  - Daily Interactions
- Staff newsletters
- Internal memos
- Policies and Procedures
- Fax
- Email
- Short Messaging System(SMS/Texting)
- Payroll notices
- Telephone
- Bureau Reports
- Computerized Tracking Systems (CLOUDS)
- Video Conferencing System
- Annual Planning Calendar
- Intranet

### **Internal Communication Expectations:**

Purpose: to ensure that multi-level communication occurs throughout CSB and that employees at every level of the organization are kept informed of Bureau updates, happenings and changes and has the opportunity to provide feedback. Communication is woven through each of CSB’s values and is critical to the effectiveness of an organization.



**Communication Expectations:**

- Supervisors and managers are responsible for sharing critical information and key messages to their staff timely.
- Key stakeholders are involved at varying levels in planning, decision-making and communication depending on the decision.
- Supervisors/ managers are expected to hold regular, one-one meetings with subordinates, which includes time for feedback, two-way reflective communication and active listening.
- Staff are encouraged to provide feedback verbally, through e-mail and written correspondence
- Process, relationship and results are valued as equally important in communicating.
- Written and verbal communication has a positive intent, respectful tone and encouraging word choice. We are models for one another.
- Information communicated is tailored to the audience.
- Communication is concise and hits on the key messages/ points.
- Communication aides such as visuals and presentations are considered and shared as appropriate.
- Email protocol is followed. Protocols are saved on the Intranet at CSB Resource Center/Shared Documents/CSB Policies and Procedures/ E-mail Protocol.
- Expectations of next steps are clearly defined at the end of each meeting.
- Justification for change and context is clearly explained.
- We value the 3R’s (responsiveness, respect, relationships) in our communications.
- When starting a new program, policy, project, etc..., identify 2-3 key points to communicate as to why it is important and how it will make it better.
- We maintain the intranet as clear and user-friendly as possible to ensure materials are easily accessed; and use hyperlinks whenever possible in sharing information electronically.
- Multi-modes and venues are used to communicate key messages including e-mail, newsletters, memos, verbal, presentations, etc.

Message	Method	Audience	Frequency	Expectation
Bureau Strategic Goals/ direction of the organization	Memo or presentation	All staff	Quarterly	All staff at every level of the organization knows the direction of the Bureau
Department, Bureau-wide changes and updates	Memos, Sr Mgt meetings, newsletter, all-staff calls, e-mails	All-staff	Monthly and Quarterly	Staff are kept abreast of changes
Communication sessions – circles, focus groups	Meetings	A selection of staff bureau-wide	Bi-annually or as needed	Staff are kept abreast of changes and Sr managers hear from staff
Year-end report	Memo and/or Meeting Presentation	All Managers and Supervisors	Annually – December/ January	PowerPoint or report is shared with all staff by managers and supervisors
New staff and promotions	e-mail/ and unit meetings	Managers and Supervisors	As needed	Staff know about new hires

Message	Method	Audience	Frequency	Expectation
		and/ or specific units		
Unit changes and updates	e-mail, unit meetings, All-Cluster meetings	Managers and Supervisors and/ or specific units	As needed	Staff know about changes
Updates/ information Sr Mgt meetings	Unit meetings, All-Cluster meeting	Sr Mgt Team	Monthly	New projects, issues, updates, changes are shared and discussed as a team
Updates/ information from All-Cluster and Unit meetings	Center and staff unit meetings, postings on staff boards	Staff	Monthly	New projects, issues, updates, changes are shared and discussed
Updates and quick messages of upcoming events	Facebook, etc...	All staff and greater community	3X per week or as needed	CSB is publically celebrated and upcoming events are shared

Other means of communication: Planning calendars, Policies and procedures, Unit reports, Board reports and meeting minutes

### C. Internal Communication with Parents

CSB staff strives to provide exceptional customer service and must always use their best judgment with the utmost professionalism. Every employee is responsible for delivering clear and helpful information to our parents. A key element to ensuring communication is both clear and helpful is to ensure it is delivered in the most supportive manner, place and time.

Staff will not address challenging behaviors that may have occurred during the day with parents at pick-up or drop off; instead they will let the parent know that they would like to discuss challenging behaviors and request a time to meet.

Staff will not request letters of recommendation from parents; however they may accept an unsolicited letter. Requesting such a letter maybe perceived as intimidating. Instead, parents should be encouraged to complete the Parent Recognition of Staff Excellence for any staff member they feel is providing excellent service and support.

The following are methods of communication with parents:

- Monthly Policy Council meetings – program planning, policy and financial information is shared
- Monthly Policy Council sub-committee meetings
- Monthly Policy Council executive board meetings
- Monthly parent meetings
- Monthly food menu with nutrition guidance
- Health Bulletins

- Parent surveys
- Parent-teacher conferences
- Home visits
- Quarterly family newsletters
- Parent bulletin boards that include:
  - Upcoming activities; posted memos; health and safety information logs; site emergency procedures; parents' and child's rights; and Policy Council minutes and agendas
- Daily classroom schedules
- Weekly lesson plans
- Parent policies and procedures
- Dissemination of pertinent information regarding program planning, communications from Office of Head Start, financial reports and grant applications.
- Planned site activities
- Planned community events
- Social Media Tools
- Communication with Delegate Agency and Community Childcare Partners:
  - Regularly scheduled meetings
  - Regular monitoring
  - Joint trainings
  - Appointed members from the delegates on the Policy Council
  - Joint annual self-assessments
- Email
- Telephone
- Fax
- Monthly reports
- Short Messaging System (SMS/Texting)

#### D. Communications with Governing Bodies and Policy Groups

1. **The Policy Council:** Serves as a link between public and private organizations, the Delegate Agency Policy Committee, Subcontractors, the Grantee-Operated Program Site Committees, the Grantee, the County Board of Supervisors and the community it serves. Mutual communication and understanding between the governing board and program management are fundamental for a high quality Head Start Program.
2. **Monthly meetings with the County Administrator's Office:** The Employment and Human Services Department (EHSD) Director and the CSB Director also ensure that the Board of Supervisors has an understanding and appreciation of the Head Start philosophy and the role of parents and Policy Council in shared governance. Monthly meetings are held with the County Administrator's Office to discuss various areas of the program. A meeting report is generated by the EHSD Director and the CSB Director. The meeting's report is sent monthly to the Health and Human Services Committee of the Board of Supervisors. In addition, the CSB Director and other assigned staff, meet throughout the program year, individually, with each member of the BOS to review reports, tour centers, give updates and advice, and train on new regulations and initiatives.

## E. External Communication

**1. Communication with Partnerships:** CSB has several types of Community Partnerships and all of them provide valuable services to our children and parents. Our reputation in the community is often dependent upon the respect and assistance provided to our partners when in contact with them. Every employee is responsible for delivering clear and helpful information to the public at large and to our partners in particular. External Partners include but are not limited to:

- State/Local Policy Groups
- State Department of Education
- Local Planning Council
- First Five Commissions
- County Departments
- Community-based Organizations
- Contra Costa County Special Education Local Planning Areas (SELPAs)
- Child Care Partners
- Policy Forum
- Local Education Agencies
- Contra Costa County School Superintendents
- Contra Costa One Stop Consortium
- California Welfare Directors Association Committees
- News / Media Outlets

### 2. Press Calls:

- i. All press calls should be immediately reported to the CSB Bureau Director and to the Employment & Human Services Department's Community Relations Director (also known as Public Information Officer or PIO) at (925) 313-1779, or the Executive Secretary at (925) 313-1629 in the Office of the Director for the Employment and Human Services Department. This will guarantee that the CSB and EHSD Directors know which stories and issues are attracting press attention. It will also make it easier for the reporter to be connected with the proper Department spokespersons who can respond fully and accurately. In addition, it will ensure there is proper follow up to meet deadlines, address issues and manage photography.

The Community Relations Director will be available to prepare staff for interviews, review the topic of interest and discuss points that will help the interview be complete and accurate while getting the Department's message across to the public.

On occasion, members of the press will take a shortcut into the Department and contact staff directly. If the staff member has been authorized by his/her Bureau Director to respond to the press, they should first notify the Community Relations Director who can assist in managing and maximizing the media opportunity.

- ii. If the staff person has not been authorized by their Bureau Director to respond to the press, they are required to adhere to the following:

- Do not respond directly to print, vocal, and/or visual media representatives;
  - Politely refer all contacts to the Community Relations Director at (925) 313-1779 or EHSD's Executive Secretary at (925) 313-1629 in the Office of the Director;
  - Inform your manager/supervisor immediately;
  - Provide the following information: date, time, and location of contact
  - Media representative's name, organization, phone number and deadline;
  - Summary and nature of the inquiry
- iii. There are many differing aspects and/or components related to the successful operation of our program. It is unfair for individual staff members to be placed in and/or to place themselves in a position of stating, explaining, and/or formulating policy for the department. An innocent comment intended to project a positive view can be reproduced with a negative spin or violate the right to privacy of our clients. Proposed dialogue when fielding a call from the media:
- "I would like to respond to your questions. My concerns rest with preserving and protecting the privacy of our children and their families. Please give me your name, organization, and phone number so that I can properly refer your request."
  - Staff with story ideas or events to promote are asked not to contact the press directly, but to contact the Community Relations Director at (925) 313-1779, so these stories can be channeled to the press most likely to cover them.

### 3. Tools for External Communication are as follows:

- Formal/informal agreements
- Electronic Newsletters
- Regular meetings
- E-mail
- Short Messaging System (SMS/Texting)
- Telephone
- Membership activities
- Social Media Tools (Facebook/Twitter etc.)
- Annual Report
- Fact Sheet

### 4. CSB E-mail Protocol:

The following is a basic guideline of enhancing our e-mail communications:

- **Purpose of an e-mail** is:
  - To Communicate – To get the reader's attention within few lines of text.
  - To Document – Send a report, instructions, procedure, information to file, etc.
- **Only discuss public matters** - Ask yourself if the topic being discussed is something you would write on company letterhead or post on a bulletin board for all to see before clicking "send."
- **Respond in timely fashion**- Depending on the nature of the e-mail and the sender, responding within 24 to 48 hours is acceptable.

- **Avoid using shortcuts to real words**- emoticons, jargon, or slang for business e- mails such as “4 u” or “Gr8”, etc.
- **Be clear on who the recipient is** – When there are multiple recipients or Cc’s but one or two specific people who you are directly addressing, address the specific person(s) by name at the start of the email.
- **Be clear in your subject line** – the subject line must match the message. Be succinct and to the point in the subject line. Never leave this blank.
- **Evaluate the importance of your e-mail** - Do not overuse the high priority option unless very necessary. If an immediate or less than 24-hour response is needed, it is better to pick up the phone.
- **Keep it short and get to the point** - State the purpose of the e-mail within the first two sentences. Be clear, and be up front. Anything more should happen in a verbal conversation.
- **Know your audience** - e-mail greeting and sign-off should be consistent with the level of respect and formality of the person you are communicating with.
- **Refrain from sending one-liners** - "Thanks," "Oh, OK" and “Action”; do not advance the conversation in any way. Put "No Reply Necessary" at the top of the e-mail when you do not anticipate a response.
- **Confidential Information blocked** -Do not share any of the following information in e-mail communications:
  - Credit Card information
  - Social Security numbers
  - HIPAA-related medical information ((the Health Insurance Portability and Accountability Act of 1996 addresses the use and disclosure of individuals’ health information)
  - Username and password
- **Indicate what response/action you expect** - such as “Action needed”, “Response needed”, or, if none “FYI only”. Include a deadline or desired deadline for needed action and responses.
- **Your e-mail is a reflection of you** - Every e-mail you send adds to, or detracts from your reputation. Always include a signature - You never want someone to have to look up how to get in touch with you. You name and contact information should always be included.
- **Send or copy others only on a need to know basis** - Before clicking on the Cc lines, ask yourself if all the recipients need the information in your message.
- **Beware of the "reply all."** - Do not hit "reply all" unless every member on the e- mail chain needs to know.
- **When not to send an e-mail and pick up the phone** - When a topic is sensitive or has many parameters that need to be explained or negotiated and will generate many questions or may generate confusion, do not handle it via e-mail. If the email exchange has gone back and forth more than a few times, it is usually better to continue the conversation by phone. In addition, e-mails should not be used for last minute cancellations of meetings, lunches, interviews, and never for difficult news. Although, if its news you have to deliver to a large group, e-mail is more practical.
- **Avoid writing in all capital letters** – It sends the wrong message and it is hard to read.
- **Beware of tone** – Communicating tone in email is challenging and must be done by thoughtfully choosing words. Sarcasm, for example, is an expression of anger and often comes across hotter than it would in person, where the face and voice assist understanding.
- **Beware of emotional reply** –Too often someone in anger or frustration types off the reply and hits send before taking time to think. After typing the response, it is advisable to take a moment,

think, may be take a short break – proof the reply before sending it.

- **Adding attachments-** Send a link instead.
- **Out of Office-** Be sure to add the date of your return and the name of the person to contact in your absence.

#### 4. Social Media Posting Guidelines:

These guidelines shall apply to any and all employees who are permitted as authorized users by Contra Costa Community Services Bureau (CSB) to post content on CSB's social media sites.

These guidelines are intended to apply to all official blogs or social media platforms maintained by CSB, including, but not limited to Facebook, Twitter and Instagram. All such activities are referred to as "social media postings" in this document.

- Social media posting privileges are granted to the pre-approved CSB Social Media Committee.
- The primary and foremost purpose of Contra Costa Community Services Bureau social media platforms is to provide public information and education, to recruit staff and reach out to families that need childcare, and to positively promote the work of our agency, staff and volunteers. The intent is to showcase what our agency does and to communicate with the public via social media outlets.
- All authorized CSB social media users shall always be courteous and respectful of all points of view when posting on CSB's' social media platforms.
- All authorized CSB social media users shall adhere to the CSB brand standards (colors, flyer templates, etc.) in an attempt to ensure the content presented is consistent and visually appealing. Visuals play an important part in social media branding and connectivity to the audience.
- In the event that a negative post or comment is placed on any of CSB's social media platforms, CSB social media posters will not engage in a confrontational, ongoing dialogue. We will instead remove the negative comment and address the issue outside of the public-facing platform, possibly through private messaging if appropriate to follow up/attempt to resolve the issue. This will be done with the assistance of the relevant members of the CSB Leadership Team and approved by the Department Director.
- Common sense is typically the best guide when posting content on CSB's official social media platforms. If you are unsure about a particular posting, please feel free to contact the Social Media Project Manager.
- Social media postings for Contra Costa Community Services Bureau (made on official CSB accounts) may be at the direction of the Bureau Director or designees for the exposure of recruitment efforts, special events, program accomplishments etc.
- Social media postings must not disclose or refer to any information that Contra Costa Community Services Bureau considers confidential information as per the confidentiality policy. If you have any questions about what constitutes confidential information, please contact the Social Media Project

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Manager.

- If a member of the news media contacts you about a social media posting that concerns the business of the Contra Costa County Community Services Bureau, you must refer that person to one of the following: Bureau Director or the EHSD Community/Media relations Manager.
- All CSB social media postings should be made from the perspective of Contra Costa County Community Services Bureau, reflecting our policies, procedures and positions. Social media posts should not reflect any individual's personal point of view or positions.
- Employees need to adhere to the Hatch Act, whose main provision prohibits employees of the federal government and local government employees who work in connection with federally funded programs from engaging in any form of political activity. No lobbying is allowed.
- Be responsible, be nice, have fun and connect

## F. Reporting for County Child Protective Services and State Community Care Licensing

The purpose of these policies and procedures are to provide all department employees with instructions on what specific steps they must take to properly handle any incident involving an abused and/or neglected child, the injury of a child, or a potential child's rights violation. It is important to note that while all employees are charged with the responsibility of reporting incidents involving an abused and/or neglected child, only the EHSD Director or Bureau Director or designee is charged with the responsibility of reporting potential child's rights violations to State Community Care Licensing.

In addition, this policy is intended to make clear the procedure for reporting incidents that may occur both off site and on site.

### 1. Definitions:

- CCL (State): The acronym for State Community Care Licensing, which is a Division of the State of California Social Services Department, and which is responsible for the licensing of the Department's Child Care facilities.
- EHSD Director: The Director of the Employment and Human Services Department
- Bureau Director: The Director of the Community Services Bureau.
- CFS (County): The acronym for Children and Family Services, formerly Child Protective Services, which is a bureau of the County's Employment and Human Services Department and is mandated by the Federal and State government to assess and investigate all referrals which allege that a child is endangered by abuse, neglect, or exploitation.
- Major Injury: Any incident involving a child that requires the intervention of any medical professional (examples of medical professional include: medical advice nurse, hospital, clinic, doctor, ambulance service, emergency room).
- Minor Injury: Any incident involving a child that does not require the intervention of any medical professional as noted above.
- Child's rights violations: Any incident that occurs at a Community Services Bureau facility and involves an employee, contractor, or volunteer of the Department that might violate either the Head Start Code of Conduct or the rights of a child in accordance with State Child Care



## Licensing Regulations.

All employees, at all levels, are expected to follow the policies and procedures so that accurate and timely reporting can be assured to both the County CPS and the State CCL.

### **2. Reporting to CFS:**

- Any employee or contractor who knows or suspects that a child has been abused and/or neglected off site should immediately inform and discuss his/her concerns with the direct supervisor.
- Reports shall be made to Child Protective Services in accordance with mandated reporting responsibilities and laws. A report to the Community Care Licensing (CCL) shall also be made summarizing the CFS report.
- The employee or contractor making the report will provide a copy of the above referenced report to their Supervisor or Manager, who is responsible to inform their Assistant Director.

Additional policies and procedures related to Mandated Reporting can be found in the Child Development Section of this document, "Child Development Reporting Policies".

### **3. Child Injuries:**

#### **i. Minor Injuries**

Immediately report the injury to your Supervisor and the parent after you have tended to the child. (Includes any incident not involving medical professionals) Employees do not report minor injuries to CCL.

If a parent of a child who has sustained a minor injury reports back to the center that they subsequently took the child to be seen by any medical professional, the injury needs to be reported as a major injury. All head injuries regardless of staff determination that it is minor or major shall be reported to the Supervisor immediately who shall contact the parent immediately to pick up the child. "Head Injuries" are defined as injuries to the skull or cranium, and do not include the mid and lower facial areas. Staff shall complete a written injury report for the parent prior to pick-up time and at pick-up time talk with the parent to explain the injury, action taken by staff, and provide a copy of the written report. Supervisor shall make a complete entry in the Supervisor's Injury Log for all injuries, minor and major.

#### **ii. Major Injuries**

Report the incident immediately to a Site Supervisor, the Assistant Director, and the parent. Depending on the severity of the injury, all staff should take the following steps:

- Comfort the child.
- Phone 911 immediately.
- Report the injury to the Assistant Director, Bureau Director and/or Executive Director.
- The Site Supervisor or designee will make an Unusual Incident Report to Licensing in accordance with the Unusual Incident Reporting policy and procedure.

- The Bureau Director may assign staff to investigate.
- The Department’s Licensing Liaison may prepare a written report.
- Staff shall complete a written injury report (form CSB-208) for the parent immediately and provide a copy of the written report to the parent.
- Supervisor shall make a complete entry in the Supervisor’s Injury Log for all injuries, minor and major.

### iii. Potential Child’s Rights Violations

- Any incident that occurs on site at a facility and involves employee(s), contractor(s), or volunteer(s) of the Community Services Bureau that might violate the rights of a child in accordance with Child Care Licensing Regulations or the Community Services Code of Conduct must immediately be reported to the CSB Administration using the following protocol and in accordance with Mandated Reporting of Child Abuse and Neglect ACF-IM-HS-15-04:
  - Any potential and/or unusual incident must be reported by CSB employees to the center’s Site Supervisor or the designated person-in-charge no later than 15 minutes after being made aware that an alleged incident has or may have taken place.
  - The reporter shall be any employee, contractor or volunteer who has witnessed or heard about an alleged incident, or any employee, contractor or volunteer who was involved in an alleged incident.
  - The Site Supervisor or person-in-charge must phone-in the alleged incident to the Assistant Director and as directed by the AD, the Site Supervisor and the AD will call the CSB Administration Office at (925) 681-6300 no later than one hour after being made aware of the alleged incident.
  - Caller shall make it clear to the clerk answering the phone at CSB Administration Office that you are reporting a possible licensing incident that must be handled by the appropriate staff immediately.
  - When the Unusual Incident Report is phoned into the CSB Administrative Office, the front desk clerk who receives the phone call shall immediately and personally notify the Division Manager. If the Division Manager is not in, the notification succession shall be to the Bureau Director.
  - The Site Supervisor or person-in-charge will then complete, obtain AD approval, and fax the CSB Unusual Incident Report to the CSB Administrative Office within two hours of the alleged incident. The completed form shall be scanned to the Division Manager and immediately followed up by a telephone call to CSB Administrative Office at (925) 681- 6300 to verify that a copy of this report has been received.
  - Site Supervisor shall compile and send upon request all written documentation related to the incident to the Assistant Director, Division Manager and Personnel Services Assistant III. Documentation may include but is not limited to CSB Incident Report, small group conference forms, notes on discussions with parents or other employees, and observation notes. Materials shall be complete, legible, objective, and fact-based.
- It is a requirement of CCL that unusual incidents must be reported to CCL by a telephone call within 24 hours of the County learning that an incident may have occurred.
  - In accordance with CCL protocol, the Site Supervisor remains the official contact with the CCL during any on-site CCL review/investigation process.

- The Assistant Director must be notified by the Site Supervisor any time a representative from CCL conducts an on-site visit for any reason.
- Any employee who fails to report an alleged incident as outlined above will be subject to disciplinary action, up to and including termination.
- Any Site Supervisor or person-in-charge who fails to follow the protocol instructions as outlined above will be subject to disciplinary action, up to and including termination.

#### **iv. CSB Administration Responsibilities**

- When the Unusual Incident Report is received by the CSB Administrative Office, the front desk clerk will personally deliver copies to the Personnel Administrator, Division Manager and the Bureau Director for review. When the review process is completed, an approved copy of the Unusual Incident Report will be scanned to the appropriate Assistant Director to sign and then the AD or his/her designee will fax/scan/email to CCL.
- A fact finding team will immediately be convened and directed to visit the center to gather information and determine if a child's rights have been violated and report these facts back to the Bureau Director.
- After reviewing the facts, if the Bureau Director determines that a true incident has not occurred, the case will be documented as such and closed.
- After reviewing the facts, if the Bureau Director determines that an incident may have occurred, the EHSD Director, Bureau Director or designee will notify the Head Start Regional Office and/or State DOE Early Education and Support Division in accordance with reporting requirements and as applicable to the funding source of the impacted child(ren).
- Only the EHSD Director or designee has the authority and responsibility on behalf of the County to report these matters to Licensing.
- Upon the notification by the EHSD Director or Bureau Director that an incident may have taken place, an investigation team will be sent out by the next business day to investigate and prepare a draft investigative report and findings.

CSB Administrative Office, in conjunction with the Assistant Director and Site Supervisor of the impacted center, will make all decisions related to protecting the rights of children on behalf of the Department until the investigation has been concluded.

Any employee who is considered to be involved with the violation of the rights of a child in connection with the incident report will be immediately re-assigned temporarily to another work location outside of the classroom and without contact with children until the investigation is concluded.

Failure on the part of the employee to report to, and remain at the alternate work location as directed, will cause the employee to receive absence without pay (AWOP) and to be subject to further discipline, up to and including termination.

The investigative team will have three business days to perform the required investigation and prepare a draft report for the Bureau Director and EHSD Director.

The Bureau Director and EHSD Director will review the report and decide next steps, including, if necessary, any disciplinary or remedial action that should be implemented as a result of the report's findings and conclusions.

The investigator's written report shall also include a holistic analysis of the causes associated with the incident and develop specific recommendations to prevent their recurrence.

Recommendations will be reviewed by the Bureau Director and EHSD Director for consistency with appropriate personnel policies prior to being entered into the final report. After appropriate action is taken by the Department, pertinent information regarding each incident shall be shared with key managers and Site Supervisors to prevent the recurrence of a similar incident at another site (Any report information shared with Department employees must be pre-reviewed by CSB Administration to ensure that it does not violate the confidentiality of any employees or children involved in the incident).

For major incidents, a detailed critique by management of the incident itself shall be provided to all employees on a department-wide basis to prevent the recurrence of a similar incident at another site.

#### **G. Partner Agencies including the Delegate Agency will follow these reporting steps**

- Notify and provide County with copies of any licensing citations, licensing visit reports, unusual incident report, and/or any other citations within 48 hours of Contractor's receipt of the report or citation.
- Maintain full compliance with Community Care Licensing Regulations and State and/or Federal Regulations as applicable given other funding sources received by CSB.
- Notify and provide CSB with copies of any Medical Alerts (such as infectious disease outbreaks) within 48 hours.

CONTRA COSTA COUNTY EMPLOYMENT & HUMAN SERVICES  
DEPARTMENT COMMUNITY SERVICES BUREAU

# POLICIES AND PROCEDURES

## SECTION 2-PROGRAM OPERATIONS **2019-21**

Board of Supervisors Approved: 07/30/19

2019-21  
Policies and Procedures  
Section 2: Program Operations

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**PART I. Eligibility, Recruitment, Selection and Attendance-ERSEA**

**A.State Child Development Program**

The California Department of Education Early Learning and Care Division fund a portion of our program. The matrix below provides an overview of the program.

PY = Program Year

	<b>CSPP</b>		<b>CTTR</b>
<b>Program Type/ Hours of Care</b>	<u>Part Day</u> 3-3:59 hrs	<u>Full Day</u> More than 4 hrs Includes ¾ time and Full time	<u>Full Day Program</u> Includes ½, ¾ time and full-time
<b>Age of Child</b>	3 or 4 by December 1 of PY or on or after their 3rd birthday *Continued summer enrollment allowable for K-eligible children until K start if requested and available	3 or 4 by December 1 of PY or on or after their 3rd birthday *Continued summer enrollment allowable for K-eligible children until K start if requested and available	Zero – three (until eligible for CSPP)
<b>Eligibility Requirement</b>	Current fiscal year Program Requirements apply	Current fiscal year Program Requirements apply	Current fiscal year Program Requirements apply
<b>Maintaining Ongoing Eligibility</b>	N/A Once initially Certified, child is "in" for the Remainder of the PY	If the basis of eligibility is income, families must report changes that cause their adjusted monthly income, adjusted for family size to exceed ongoing income eligibility within 30 calendar days. For all other eligibility criteria, once initially certified, child is "in" for the remainder of the certification period. Failure to meet ongoing eligibility results in termination of full-day services.  *If family fails to meet continued eligibility, they may choose to	If the basis of eligibility is income, families must report changes that cause their adjusted monthly income, adjusted for family size to exceed ongoing income eligibility within 30 calendar days. For all other eligibility criteria, once initially certified, child is "in" for the remainder of the certification period. Failure to meet ongoing eligibility results in termination of full-day services.

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		receive part-day services based on their initial eligibility or pay full fee for services.	
<b>Need Requirement</b>	N/A	Current fiscal year Program Requirement apply  Preschool children who attend only part of the week (e.g. M W F) or part of the day (11 – 5) can attend their class M-F during the “part-day preschool portion of the day” 8:30-12:00. All hours outside of this time must be supported by need.	
<b>Maintaining Ongoing Need</b>	N/A	*If family fails to meet need eligibility for full-day, they may choose to receive CSPP part-day services if available or pay full fee for services.	N/A
<b>Family Fees Assessed</b>	N/A	If less than 130 hours per month part-time fee assessed	If less than 130 hours per month part-time fee assessed
		If more than 130 hours per month full-time fee assessed	If more than 130 hours per month full-time fee assessed
		If family of a 3-5 yr. old child has a need for less than 4 hrs. a day, try to place them in a part-day slot where no fees apply.	N/A
<b>Adjustment Factors</b>	NA	Time and special criteria adjustment factors apply. Time criteria is based on total number of hours in care (not just hours of need).  CCTR toddler special criterion applies only until child is 36 months old regardless of type of class child is in.  ¾ time – 4 to 6:29 hours. Full-time – 6:30 to 9:59 hours. Full-time Plus – 10 hours or more.	
<b>Enrollment Priorities</b>	Transfers (i.e. families of children already certified for care including toddlers leaving CCTR) CPS- CSB622 At-Risk Referral Homeless  Returning 4 yr. olds regardless of income Eligible 4 yr. olds* Eligible 3 yr. olds* Over income 4 yr. olds (part-day only) Over income 3 yr. olds (part-day only) Over income age eligible children with IEP/IFSP (part-day only)		Transfers CPS or “at risk” Homeless Eligible Children Per income Ranking  *Head Start collaborative full-day programs shall consider Head Start enrollment priorities and these children shall be deemed as meeting the priorities.
	*Refer to Enrollment Priorities for State Preschool		

	Head Start collaborative full-day programs shall consider Head Start enrollment priorities and these children shall be deemed as meeting the priorities.		
<b>Over Income Waivers</b>	10% of part-day slots allowed to be no more than 15% over State income ceiling.	Not Allowed	Not Allowed
<b>Recertification for next PY</b>	N/A Must do second "initial" application prior to next PY.	For not less than 24 months *With the exception of families whose need is Seeking Employment, their certification period will be for not less than 12 months.	For not less than 24 months *With the exception of families whose need is Seeking Employment, their certification period will be for not less than 12 months
<b>Reporting</b>	Revised 8501	Revised 8501	9500

## B. Definitions

As used in the Program Requirements, definitions are as follows:

- Adjusted monthly income-The total countable income as defined below, minus verified child support payments paid by the parent whose child is receiving child development services, excluding the non-countable income listed below:
  - Earnings of a child under age 18 years;
  - Loans;
  - Grants or scholarships to students for educational purposes other than any balance available for living costs;
  - Food stamps or other food assistance;
  - Earned Income Tax Credit or tax refund;
  - GI Bill entitlements, hardship duty pay, hazardous duty pay, hostile fire pay, or imminent danger pay;
  - Adoption assistance payments;
  - Non-cash assistance or gifts;
  - All income of any individual counted in the family size that is collecting federal Supplemental Security Income (SSI) or State Supplemental Program (SSP) benefits;
  - Insurance or court settlements including pain and suffering and excluding lost wages and punitive damages;
  - Reimbursements for work-required expenses such as uniforms, mileage, or per diem expenses for food and lodging;
  - Business expenses for self-employed family members;
  - When there is no cash value to the employee, the portion of medical and/or dental insurance documented as paid by the employer and included in gross pay; and
  - Disaster relief grants or payments, except any portion for rental assistance or unemployment.

- Authorized representative-The person designated by the agency to certify eligibility for subsidized services. For CSB's directly operated program, this means the Comprehensive Services Assistant Manager (CSAM) or designee.
- Child Protective Services-Children receiving protective services through the local county welfare department as well as children identified by a legal, medical, social service agency or emergency shelter such as abused, neglected or exploited or at risk of abuse, neglect or exploitation.
- Children with disabilities-Children who have been determined to be eligible for special education or early intervention services in accordance with Part B or C of the Individuals with Disabilities Education Act (IDEA). These children have a current Individualized Education Plan or Individualized Family Service Plan. These children may be developmentally disabled, hearing impaired, deaf, speech impaired, visually impaired, seriously emotionally disturbed, physically impaired, have other health impairments such as: deaf-blind, multi-handicapped or specific learning disabilities, requiring the special attention of adults in a child development setting. Children, birth to three years, may be "at-risk" or with disabilities as defined by IDEA.
- Declaration-A written statement signed by a parent under penalty of perjury attesting that the contents of the statement are true and correct to the best of his or her knowledge.
- Displace families-To dis-enroll families in order to reduce service levels due to insufficient funding or inability of CSB to operate one or more sites because of reasons beyond control of the department, such as floods or fire.
- Enrolled-A child has been accepted and attended at least one class for center-based or family care option or at least one home visit for the home-based option.
- Family-For State child development programs, the parents and the children for whom the parents are responsible; who comprise the household in which the child receiving services is living. For purposes of income eligibility and family fee determination, when a child and his or her siblings are living in a family that does not include their biological or adoptive parent, "family" shall be considered the child and related siblings. For Head Start (1302.12), family, for a child, means all persons living in the same household who are supported by the child's parent(s)' or guardian(s)' income and related to the child's parent(s) or guardian(s) by blood, marriage, or adoption or the child's authorized caregiver or legally responsible party. Head Start defined family, for a pregnant woman, as all persons who financially support the pregnant woman.
- Fee schedule-The Family Fee Schedule, issued by the department pursuant to Education Code section 8447(e). The fee schedule is used by child development staff to assess fees for families utilizing State childcare and development services.
- Homeless-As defined in the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a(2)), a person or family that lacks a fixed, regular, and adequate night-time residence and has a primary night time residence that is:
  - A supervised publicly or privately operated shelter, transitional housing, or homeless support program designed to provide temporary living accommodations, or a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings, or children and youths who are sharing the housing of other persons

due to loss of housing, economic hardship, or a similar reason.

- Foster care-24-hour substitute care for children placed away from their parents or guardians and for whom the state agency has placement and care responsibility. This includes, but is not limited to, placements in foster family homes, foster homes of relatives, group homes, emergency shelters, residential facilities, childcare institutions, and pre-adoptive homes.
- Income eligible-For the purpose of State, childcare and development services that a family's adjusted monthly income is at or below 85 percent of the state median income, adjusted for family size at initial certification. For ongoing eligibility, adjusted monthly income cannot exceed 85 percent of the state median income, adjusted for family size. In accordance with the Head Start Performance Standards (1302.12), a pregnant woman or child is income eligible if the family's income is equal or below the poverty line or the family is eligible (or in the absence of child care would be potentially eligible) for public assistance, including TANF child-only payments.
- Income fluctuation-Income that varies due to:
  - Migrant, agricultural, or seasonal work;
  - Intermittent earnings or income, bonuses, commissions, lottery winnings, inheritance, back child support payment, or net proceeds from the sale of real property or stock;
  - Unpredictable days and hours of employment, overtime, or self-employment.
- Initial certification-The formal process for completing an application for services and collecting information and documentation to determine that the family and/or child meets the legal requirements for receipt of subsidized child development services based on eligibility and need criteria. The signature of the authorized representative on an application for services certifies that the legal requirements have been met and documented.
- Legally qualified professional-A person licensed under applicable laws and regulations of the State of California to perform legal, medical, health or social services for the general public.
- Parent-A biological parent, adoptive parent, stepparent, foster parent, caretaker relative, legal guardian, domestic partner of the parent, or any other adult living with a child who has responsibility for the care and welfare of the child.
- Parental Incapacity-The temporary or permanent inability of the child's parent(s) to provide care and supervision of the child (ren) for part of the day due to a physical or mental health condition.
- Recertification means the formal process for completing an application for services and collecting information and documentation to determine that the family and/or child meets the legal requirements for ongoing receipt of subsidized child development services based on eligibility and need criteria. The signature of the authorized representative on an application for services certifies that the legal requirements have been met and documented.
- Recipients of Service-Families and/or children enrolled in a childcare and development program subsidized by the California Department of Education.
- Self-Certification of Income-A declaration signed by the parent under penalty of perjury identifying:
  - To the extent known, the employer and date of hire and stating the rate and frequency of pay, total amount of income received for the preceding month(s), the type of work performed, and the hours and days worked, when an employer refuses or fails to provide requested employment information or when a request for documentation would adversely affect the parent's employment; or the amount and frequency of sources of income for which no documentation is possible.
- State median income-The most recent median income for California families as determined by

the State Department of Finance.

- Total countable income-All income of the individuals counted in the family size that includes, but is not limited to, the following:
  - Gross wages or salary, advances, commissions, overtime, tips, bonuses, gambling or lottery winnings;
  - Wages for migrant, agricultural, or seasonal work;
  - Public cash assistance;
  - Gross income from self-employment less business expenses with the exception of wage draws;
  - Disability or unemployment compensation;
  - Workers compensation;
  - Spousal support, child support received from the former spouse or absent parent, or financial assistance for housing costs or car payments paid as part of or in addition to spousal or child support;
  - Survivor and retirement benefits;
  - Dividends, interest on bonds, income from estates or trusts, net rental income or royalties;
  - Rent for room within the family's residence;
  - Foster care grants, payments or clothing allowance for children placed through child welfare services;
  - Financial assistance received for the care of a child living with an adult who is not the child's biological or adoptive parent;
  - Veterans' pensions;
  - Pensions or annuities;
  - Inheritance;
  - Allowances for housing or automobiles provided as part of compensation;
  - Portion of student grants or scholarships not identified for educational purposes as tuition, books, or supplies;
  - Insurance or court settlements for lost wages or punitive damages;
  - Net proceeds from the sale of real property, stocks, or inherited property; or
  - Other enterprise for gain.
- Update the application-The process of revising the application for services between recertification. The application shall be revised by completing a 9600S form with the latest family information that documents the continued need and eligibility for child care and development services.
- Verify-To check or determine the correctness or truth by investigation or by reference.

### C. Child Age and Family Income Eligibility

The Community Services Bureau's program enrolls children according to Federal and State eligibility criteria. For the Head Start program, children are selected for service based primarily on the family income adjusted for family size, with lowest income families selected first. Children at risk of abuse or neglect are considered high priority. Within age groups, priority in the pre-school program is given to four-year-old children from the neediest families. Please refer to CSB's Selection Criteria found in the ERSEA folder on the Shared Drive for more information. The Community Assessment is used to determine location of centers and program options to accommodate the areas of greatest need in the county.



Every year, parents/staff review and update placement of centers and program options, restructuring enrollment to best meet community needs as county demographics change.

## D. Recruitment

### 1. Strategies

CSB employs a variety of recruitment strategies to ensure that the neediest children from low-income families have access to services. Each year, a recruitment plan responsive to changes in communities served by CSB is developed with parent feedback and implemented. Various recruitment materials are developed and disseminated throughout the community. There are a variety of ways to access the program by referral or personal contact. Walk-ins are always welcome. Word of mouth, via CSB parents is the best method of recruitment. Staff from all content areas of the program conducts presentations to community-based entities wherein detailed information is provided to expedite access to our program by their clients. Articles and ads are published in local publications such as agency newsletters, websites, and social networking sites. For detailed strategies, see the Recruitment Plan in the ERSEA folder on the Shared Drive.

### 2. Recruitment Policy

All staff, parents, Policy Council members and partners are responsible for giving out information in accordance with the annual Recruitment Plan.

All CSB Staff are responsible for:

- Phone calls: CLOUDS will capture the phone calls to the Hotlines under the Communications tab. Calls will be returned regularly throughout the day by designated staff. Staff that return calls captured on the hotlines is responsible for taking basic pre-registration information over the phone and entering it into CLOUDS.
- Walk-ins: All staffs are responsible for being responsive to walk-ins and providing an explanation of the enrollment process. Assist client in filling out CSB690-Waiting List Pre-Registration Form (See CSB Forms) and/or place the child directly on the CLOUDS waiting list.
  - Any documentation brought in by families, such as pay stubs and/or birth certificates will be scanned to the CLOUDS.
- Mail Received:
  - Route to appropriate person if mail came in self-addressed envelope.
- Faxes: All referral forms are sent to the ERSEA analyst, logged, and then forwarded to the appropriate staff for follow up.

## E. Selection Process

Children are selected from the waiting lists that are maintained in CLOUDS. After the agency receives the application material, children are ranked based on CSB's admission priorities. Ten percent of our placement slots are designated for children with disabilities and every effort is made to accommodate children with disabilities.

### **Selection Criteria:**

To ensure that the neediest children from low-income families are selected for CSB's services, CSB implements its Selection Criteria/Admissions Priorities to prioritize neediest families, which is aligned with the state's priorities by a strong community need for child care for working families.

At least 10% of the total number of enrollment opportunities at CSB is designated for children with certified disabilities. Families of children with disabilities are asked to provide documentation from the doctor or a copy of the child's IFSP or IEP.

The authorized representative and other department managers insure that the selection criteria meet the state and federal regulations regarding selection of families and children to the program. The Selection Criteria/Admissions Priorities is updated and approved by the Director, Policy Council, and Board of Supervisors annually.

## **F. CLOUDS Waitlist**

### **1. Procedures for maintaining Eligible / Accepted Families on Waitlist**

In Maintaining Eligible / Accepted Families, staffs are responsible for:

- Taking basic pre-registration information over the phone or in person and enter into CLOUDS
- Contacting the next eligible family based on CLOUDS wait list and documenting contact on CLOUDS (Family Case Notes, with the category of Eligibility selected)
- Sending no contact letters, and assigning to the Purge caseload for Assistant Manager review in accordance with CSB Purge Protocol
- Conducting interviews
- Determining eligibility based on supporting documentation and information obtained through the interview
- Maintaining pre-enrollment documentation on CLOUDS (e.g., pay stubs, birth certificate, immunization record)
- Creating, signing and dating income calculation sheet in CLOUDS
- Communicating application status to families (CSB Application Status Letter)

### **2. Collect the following information in the child's electronic file on the CLOUDS waiting list:**

- Child's birth certificate or other age verification: for state funding programs collect reliable age verification for all children in the family size, indicating the relationship of the child to the parent; for Head Start/Early Head Start collect only age verification for the child(ren) to be enrolled.
- Documentation of Family Size (unborn can only be counted in family size for Early Head Start where services to pregnant women are provided)
- Parents' income verification (e.g., pay stubs) or self-certification form, if applicable (signed & dated).
- Income calculation worksheet (signed & dated) in CLOUDS.
- Copies of the child's immunization records (not necessary to determine eligibility).
- Health history from CLOUDS (signed and dated).

- Documentation of Disabilities, if applicable.
- Documentation of Homelessness, if applicable
- Documentation of Categorical Eligibility, if applicable
- Documentation of caregiver's need for services, if applicable
- Documentation of California residency

**3. Once file has been determined eligible by the authorized representative, the Site Supervisor for the enrolling center is responsible for:**

- Reviewing and updating information on file. Review and update Child and Family Data sheets on CLOUDS.
- Reviewing the Health History.
- Updating Emergency Information (See Form CSB214)
- Flagging the file in the top right front corner of the file using the following sticker dot system:
  - Blue Dot: Child with Disabilities
  - Red Dot: Child with Health/Nutrition/Mental Health Concerns
  - Yellow Dot: Child that transitioned from I/T to Preschool
  - White Dot: Used to cover up any colored dot that is no longer applicable to the child.

**4. The authorized representative is responsible for:**

- Reviewing waitlist file from Clerk.
- Verifying family eligibility and signing the income calculation worksheet.
- Moving the child from Eligibility Waiting List to Eligible/Accepted Wait List in CLOUDS once eligibility has been established.
- Ensuring flagged items are properly noted in CLOUDS.
- Keeping any paper copies in a locked drawer or cabinet.
- Maintaining Eligible/Accepted list in CLOUDS and monitor to ensure the next eligible child is being enrolled.
- Managing the Eligible/Accepted list on CLOUDS and removing children as appropriate (i.e. no longer qualifies or interested).
- Reviewing purged list and archive applications on CLOUDS as per the purge protocol.

**5. Procedures for Purging Waitlist**

**i. The authorized representative and supporting Clerk will maintain a current waiting list for those sites by following these steps:**

- Document all contacts with families on the Family Case Notes in CLOUDS and indicate the category of Eligibility.
- Make extra special effort via multiple methods to contact Head Start eligible families as some these families require extra outreach efforts. Document all steps taken.
- Send out no contact letters (See Form CSB613) to non-responsive families on an ongoing basis once sufficient efforts to contact as defined above have been made; send only one letter to each family; give the family ten working days to respond from date letter is sent.
- Document response/lack of response to the CSB613 on Family Case Notes.

Assign child to the Purge caseload. Assistant Manager assigned to the Purge caseload, will review case notes and purge children as appropriate.

ii. **The Comprehensive Services Assistant Manager will conduct the purge by following these steps:**

- Review the Purge caseload in CLOUDs.
- Review the Family Data Sheet for each child listed on the Purge caseload.
- Purge the records that are appropriate by the third Monday of each month.
- Communicate with the clerk regarding any purge that is not appropriate.
- Check to see if Family Services have been started and, if so, discontinuing services for those families scheduled to be purged.

## G. Enrollment and Re-Enrollment

### 1. General Enrollment Policy

Families find themselves in many situations and at times disenroll their children, but then, later on, want to re-enroll their child. CSB encourage families to return to the program should their situation allow. When families wish to re-enroll they are placed back on the waiting list and ranked accordingly. When children are enrolled in the Federal Head Start program, they remain eligible for services for the program year they are enrolled and the following year regardless of changes in income. If children are enrolled for a third program year in Head Start, the family income must be re-determined. When children are enrolled in the State Child Development program, they are recertified in accordance with the regulations to insure they remain eligible.

- When children are enrolled in the Early Head Start program, they remain eligible for services until they are three years old regardless of income.
- When EHS children are transitioning to Head Start, they must re-apply to determine eligibility for Head Start preschool services.
- When children are enrolled in part-day State Preschool, they remain eligible for continued services until the beginning of the next fiscal year regardless of income changes.
- Part-day State Preschool children seeking a second year of services must demonstrate income and age eligibility for continued services but have priority in placement without regard to income ranking in accordance with the Enrollment Priorities.
- Once an infant or toddler is enrolled in a General Child Care program they remain income eligible for subsidized services for not less than 24 months (with the exception for families whose need is Seeking Employment, their certification period will be for not less than 12 months) or only as long as the family income remains at or below 85% of the California median income.
- When family income is above 39 of the California median income, the General Child Care and full- day State Preschool enrollees are assessed a Family Fee based on the California Family Fee Schedule.

In our efforts to ensure services are available to the most vulnerable populations as per our community assessment, CSB may reserve vacant Head Start/Early Head Start slots for families experiencing

homelessness and/or foster children. No more than 3% of funded enrollment shall be reserved. Vacancies shall be reserved for no more than 30 days. After 30 days, the slot(s) shall be considered vacant.

## **2. Enrollment Placement**

### **i. In placing a child at a center, Site Supervisors are responsible for the following:**

- Review Eligible/Accepted List in CLOUDS.
- Select the child with the highest priority ensuring that all Head Start eligible children have been placed as vacancies occur, before enrolling any child above the federal poverty guidelines.
- Review all sections of child's file for special needs or concerns and proper placement of dots and accuracy.
- Check for any flagged items that may need follow up or a parent signature.
- Coordinate/schedule Family Meeting with parent, Comprehensive Services Assistant Manager, and other staff as needed.
- Contact parent for enrollment (placement) appointment.
- When meeting with the family:
  - Complete, date and sign new income information as needed and enter updated information on CLOUDS.
  - The 9600 form from CLOUDS is to be signed and dated by the authorized representative and parent.
  - Issue Notice of Action
  - Update Emergency Information (See CSB Forms > 0200-Health & Safety > CSB214 Student Emergency Card).
  - Complete Admission Agreement and hours of service contract on CLOUDS. Complete Parent Handbook receipt with parent.
  - Verify that the child's immunizations are up-to-date (Do not admit in center based programs until record is up to date, unless the enrolling child is homeless).
  - Review health history and ensure appropriate referrals have been made.
  - Move child from Eligible/Accepted List and place into appropriate classroom and Program Model.

## **H. Eligibility and Need Criteria and Documentation**

### **1. Residency Requirements**

To be eligible for child care and development services, the child must live in the State of California while services are being received.

Any evidence of a street address or post office address in California will be sufficient to establish residency. A person identified as homeless is exempted from this requirement and shall submit a declaration of intent to reside in California.

The determination of eligibility for child care and development services shall be without regard to the

immigration status of the child or the child's parent(s), unless the child or the child's parent(s) are under a final order of deportation from the United States Department of Justice.

Community Services Bureau provides Head Start and Early Head Start services to children/pregnant women who reside within the service area of Contra Costa County, and reside in the CSB service area. CSB does not serve a portion of Concord that is commonly referred to as the Monument Corridor. The area falls within the 94520 zip code in Concord and is bounded by Clayton Road to the North, Galindo Street to the Northeast, South along Monument Boulevard to Cleopatra Drive, southeast to Interstate 680 and west to State Route 242. This area is operated by the Unity Council of Alameda County. All other portions of the county are served by CSB. In accordance with the Head Start and Early Head Start Service Area Agreement adopted in 2016 among Bay Area Programs, every effort will be made to honor the family's choice to enroll their child in the program they choose. If a family resides outside of Contra Costa County, the family may enroll with CSB without asking permission from the residence grantee if any of the following reasons are valid.

- If a family lives geographically closer to an agency outside of their residential area.
- If the child is transitioning from EHS to HS, allowing for continuity of care.
- If the family works, goes to school, is in training or participating in other related activity outside the residence area.
- If the family starts one program and moves to another area, and they choose to continue enrollment in the program.
- Homeless families may enroll in the program most convenient to them (follow McKinney Vento definition).
- Children with disabilities should be given priority enrollment if there is no room in the residence program.

## **2. Documentation of Need Based on Employment, Seeking Employment, Training Toward a Vocational Goal, Seeking Housing, and Incapacity**

Families who are eligible for subsidized childcare and development services based on income, public assistance, or homelessness must document that each parent in the family meets a need criterion to enroll in a full-day CSPP or CCTR program. The need criteria are: vocational training leading directly to a recognized trade, para profession, or profession; educational program for English language learners or to attain a high school diploma or general educational development certificate; employment or seeking employment; seeking permanent housing for family stability; and incapacitation.

Subsidized childcare and development services shall only be available to the extent to which:

- The parent meets a need criterion that precludes the provision of care and supervision of the family's child for some of the day;
- There is no parent in the family capable of providing care for the family's child during the time care is requested; and Supervision of the family's child is not otherwise being provided by school or another person or entity.

### 3. Documentation of Employment

If the basis of need as stated on the application for services is employment of the parent, the documentation of the parent's employment shall include the days and hours of employment.

If the parent has an employer, the documentation of need based on employment shall consist of one of the following:

- The pay stubs provided to determine income eligibility that indicates the days and hours of employment;
- When the provided pay stubs do not indicate the days and hours of employment, staff shall verify the days and hours of employment by doing the following:
  - Secure an independent written statement from the employer;
  - Telephone the employer and maintain a record;
- If the provided pay stubs indicate the total hours of employment per pay period and if staff is satisfied that the pay stubs have been issued by the employer, specify on the application for services the days and hours of employment to correlate with the total hours of employment and the parent's need;
- If the variability of the parent's employment is unpredictable and precludes staff from verifying specific days and hours of employment or work week cycles, specify on the application for services that the parent is authorized for a variable schedule for the actual hours worked, identifying the maximum number of hours of need based on the week with the greatest number of hours within the preceding four weeks and the verification as noted above.;
- If the employer refuses or is non-responsive in providing the requested information, record attempts to contact the employer, and specify and attest on the application for services to the reasonableness of the days and hours of employment based on the description of the employment and community practice; or
- If the parent asserts in a declaration signed under penalty of perjury that a request for employer documentation would adversely affect the parent's employment, on the application for services:
  - Attest to the reasonableness of the parent's assertion; and
  - Specify and attest to the reasonableness of the days and hours of employment based on the description of the employment and community practice.

When the employed parent does not have pay stubs or other record of wages from the employer and has provided a self-certification of income, staff shall assess the reasonableness of the days and hours of employment, based on the description of the employment and the documentation provided, and authorizes only the time determined to be reasonable.

If the parent is self-employed, the documentation of need based on employment shall consist of the following:

- A declaration of need under penalty of perjury that includes a description of the employment and an estimate of the days and hours worked per week;
- To demonstrate the days and hours worked, a copy of one or more of the following: appointment logs, client receipts, job logs, mileage logs, a list of clients with contact information, or similar records; and

- As applicable, a copy of a business license, a workspace lease, or a workspace rental agreement.

A statement by staff assessing the reasonableness of the total number of days and hours requested per week based on the description of the employment and the documentation provided. If the parent has unpredictable hours of employment, staff shall authorize the parent for a variable schedule not to exceed the number of hours determined to be needed per week. If staff has been unable to verify need based on the documentation provided, staff shall take additional action to verify self-employment that includes any one or more of the following:

- If the self-employment occurs in a rented space, contacting the parent's lessor or other person holding the right of possession to verify the parent's renting of the space;
- If the self-employment occurs in variable locations, independently verifying this information by contacting one or more clients whose names and contact information have been voluntarily provided by the parent; or
- Making other reasonable contacts or requests to determine the amount of time for self-employment.
- If staff is unable to make a reasonable assessment of the hours needed for self-employment after attempting to verify such hours and documenting the attempts, staff may divide the parent's self-employment income by the applicable minimum wage. The resulting quotient shall be the maximum hours needed for employment per month.

The parent shall provide a release to enable the staff to obtain the information it deems necessary to support the parent's asserted days and hours worked per week.

If additional services are requested for travel time or sleep time to support employment, staff shall determine, as applicable, the time authorized for:

- Travel to and from the location at which services are provided and the place of employment, not to exceed half of the daily hours authorized for employment to a maximum of four hours per day; or
- Sleep, if the parent is employed anytime between 10:00 p.m. and 6:00 a.m., not to exceed the number of hours authorized for employment and travel between those hours.

#### **4. Documentation of Employment in the Home or a Licensed Family Day Care Home**

If the parent's employment is in the family's home or on property that includes the family's home, the parent must provide justification for requesting subsidized child care and development services based on the type of work being done and its requirements, the age of the family's child for whom services are sought, and, if the child is more than five years old, the specific child care needs. Staff shall determine and document whether the parent's employment and the identified child care needs preclude the supervision of the family's child.

If the parent is a licensed family day care home provider or an individual license-exempt, the parent is not eligible for subsidized services during the parent's business hours because the parent's employment does not preclude the supervision of the family's child.

If the parent is employed as an assistant in a licensed large family day care home, and is requesting services for the family's child in the same family day care home, the parent shall provide documentation



that substantiates all of the following:

- A copy of the family day care home license indicating it is licensed as a large family day care home;
- A signed statement from the licensee stating that the parent is the assistant, pursuant to the staffing ratio requirement of California Code of Regulations, title 22, section 102416.5(c);
- Proof that the parent's fingerprints are associated with that licensed family day care home as its assistant, which staff may verify with the local community care licensing office; and
- Payroll deductions withheld for the assistant by the licensee, which may be a pay stub.

### **5. Documentation of Seeking Employment**

If the basis of need as stated on the application for services is seeking employment, the parent's period of eligibility for childcare and development services is for not less than 12 months. Services shall occur on no more than five days per week and for less than 30 hours per week.

Documentation of seeking employment shall include a written parental declaration signed under penalty of perjury stating that the parent is seeking employment. The declaration shall include the parent's plan to secure, change, or increase employment and shall identify a general description of when services will be necessary.

### **6. Documentation of Training toward Vocation Goals / Educational program for English language learners**

If the basis of need as stated on the application for services is vocational training leading directly to a recognized trade, para-profession, or profession, child care and development services shall be limited to whichever expires first:

- Six years from the initiation of services; or
- Twenty-four semester units, or its equivalent, after the attainment of a Bachelor's Degree.

The parent shall provide documentation of the days and hours of vocational training to include:

- A statement of the parent's vocational goal;
- The name of the training institution that is providing the vocational training;
- The dates that current quarter, semester, or training period, as applicable, will begin and end;
- A current class schedule that is either an electronic print-out from the training institution of the parent's current class schedule or, if unavailable, a document that includes all of the following:
  - The classes in which the parent is currently enrolled;
  - The days of the week and times of day of the classes; and
  - The signature or stamp of the training institution's registrar.
  - The anticipated completion date of all required training activities to meet the vocational goal; and

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- Upon recertification, as applicable, a report card, a transcript, or, if the training institution does not use formal letter grades, other records to document that the parent is making progress toward the attainment of the vocational goal.

Services may be provided for classes related to the General Education Development (GED) test or English language acquisition.

On-line or televised instructional classes that are unit bearing classes from an accredited training institution shall be counted as class time at one hour a week for each unit. The parent shall provide a copy of the syllabus or other class documentation and, as applicable, the Web address of the on-line program. The accrediting body of the training institution shall be among those recognized by the United States Department of Education.

Ongoing eligibility for services based on training is contingent upon making adequate progress. At recertification, the parent shall provide documentation of the adequate process from the most recently completed quarter, semester, or training period. The parent shall, in the college classes, technical school, or apprenticeship for which subsidized care is provided:

- In a graded program, earn a 2.0 grade point average; or
- In a non-graded program, pass the program's requirements in at least 50 percent of the classes or meet the training institution's standard for making adequate progress.

The first time the parent does not meet the condition of making adequate progress, the parent may be recertified and continue to receive ongoing services. At the conclusion of this eligibility period, the parent shall have made adequate progress in order to be recertified for services based on vocational training. If the parent has not made adequate progress, services for this purpose shall be:

- Disenrolled; and
- Services based on vocational training are only available to the parent, to the extent provided by subdivision (a), after six months from the date of disenrollment.

To document adequate progress, the parent shall provide staff with a copy of the parent's official progress report from the most recently completed quarter, semester, or training period. Staff may require the parent to:

- Have an official copy of a progress report sent directly from the training institution to staff; or
- Provide a release, as may be required by the training institution, to enable staff to verify the parent's progress with the institution.

A parent may change his or her vocational goal, but services shall be limited to the time or units remaining from the initiation of the provision of services for vocational training.

Staff shall determine the days and hours needed per week, and whether the parent is making progress, based on the documentation. Staff may request that the parent provide a publication from the training institution describing the classes required to complete the parent's vocational goal.

If additional services are requested for study time or travel time to support the vocational training, staff

shall determine, as appropriate, the amount of services needed for:

- Travel to and from the location at which services are provided and the training location, not to exceed half of the weekly hours authorized for training to a maximum of four hours per day; or
- Study time, including study time for on-line and televised instructional classes, according to the following:
  - Two hours per week per academic unit in which the parent is enrolled;
  - On a case-by-case basis and as may be confirmed with the class instructor, additional time not to exceed one hour per week per academic unit in which the parent is enrolled; and
  - On a case-by-case basis, no more than the number of class hours per week for non-academic or non-unit bearing training.

The service limitations specified above shall not apply to a parent who demonstrates he or she is:

- As of June 27, 2008, receiving services for vocational training and has attained a Bachelor's Degree;
- Receiving services from a program operating pursuant to Education Code section 66060;
- Attending vocational training when the parent has been deemed eligible for rehabilitation services by the California Department of Rehabilitation; or
- Attending retraining services available through the Employment Development Department of the State or its staffs due to a business closure or mass layoff.

#### **7. Documentation of Parental Incapacity**

If the basis of need as stated on the application for services is parental incapacity, child care and development services shall not exceed 50 hours per week.

Documentation shall include a release signed by the incapacitated parent authorizing a legally qualified health professional to disclose information necessary to establish that the parent meets the definition of incapacity, and needs services.

The documentation of incapacitation provided by the legally qualified health professional shall include:

- A statement that the parent is incapacitated, that the parent is incapable of providing care and supervision for the child for part of the day, and, if the parent is physically incapacitated, that identifies the extent to which the parent is incapable of providing care and supervision;
- The days and hours per week that services are recommended to accommodate the incapacitation, taking into account the age of the child and the care needs. This may include time for the parent's regularly scheduled medical or mental health appointments; and
- The name, business address, telephone number, professional license number, and signature of the legally qualified health professional who is rendering the opinion of incapacitation and, if applicable, the name of the health organization with which the professional is associated.

Staff may contact the legally qualified health professional for verification, clarification, or completion of the provided statement.

Staff shall determine the days and hours of service based on the recommendation of the health professional and consistent with the provisions of this article.

The period of eligibility for services when the need for services is incapacitation is for not less than 24 months.

#### **8. Documentation of Seeking Permanent Housing**

If the basis of need as stated on the application for services is seeking permanent housing for family stability, the parent's initial certification or recertification period for child care and development services shall be for not less than 24 months. Services shall occur on no more than five days per week and for less than 30 hours per week.

Documentation of seeking permanent housing shall include a written parental declaration signed under penalty of perjury that the family is seeking permanent housing. The declaration shall include the parent's search plan to secure a fixed, regular, and adequate residence and shall identify a general description of when services will be necessary. If the family is residing in a shelter, services may also be provided while the parent attends appointments or activities necessary to comply with the shelter participation requirements.

At any time between the initial certification or recertification period, a parent may voluntarily request an increase to their certified child care hours based on provided documentation of employment or on other basis for need as applicable.

#### **9. Documentation of Child Protective Services**

##### **i. General Procedures**

CSB Head Start is committed to providing child development services for all eligible children and pregnant women who are currently involved in the child welfare system and Children and Family Services (CFS) for the purpose of improving young children's access to and continuity of comprehensive, high quality early care and education services. The partnership between CSB and CFS ensures that staff understands the complex (social, emotional, developmental and physical) needs of this vulnerable population. This partnership is in compliance with the administration for children and families' information memorandum acyf-cb-im-11-01 issued January 31, 2011.

If eligibility and need is based on a child/family's involvement in the child welfare system/child protective services (CPS/CFS), the basic data file must contain a written referral-Form CSB622, dated within the six (6) months immediately preceding the date of application for services, from a legal, medical, social service agency or emergency shelter. The written referral must include either:

- A statement from the local county welfare department, child protective services (CPS/CFS) unit certifying that the child is receiving child protective services and that the child care and development services are a necessary component of the child protective services plan, or
- A statement by a legally qualified professional that the child is at risk of abuse or neglect and

- the child care and development services are needed to reduce or eliminate risk, and
- The probable duration of the child protective service plan or the at-risk situation, and
- The name, address, telephone number and signature of the legally qualified professional who is making the referral.

## **ii. Children and Family Service Referrals**

Families may be referred to CSB for enrollment from Children and Family Services (CFS), if child care is deemed a necessary piece of the service plan. CSB will review the referral to determine a family's eligibility for Head Start, Early Head Start, Center Based, Stage II and CAPP programs. Based on eligibility and need requirements the referral will be forwarded to the appropriate program, taking into consideration parental choice. Once the referral is received by the appropriate unit, the family will be contacted to determine eligibility. If the family is eligible and meets all necessary requirements, they may be enrolled in the program provided there is space. If there is no space or funding available in any of CSB's programs, the ERSEA Analyst will forward the referral to an outside agency for potential enrollment. At this time staff will notify the referring individual whether or not the family was enrolled or referred to an outside agency.

### **I. Certification of Eligibility**

The Comprehensive Services Assistant Manager or designee is authorized to certify eligibility prior to initial enrollment and at the time of recertification. The authorized representatives must certify each family's/child's eligibility for childcare and development services after reviewing the completed application and documentation contained in a basic data file that is established and maintained at the site. All data is uploaded to CLOUDS, a central computerized database.

Prior to enrollment, the authorized representative certifies eligibility by completion of the following forms:

- Application for Childcare and Development Services
- Notice of Action, Application for Services

Prior to enrollment, parents may contact Site Supervisors, Assistant Directors, Comprehensive Services team members, and teachers at any sites in Contra Costa County to obtain an application for services. Or they may call one of the enrollment hotline numbers to place themselves on a waiting list.

At the time the authorized representative certifies or recertifies eligibility of a family/child for child care and development services, he/she shall inform the family of the family's responsibility to notify the staff within 30 calendar days if their family income adjusted for family size exceeds 85 percent of the state median income.

This information is noted on the Notice of Action and Site Supervisor/Comprehensive Services Manager must review the contents and, if needed, provide an explanation of what the "Declaration" means.

When a child's residence alternates between the homes of separated or divorced parents, eligibility, need and fees should be determined separately for each household in which the child is residing during the time child development services are needed (i.e., separate certifications and service agreements). For example, a child may be subsidized during part of the week and full cost the rest of the week.

## **J. Re-certification for General Child Care Services and Full Day State preschool**

After initial certification and enrollment, the authorized representative must verify need and eligibility and re-certify each family/child as follows:

Once a family establishes eligibility and need at initial certification or recertification, a family remains eligible for services for not less than 24 months, with the exception for families whose need is Seeking Employment, their certification period will be for not less than 12 months or until the family's adjusted monthly income exceeds 85 percent of the state median income.

Families must be recertified at least once each contract period and no earlier than 24 months from their last certification (with the exception for families whose need is Seeking Employment, their certification period will be for not less than 12 months). The process for verifying continued eligibility and need shall commence following this 24-month period and conclude before the end of the 26th month and for families with the certified need of Seeking Employment the process will begin after the 12-month period and conclude before the end of the 14th month.

## **K. Re-Certification for Part-Day State Preschool Children**

Part-day State Preschool families must be certified at the beginning of service using the most recent income documentation and may be certified up to 120 days before the services' start date.

After a first year of service, a family must reapply to determine income and age eligibility before a child can be considered for enrollment for a second year. These returning children have placement priority without regard to income ranking as described in the Enrollment Priorities guidance.

## **L. Re-Certification for Head Start and Early Head Start Children**

### **1. Duration of Eligibility**

CSB certifies Head Start children into the program based on family income eligibility at the time of enrollment using the federal income guidelines.

Once a child is enrolled, that child does not need to be re-certified even if the family income rises above the federal poverty level for the first year of enrollment and the following year. Re-certification is only required for a child entering a third program year of Head Start.

Early Head Start children must be re-certified for eligibility when they transition to a Head Start program for preschool age children.

### **2. Loss of Subsidy**

To ensure continuity of services for Early Head Start-Child Care Partnership (EHS-CCP) children, CSB will not dis-enroll due to a loss of child care subsidy. EHS-CCP grant funds will be used to temporarily cover the cost of lost subsidy and the continuation of services. CSB staff must work with the family to improve

the situation that caused the loss of subsidy and provide assistance with regaining the subsidy. The family is expected to regain subsidy once circumstances have been improved and comply with request for documentation required to certify eligibility for the child care subsidy. The family's failure to comply with documentation requests as mandated by the terms of the subsidy is not in itself an allowable circumstance to constitute loss of subsidy.

The following circumstances may justify the use of EHS-CCP funds to cover loss of subsidy:

- Families experiencing job loss
- Gap/Break in education or training
- Gap/Break in approved "Welfare to Work Activity" participation
- Break in childcare agreements while pending subsidy application/reapplication or transfer, such as a transfer from Stage 1 to Stage 2
- Loss of child care subsidies due to exceeding state or local income requirements

If it is not possible for a family's subsidy to be restored, the EHS-CCP grant will be used to cover the full cost of maintaining the child's continued enrollment in the program. This cost will be determined by the reimbursement amount paid by the subsidy for services the child received at the time of subsidy termination, accounting for adjustment factors and day length. Case note documentation and a Notice of Action- Termination (for CA Child Care and Development Programs) will justify the use of EHS-CCP grant funds for the child's continued services. The Comprehensive Service Assistant Manager responsible for enrollment within the childcare subsidy will provide documentation of applicable subsidy loss to CSB's fiscal unit and the child will be dropped from the CCTR/EHS-CCP program model and re-enrolled in EHS-CCP only.

Families who lose their subsidy will not be required continue to pay a family fee. Family fees will be assess in accordance with CDE regulations should subsidy be re-instated.

## **M. General Recertification / Re-Enrollment Procedures**

### **1. Recertification Procedures**

During the recertification process, the authorized representative is responsible for the following:

- Track families needing to be recertified using the Enrollment Recertification Due Date report in CLOUDS.
- Notify families to bring updated eligibility and/or need documentation on first of the month following the month in which their 12-month certification period ends.
- Collect recertification or re-enrollment documentation.
- Complete new 9600 on CLOUDS.
- Complete new income calculation sheet (signed and dated).
- Update reason for needing child care and application type on the child data sheet (See "eligibility information" on the child data sheet).

- Proceed with certification procedures as listed above if family is still income eligible.
- Issue Notice of Action, certifying continuation, changes or termination of services. (Note: adverse action requires a 14-day written notification, 19-days if mailed).
- Drop file on CLOUDS on the last day of service and prepare paper file for storage (Note: Childs "waitlist" or "termination" activity date is the day after the child's last day). The Children's file folders are to be re-used.
- Update CLOUDS record as needed.
- Maintain files of terminated children in locked location at site for one year until after program audit in October or November.
- Send dropped and files of terminated clients to central location after completion of program audit.

## 2. Re-Enrollment Process

During the re-enrollment process, Site Supervisors in collaboration with Comprehensive Services and the Centralized Enrollment Unit are responsible for the following:

- In June, identify children for roll-over.
- In July, place roll-over children into appropriate classrooms and Program Model, from Eligible/Accepted list in CLOUDS.
- For previously enrolled Part-day State Preschool child requesting re-enrollment, follow guidelines for completely new 9600 application with all new documentation.
- If a child's CLOUDS record was archived within the program year, request Centralized Enrollment Assistant Manager to reactivate child's CLOUDS record and place child back on to Eligibility Wait List.
- Follow approved guidelines for selecting children.

## N. Updating the Application

The family has the right to voluntarily report changes during the certification period. The authorized representative must update the family's application for General Child Care and Full-day State Preschool to document and determine a reduction to fee assessment or change to authorized hours of care, if applicable, within ten (10) business days whenever the family reports and provides necessary documentation for a change in family size, income, public assistance status or need. If a family requests to reduce their authorized hours of care within the certification period, they must do so in writing. Form 9600S will be used for application updates between re-certifications. 9600S must also be accompanied by a Notice of Action for updates effecting need, eligibility, or certified hours of care.

## O. Contents of Basic Data File

Staff must establish and maintain a basic data file for each family receiving childcare and development services. The basic data file (either electronic copy in CLOUDS or a hard copy maintained at the center) must contain a signed application for services with:

- The parent's(s) full name(s), address(es) and telephone number(s).
- The names, gender and birth dates of all children under the age of eighteen (18) counted in the family size whether or not they are served by the program.



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- The number of hours of service each day for each child.
- The names of other family members in the household related by blood, marriage or adoption.
- The reason for needing childcare and development services, if applicable.
- Employment or training information for parent(s) including name and address of employer(s) or training institution(s) and days and hours of employment or training, if applicable.
- Eligibility status.
- Family size and income, if eligibility is based on income.
- The parent's signature and date.
- The signature of the Site Supervisor/Authorized Agency Representative certifying the eligibility and date of signature.
- A notation on when the first services begin and a notation of the last day services were received.

The data file must also contain, as applicable:

- Documentation of income eligibility, including an income calculation worksheet.
- Documentation of employment.
- Documentation of seeking employment.
- Documentation of training.
- Documentation of parental incapacity.
- Documentation of child's disabilities.
- Documentation of homelessness.
- Documentation of seeking permanent housing for family stability.
- Written referral from a legally qualified professional from a legal, medical, or social services agency, or emergency shelter for children at risk of abuse, neglect, or exploitation.
- Written referral from a county welfare department, child welfare services worker, certifying that the child is receiving protective services and the family requires childcare and development services as part of the case plan.
- If the parent of the child was on cash assistance, the date the parental cash aid was terminated.
- Notice of Action (as stated above in detail) and/or Recipient of Services.
- All child health and current emergency information required by California Code of Regulations, title 22, Social Security, Division 12, Community Care Facilities Licensing Regulations.

### **1. Documentation and Determination of Family Size**

A parent shall provide the names of the parents and the names, gender and birthdates of the children identified in the family. This information shall be documented on a confidential application for childcare and development services and used to determine family size. The parent shall provide supporting documentation regarding the number of children in the family.

The number of children shall be documented by providing at least one of the following documents, as applicable\* for the state funded program:

- Birth certificates.
- Court orders regarding child custody.
- Adoption documents.

- Records of Foster Care placements.
- School or medical records.
- County welfare department records; or
- Other reliable documentation indicating the relationship of the child to the parent.

\*Federally funded programs require documentation for the child to be enrolled, only. In state funded programs, when only one parent has signed the application and has indicated on the application that they are a single parent, then the parent signing the application must self-certify single parent status by initialing question one (1) in Section V of the application. A parent shall not be required to submit supporting documentation regarding the presence or absence of the second parent.

For income eligibility and family fee purposes, when a child and his or her siblings are living in a family that does not include their biological or adoptive parent, only the child and related siblings shall be counted to determine family size. In these cases, the adult(s) must meet a need criterion.

## **2. Documentation of Income Eligibility**

The parent is responsible for providing documentation of the family's total countable income and the staff is required to verify the information, as described below:

The parent(s) shall document total countable income for all the individuals counted in the family size as follows:

### **i. If the parent is employed, provide:**

- A release authorizing the staff to contact the employer(s), to the extent known, that includes the employer's name, address, telephone number, and usual business hours, and
- All payroll check stubs, a letter from the employer delivered to CSB independent of the employee, or other record of wages issued by the employer for the month preceding the initial certification, an update of the application, or the recertification that establishes eligibility for services.

When the employer refuses or fails to provide requested documentation or when a request for documentation would adversely affect the parent's employment, provide other means of verification that may include a list of clients and amounts paid, the most recently signed and completed tax returns, quarterly estimated tax statements, or other records of income to support the reported income, along with a self-certification of income.

### **ii. If the parent is self-employed, provide:**

A combination of documentation necessary to establish current income eligibility for at least the month preceding the initial certification, an update of the application, or the recertification that establishes eligibility for services. Documentation shall consist of as many of the following types of documentation as necessary to determine income:

- A letter from the source of the income,
- A copy of the most recently signed and completed tax return with a statement of current estimated income for tax purposes, or
- Other business records, such as ledgers, receipts, or business logs.

Parents shall provide copies of the documentation of all non-wage income, self-certification of any income for which no documentation is possible, and any verified child support payments.

Staff shall retain copies of the documentation of total countable income and adjusted monthly income in the family data file.

When the parent is employed, staff shall, as applicable, verify the parent's salary/wage; rate(s) of pay; potential for overtime, tips or additional compensation; hours and days of work; variability of hours and days of work; pay periods and frequency of pay, start date for the employee. If the employer refuses or is non-responsive in providing requested information or a request for employer documentation would adversely affect the parent's employment, and if the information provided by a self-employed parent is inconsistent with the staff's knowledge or community practice, shall request clarification in the self-certification of income, additional income information or a reasonable basis for concluding that the employer exists.

When the parent is self-employed, staff shall obtain and make a record of independent verification regarding the cost for services provided by the parent that may be obtained by contacting clients, reviewing bank statements, or confirming the information in the parent's advertisements or website. If the income cannot be independently verified, the staff shall assess whether the reported income is reasonable or consistent with the community practice for this employment.

Staff may request additional documentation to verify total countable income to the extent that the information provided by the parent or the employer is insufficient to make a reasonable assessment of income eligibility.

To establish eligibility, staff shall, by signing the application for services, certify to the staff's reasonable belief that the income documentation obtained and, if applicable, the self-certification, support the reported income, are reliable and are consistent with all other family information and the staff's knowledge, if applicable, of this type of employment or employer.

If the family is receiving child care and development services because the child(ren) is/are at risk of abuse, neglect, or exploitation or receiving child protective services and the written referral specifies that it is necessary to exempt the family from paying a fee, then the parent will not be required to provide documentation of total countable income.

If the basis of eligibility is a current aid recipient, the staff shall obtain verification from CalWIN.

### **3. Calculation of Income**

#### **i. General Procedures for calculating income**

Staff calculates total countable income based on income information reflecting the family's current and on-going income using an income calculation worksheet that specifies the frequency and amount of the payroll check stubs provided by the parent and all other sources of countable income.

When income fluctuates because of:

- Agricultural work, by averaging income from the 12 months preceding the initial certification, an update of the application, or the recertification that establishes eligibility for services.
- Intermittent income, by averaging the intermittent income from the preceding 12 months by dividing by 12 and add this amount to the other countable income.

Unpredictable income, by averaging the income from at least three consecutive months and no more than 12 months preceding the initial certification, an update of the application, or the recertification that establishes eligibility for services.

#### **ii. Over-Income Families-General Description:**

Both the State and Federal program allow over-income families meeting strict criteria. NO CHILD SHALL BE CONSIDERED FOR ENROLLMENT WITH AN INCOME ABOVE THE FEDERAL POVERTY GUIDELINE UNTIL ALL FAMILIES AT OR BELOW THE FEDERAL POVERTY GUIDELINES HAVE BEEN ENROLLED. To this end, it is critical that the recruitment plan be fully implemented and that extra efforts are made to assist income eligible families in completing the application to establish eligibility and be placed in the program expeditiously. After these efforts have been conducted, documented and certified, a request to waive the income guidelines may be made. The waiver form (See Forms > CSB606) includes a certification statement on the form where the outreach efforts are documented. A simple statement that “the waitlist has been exhausted” is never acceptable.

#### **iii. Over-Income Protocols**

When enrolling over-income families, the authorized representative is responsible for:

- Completing the over income waiver (CSB606).
- Submitting completed waiver to ERSEA Analyst for approval.
- Saving ERSEA Analyst approved waiver in child’s file

The ERSEA Analyst is responsible for:

- Tracking waivers to ensure that there are no income eligible children to enroll.
- Reviewing the aggregate waiver list on Shared Drive to ensure that all clusters have not exceeded the 10% unlimited over income designated primarily for children with an IEP or IFSP but for other cases as determined appropriate by the ERSEA Analyst or 35% limited over income enrollment for the Head Start and Early Head Start program, or the 10% limited over income for the part day preschool (PP) or the part day family literacy program (PPL).
- Signing form.
- Logging each waiver on database on shared drive.
- Analyzing placement of over income slots to inform recruitment and slot planning processes.
- Periodically purging the list as children transition out of the program.

#### **4. Documentation of the Child’s Exceptional Needs (known as Children with Disabilities at CSB).**

The family data file shall contain documentation of the child’s exceptional needs if the staff is claiming

adjustment factors. The documentation of exceptional needs shall include:

- A copy of the portion of the active individual family service plan (IFSP) or the individualized education program (IEP) that includes the information as specified in Education Code section 56026 and California Code of Regulations, title 5, sections 3030 and 3031; and
- A statement signed by a legally qualified professional that:
  - The child requires the special attention of adults in a child care setting; and
  - Includes the name, address, license number, and telephone number of the legally qualified professional who is rendering the opinion.

#### **P. Admission Policies and Procedures**

Children are admitted into the program based on need and family income adjusted for family size. Highest priority goes to children with need for protective services and/or having lowest income.

When a parent seeks services, the CSB staff collects family information and the child is placed on the CLOUDS waitlist.

As openings become available, names are drawn by rank from the CLOUDS waitlist for the various program options in accordance with the approved selection criteria/admission priorities.

If multiple families have the same rank, the family waiting the longest period of time is selected first. CSB makes available 10% of its federally funded spaces for children with disabilities and gives priority for its unlimited over income allotment to these children (also 10% of its funded slots).

Children will not be denied when a family needs less than full-time services.

Families who have been recruited for admissions to the program will be required to complete an application and provide supporting documentation. These documents must include current verification of income, immunizations and birth certification for the child applying for enrollment.

Letters informing the family of acceptance or denial for services must be sent once certification is complete. The family has the right to dispute the denial of services by providing additional information to prove eligibility to receive services.

#### **Q. General Admission Procedure**

When an opening occurs in the center, the authorized representative will call the parent with the highest rank on the CLOUDS eligible list for an appointment for processing eligibility documents, noting any change of income and need for service. At this time, the parent receives an official Notice of Action (NOA) approving or disapproving state funded services. The NOA provides information outlining the parent's due process rights in a statement on the back of the NOA. Parents wishing to appeal an agency decision must follow the procedure carefully or void the right to appeal. Following the timelines is essential. Parents applying for a Head Start only slot sign the Admissions Agreement and Application but do not

receive an NOA.

## R. Children's Enrollment Files

The Federal Regulations and the State of California require children's centers to maintain a file on each enrolled child including the following information:

- Birth Certificate to verify birth, age of child, gender and parents' names.
- Information on date of admission, termination and re-enrollment.
- Names, addresses and phone numbers of parents and other relatives and/or friend that may be contacted in case of emergency.
- A Health History is completed by the parent to collect information on child's general health.

This and much more information is collected during one-on-one parent meetings, while assisting the parent to complete the enrollment packet and assisting the parent with health needs of the child or issues of the parent and household. Information must be updated and data entered into CLOUDS as it is received.

## S. Due Process Requirements

### 1. Notice of Action, Application for Services

The authorized representative decision to approve or deny services shall be communicated to the applicant through a written statement referred to as a Notice of Action, Application for Services. The authorized representative shall maintain records of the Notice of Action, Application for Services in the basic data file. The Notice of Action, Application for Services shall include: (1) the applicant's name and address; (2) the authorized representative's name and address or the name and telephone number of the CSB authorized representative who made the decision; (3) the date of the notice; (4) the method of distribution of the notice.

If services are approved, the notice shall also contain: (1) basis of eligibility; (2) monthly fee, if applicable; (3) duration of the eligibility; (4) names of children approved to receive services; and (5) the hours of service approved for each day.

If the services are denied, the notice shall contain: (1) the basis of denial and (2) instructions for the parent(s) on how to request a hearing if they do not agree with the authorized representative's decision in accordance with procedures specified below.

### 2. Notice of Action, Recipient of Services

If, upon re-certification or update of the application, CSB determines that the need or eligibility requirements are no longer being met, or the fee amount of service needs to be modified, the authorized representative will notify the family through a written Notice of Action, Recipient of Services. The authorized representative will maintain records of all Notice of Action, Recipient of Services in the family's basic file. The Notice of Action, Recipient of Services will include: (1) the type of action being taken; (2) The effective date of action; (3) the name and address of recipient; (4) the name and address of CSB; (5) the name and telephone number of the CSB authorized representative who is taking the

action; (6) the date of notice is mailed or given to the recipient; (7) the method of distribution to the recipient; (8) a description of the action; (9) a statement of the reason(s) for the changes; (10) a statement of the reason(s) for termination, if applicable; and (11) instructions for the parent(s) on how to request a hearing if they do not agree with the authorized representative's decisions.

### **3. Approval or Denial of Child Care and Development Services**

The authorized representative will mail or deliver a completed Notice of Action, Application for Services to the parents within thirty (30) calendar days from the date the application is signed by the parent(s).

### **4. Changes Affecting Service**

The authorized representative will complete a Notice of Action, Recipient of Services when changes are made to the service agreement at the parent's request. Such changes may include, but are not limited to, an increase or decrease in the amount of services, or termination of service.

The authorized representative will mail or deliver the Notice of Action to the parents at least fourteen (14) calendar days before the effective date of the intended action.

To promote the continuity of child care and development services, a family that no longer meets a particular program's income, eligibility or need criteria may have their services continued if the authorized representative is able to transfer that family's enrollment to another program for which the family continues to be eligible prior to the date of termination of services. The transfer of enrollment may be to another program within the same administrative agency or to another agency that administers state or federally funded childcare and development programs within that county.

## **T. Alternative Placement for Children**

When terminating children from the state funded portion of the program, authorized representative is responsible for the following:

- Issue Notice of Action 14 days prior to termination date.
- Explain to parents their appeal rights.
- If parent does not appeal termination:
  - Enter information regarding reason for ending services in CLOUDS Child Data Sheet. Date and initial comments.
  - Change enrollment status in CLOUDS.
  - Discontinue services on Family Data Sheet.
  - Determine if child may return within the program year. If so, place child back on Eligible/Accepted List. If not, archive the CLOUDS record.
  - Assist the family in finding an alternate placement for the child.
- If parent appeals termination, send appeal notice to Assistant Director and continue to serve child until informed to move forward with termination.

Head Start children are always afforded an opportunity in another program option as space is available when their current setting is deemed inappropriate for the child. If the parent is ineligible for Head Start

or our state funded programs, they are to be referred to a partner site and/or to the county's resource and referral agency, Contra Costa Child Care Council (925-676-KIDS).

#### **U. Client's Request for a Hearing and Procedures**

If a parent in the state funded program disagrees with an action, the parent(s) may file a written request for a hearing with the authorized representative within fourteen (14) calendar days of the date the Notice of Action was received.

Upon the filing of a request for hearing, the intended action shall be suspended until the review process has been completed. The review process is complete when the appeal process has been exhausted or when the parent(s) abandons the appeal process.

Within ten (10) calendar days following the receipt of the request for a hearing, the authorized representative will notify the parent(s) of the time and place of the hearing. The time and place of the hearing will, to the extent possible, be convenient for the parent(s).

An Assistant Director, who will be referred to as "the hearing officer" will conduct the hearing. The hearing officer will be at a staff level higher in authority than the staff person who made the contested decision.

The parent(s) or parent's authorized representative is required to attend the hearing. If the parent or the parent's authorized representative fails to appear at the hearing, the parent will be deemed to have abandoned his or her appeal. Only persons directly affected by the hearing will be allowed to attend the hearing.

The Assistant Director will arrange for the presence of an interpreter at the hearing, if one is requested by the parent(s).

The Assistant Director will explain to the parent(s) the legal, regulatory, or policy basis for the intended action.

During the hearing, the parent(s) will have an opportunity to explain the reason(s) they believe the authorized representative's decision was incorrect. The authorized representative will present any material facts omitted by the parent(s).

The Assistant Director will mail or deliver to the parent(s) a written decision within ten (10) days after the hearing. The written decision shall contain procedures for submitting an appeal to ELCD.

#### **V. Appeal Procedure for ELCD Review**

If the parent disagrees with the written decision from the authorized representative, the parent has fourteen (14) calendar days in which to appeal to the ELCD. If the parent(s) do(es) not submit an appeal request to the ELCD within fourteen (14) calendar days, the parents' appeal process will be deemed abandoned and the authorized representative may implement the intended action.

The parent(s) will specify in the appeal request the reason(s) why he/she believes the authorized



representative decision was incorrect.

The parents must submit a copy of CSB's Notice of Action with the appeal request, and CSB's written decision.

Upon receipt of the appeal request, the ELCD may request copies of the basic data file and other relevant materials from CSB. The ELCD may also conduct any investigations, interviews or mediation necessary to resolve the appeal.

The decision of the ELCD will be mailed or delivered to the parent(s) and the authorized representative within thirty(30) Calendar days after receipt of the appeal request.

#### **W. CSB Compliance with ELCD Decision**

CSB will comply with the decision of the ELCD immediately upon receipt thereof.

CSB will be reimbursed for childcare and development services delivered to the family during the appeal process.

If the authorized representative determination that a family is ineligible is upheld by the State, services to the family will cease upon receipt by the authorized representative of the State's decision.

#### **X. Retention of Enrollment Records**

Delegate Agencies, the Grantee-Operated Program, and sub-contractor retain copies of official enrollment application forms, which contain certification data for each child enrolled during the program year for 5 years.

Copies of enrollment records serve as a primary source document for audit purposes.

Cooperation with local Contra Costa County welfare offices is encouraged for recruiting eligible children into the program.

#### **Y. Enrolled but Waiting For Transfer Protocol**

When staff has a child/family that wants to transfer sites:

- Comprehensive Services staff and site staff who learn about a family wanting to transfer communicate via email to all applicable SSs, CSAMs, the Central Enrollment Unit (CEU) & Partners (as known or Partner CSAM) the need for a transfer. Make additional calls as necessary.
- Clearly and fully document the transfer in the case file on CLOUDS.
- Clearly and fully explain to the family about any changes they may experience as a result of a possible program model change at time of transfer to other center (ex: part-day to full-day - family must now show need)

When staff are searching to fill an open slot:

- Notify CSAM immediately upon determination that a slot will become available.
- CSAM check notes for any children that are enrolled but waiting for a slot.
- CSAM of current center reviews files for pending issues prior to transfer and communicates any issues to receiving CSAM. Transfer file to new center's Site Supervisor or designee.
- Authorized representative completes 9600S and NOA. Also, collect any additional documentation required for program model change (see Eligibility and Need Criteria Documentation Checklists)
- Site Supervisor enrolls the child from CLOUDS.

## Z. Transfer of Child with Disabilities or of Child Receiving Mental Health Services

When a child with disabilities or receiving mental health services transfers to another CSB site, communication is vital. The Comprehensive Services team member is responsible for notifying the Site Supervisor/Head Teacher and CS/Disabilities/Mental Health Manager in writing. Notification is to be sent before the child begins at another site so that necessary arrangements or accommodations can be made.

The Site Supervisor/Head Teacher will inform the appropriate teacher of the transfer. The Comprehensive Services team member and the CS/Mental Health Manager will complete this process within two weeks of notification of an opening.

### AA. CSPP Full-day to Part-Day or Tuition Based Approval Process

#### 1. General Description

In the event that a family loses eligibility or need for services during the program year, CSB has the discretion to offer families the option to receive services part-day (less than 4 hours per day) or pay a fee for full-day services (Tuition Based) rather than terminate services. Part-day services could be offered in the child's same class or in another class during the "pre-school portion of the day" (8:30 – 12:00) as available. Whenever possible, the child will be allowed to stay in their current classroom.

CSB fiscal unit tracks CDE earnings monthly, and notifies program staff if the risk of under earning develops. If under earning is a risk, ADs cease to approve all moves to part-day until risk subsides according to reports from fiscal unit.

#### 2. Action Guidance for Staff

##### i. Full-day or $\frac{3}{4}$ time to Part-day

- At recertification, the authorized representative determines family no longer meets eligibility or need criteria (for more than 4 hours of care) and issues NOA for termination of full-day (or  $\frac{3}{4}$  time) services effective 14 or 19 days as appropriate.
- The below process must be complete no later than the effective date of action noted on the NOA.
- Authorized representative ensures that each class is fully enrolled morning and afternoon through enrollment and certified hours of care.
- Authorized representative determines if part-day services are available during the

preschool portion of the day (8:30 – 12:00).

- If available, the Authorized representative and family determine if part-day services are desirable and appropriate.
- If desired by the family and appropriate, Authorized representative completes approval form CSB607 (See CSB Forms).
- If part-day services are unavailable, not desired by the family or inappropriate, authorized representative terminates the child and closes the file.
- AD approves or denies CSB607 request, maintains original for her records and returns a copy to the site.
  
- If approved, authorized representative files copy in student file, updates CLOUDS (waitlist & re-enroll with new program model), and updates student file including the following and moves the child to part-day services on date on or after AD approval date and no later than effective date of NOA terminating full-day (or  $\frac{3}{4}$  time) services.
  - Completed 9600S – update program model at least and hours of care, and other information as applicable
  - Income and family size remain as they were at original enrollment unless documentation of current income or family size benefits the family.
  - NOA stating change to part-day services - effective date is same as effective date for termination of full-day services (or before if desired by the parent).
  - Update CLOUDS hours of care.
  - Update CLOUDS program model (while retaining previous enrollment history), reason for needing care (if applicable), program option (if applicable) to “part-day center- based”, and any other appropriate updates.
  - The Site Supervisor ensures child is reflected on appropriate 9400s for appropriate number of days during the month of the move.

**ii. Full-day or  $\frac{3}{4}$  time to Tuition Based (TB)**

- At recertification, the authorized representative determines family no longer meets eligibility or need criteria (for more than 4 hours of care) and issues NOA for termination of full-day (or  $\frac{3}{4}$  time) services effective 14 or 19 days as appropriate.
- Authorized representative ensures that each class is fully enrolled morning and afternoon through enrollment and hours of care.
- Authorized representative determines if TB services are available.
- If available, authorized representative and family determine if TB services are desirable and appropriate.
- If desired by the family and appropriate, authorized representative completes approval form CSB607 (See CSB Forms).
- AD approves or denies request, maintains original for her records and returns a copy to the site.
- If approved, authorized representative closes file and CLOUDS, completes all applicable paperwork and required forms, including an NOA stating termination of services and moves the child to TB services on first day after the end of the 14 to 19 day NOA waiting period.
- The Site Supervisor ensures child is reflected on 9400 for only the appropriate number of days during the month until the date the move to TB services was effective.

- See section at end of this manual for Tuition Based services policies and procedures.

## **BB. Withdrawal of Child from the Program**

When the teaching staff learns that a child has terminated services, they should notify the Site Supervisor. The “last day attended” should be noted on the child's application (9600) and the sign in/out sheet. They must also notify the CSAM immediately upon knowledge of a pending vacancy. Whenever possible, the reason for the withdrawal should be ascertained and recorded. The child's termination date in CLOUDS is the first date the child does not attend so that attendance data can be captured for the last day of attendance.

Parents who wish to reinstate must meet Title V Regulations. If the parents are successful in meeting the Title V Regulations, the parent must complete all required paperwork and provide income documentation.

The following are some reasons that a child might be placed back on the waiting list (please see Parent Handbook for a complete listing):

- A pattern of unexcused absences - Poor attendance / sporadic attendance is defined as three or more unexcused absences. When this occurs, the teacher calls the Site Supervisor, who makes personal contact with the parent as soon as they realized a child has not attended and the parent has not called. If multiple service needs are disclosed by a parent, he/she should be offered Case Management services in order to create a plan to correct the absenteeism. Every effort is made to assist parents in removing barriers to attendance.
- Parent's failure to comply with rules/regulations, resulting in danger to the health / safety of children / staff – (Must be approved by the Assistant Director)
- Parent's failure to comply with health requirements as mandated by Community Care Licensing.
- Extreme behavior problems in a child that may be harmful to the child or others (This must be based on a joint assessment by the CS / Disabilities / Mental Health Manager, and the Site Supervisor.)
- For General Childcare, a change in income or need eligibility status such that the family is no longer eligible for care or failure to submit required documentation to verify continued need/eligibility at recertification.
- For the full-year program, kindergarten-bound CSPP eligible 4 year olds begin to transition out of the program at the end of the program year, which ends June 30th. Those children who have been determined eligible before the end of the program year may remain in the program until they start kindergarten as long as they are still within their certification period. Each year, the program will determine last days of enrollment extended past June 30th and take into consideration the community need for continued services.

When a child has been disenrolled from the program, the Site Supervisor will then call the Assistant Director, CSAM and teacher, notifying them of a new child replacing the terminated child. The Site Supervisor will call the parent of the terminated child, informing him/her that the child has been put back on the waiting list. If a terminated child is brought to school, the parent should be told to speak to the Site Supervisor.

## CC. Attendance Expectations

### 1. General Description

CSB children are expected to attend classes daily. Regular attendance is strictly enforced, and each center maintains documentation of all attendance/absenteeism activities. Upon registration, parents are oriented about enrollment/attendance policies. Each parent receives a copy of the attendance policies, and the importance of regular attendance is stressed to them. Re-orientation of the enrollment/attendance policies occurs at the beginning of classes, and ongoing reminders are communicated as needed. Parents are expected to report absence reasons to the center as soon as possible and within one hour of their child's start time.

### 2. Unexcused Absences

To ensure children are safe when they do not arrive at school, CSB must make attempts to contact parents within one hour for unexpected absences. CSB utilizes SMS technology to efficiently communicate with families. Strategies to contact families within one hour include the use of CLOUDS automatic SMS (text) messages. Parent can reply via text messaging to inform center staff of absence reasons. Each day a child's absence is not reported by the parent, the Site Supervisor or center staff contacts the parent to determine the cause of the absence and to clarify the attendance policy.

After two consecutive unexcused absences, direct contact is made with the parent, such as a conference or home visit. Parents are informed that failure to participate in the conference or visit may result in a loss of services and will be placed onto the waiting list.

After ten consecutive or intermittent days of unexcused absences, the child is dropped from the active program and is put back onto the waiting list. (Children absent due to illness are counted in the Average Daily Attendance criteria.) Site supervisor will check attendance sheets daily or at least three times a week to ensure attendance policies are implemented.

### 3. Re-occurring Absences

Site Supervisors, in collaboration with teaching staff, will identify and assess patterns of absences for each child. Within 60 days, children with patterns of absences and those at risk of reaching an absence rate of 10% are identified and family support services provided. Absences per child are analyzed on a monthly basis utilizing CLOUDS reports. Family meetings are held as needed to clarify the attendance policy and identify strategies in which a family may implement to improve attendance.

## DD. Attendance Accounting

### 1. General Description

Accountings for attendance is completed daily by the classroom teacher by ensuring parents sign their child into CLOUDS **upon arrival**. Absence reasons are entered into CLOUDS daily and no later than Friday of each week, and reports are utilized to ensure that each center maintains 85% monthly attendance for all federally funded slots. If the monthly attendance rate falls below 85%, the Site Supervisor will be notified by the ERSEA Managers and will utilize the CLOUDS absence reports to analyze the reasons. If

average program attendance for federally funded slots falls below 85% for any month, the ERSEA Manager develops a corrective action plan after analyzing data and identifying root causes.

Within 60 days and on an ongoing basis, patterns of absences per child are analyzed. A risk assessment for chronic absenteeism is conducted. Chronic absenteeism is defined as an absence rate of 10% of the program days per year.

## 2. Procedure

### i. Directly Operated Sites

Attendance is captured at CSB centers by CLOUDS via the wall pads as parents electronically sign their child into the program. Teachers must ensure that this is done immediately upon the child's arrival to the classroom.

If a parent fails to sign their child into CLOUDS, staff must do the following:

- Staff will "sign" child into CLOUDS without a signature to place the child in the classroom and part of the ratio.
- The parent **MUST** be called back to the center to sign-in on the hard copy sign-in/out sheet (CSB682) with the original drop-off time which can be obtained from CLOUDS.
- In CLOUDS staff will select "Parent no sign in" from the drop down menu as the Reason under the Attendance Sign-in/out sheet for the specific child.

If the parent fails to sign their child out in CLOUDS, staff must do the following:

- Staff will "sign" child out in CLOUDS without a signature to take the child out of the classroom and out of the ratio.

Staff will notify the parent as soon as the parent or authorized representative returns to the center (i.e. next morning) that a sign-out signature was not collected. The parent will sign out on the hard copy sign-in/out sheet (CSB682) with the original sign out time which can be obtained from CLOUDS. In CLOUDS, staff will enter "Parent no sign out" from the drop down menu as the reason under the attendance sign-in/out sheet for the specific child.

In the event that the electronic system fails and parents are not able to sign their children in or out of CLOUDS, staff **MUST** do the following:

- A hard copy sign-in/out sheet (CSB682) shall be maintained by each classroom teacher which the parents will use to sign in and/or out until CLOUDS is back on-line.
- As soon as the system comes back up, staff will sign children in and/or out (as applicable) of CLOUDS **without a signature** to place them in or out of the classroom for ratio purposes.
- Staff will do this by using the Manual Attendance feature in CLOUDS to sign children in and/or out, enter attendance/absences and enter meal counts for the time CLOUDS was not operational. For this purpose it is acceptable for staff to select the child's general contract hours

for the approximate sign in and out times as parents will already have physically signed on the hard copy sign-in/out sheet (CSB682) with the correct sign in and out times. Even if some children are signed-in on CLOUDS when this update by staff takes place, clicking on “All Attendance” will only affect those who have not yet signed in; other children’s data will not be affected.

A code is used consistently throughout the entire program to mark Present, Excused Absence, and Unexcused Absence. Absences are marked with an “A” and given the excuse provided by the parent in the comment section of the sign-in sheet. The teacher determines if the absence is excused in accordance with the excused and unexcused absence policies included herein. When absences are excused, the “A” is enclosed in a circle “(A)”. All information must be immediately entered into CLOUDS when the system becomes available through the manual attendance section or the wall pad by doing the following:

- **Wall Pad:**
  - Go to Reports
  - Select the month
  - Select the child
  - Click on the Attendance button
  - Enter Attendance data
  
- **CLOUDS:**
  - Go to Attendance Folder
  - Select Manual Attendance
  - Click on the “A” box for that child
  - Enter the Attendance data

Teachers must enter absence reasons daily and review for accuracy by Friday of each week via the Wall Pad system. Parents are responsible for reporting absence reasons within one hour of their child's start time and must give the reason for a child’s absence when the child returns to school if not already provided. On occasions where the child has not returned to school, the Site Supervisor can enter the reason for absence in CLOUDS after contacting the parent.

At the end of the month, the Teacher reviews each attendance record via the Wall pad system and verifies the totals for the days of attendance, excused and unexcused absences. After verifying each attendance record, the teacher will click on the “Submit” button which will send the electronic file to the Site Supervisor for their approval. All hard copy sign in and sign out sheets (CSB682) should also be forwarded to the Site Supervisor.

After Teachers have submitted the attendance records via the Wall Pad, Site Supervisors shall review the submitted attendance sheets under the Track Forms section in CLOUDS under the “Submitted” section. After reviewing each attendance sheet for accuracy, the Site Supervisor shall “Approve” or “Deny” each attendance record. If the attendance record is denied, it will go back to the wall pad for correction and re-submittal by the Teacher.

**ii. Partner Sites & Family Child Care Homes**

Attendance is captured at CSB Partner centers by CLOUDS via Galaxy tablets as parents electronically sign their child into the program. Teachers must ensure that this is done immediately upon the child's arrival to the classroom.

If a parent fails to sign their child into CLOUDS, staff must do the following:

- Staff will "sign" child into CLOUDS without a signature ("STAFF" button) to place the child's status as "in the classroom" on the system.
- The parent MUST be called back to the center to sign-in on the hard copy sign-in/out sheet with the actual drop-off time.
- In CLOUDS staff will select "Parent no sign in" from the drop down menu as the Reason under the Attendance Sign-in/out sheet for the specific child.

If the parent fails to sign their child out in CLOUDS, staff must do the following:

- Staff will "sign" child out in CLOUDS without a signature to place the child's status as "child out of the classroom" on the system.
- Staff will notify the parent as soon as the parent or authorized representative returns to the center (i.e. next morning) that a sign-out signature was not collected. The parent will sign out on the hard copy sign-in/out sheet with the original sign out time. In CLOUDS, staff will enter "Parent no sign out" from the drop down menu as the reason under the attendance sign-in/out sheet for the specific child.

In the event that the electronic system fails and parents are not able to sign their children in or out of CLOUDS, staff MUST do the following:

- A hard copy sign-in/out sheet shall be maintained by each classroom teacher which the parents will use to sign in and/or out until CLOUDS is back on-line.
- As soon as the system comes back up, staff will sign children in and/or out (as applicable) of CLOUDS without a signature to place them in or out of the classroom and use their Actual sign-in/out times from the hard copy sign-in/out sheet.

A code is used consistently throughout the entire program to mark Present, Excused Absence, and Unexcused Absence. Absences are marked with an "A" and given the excuse provided by the parent in the comment section of the sign-in sheet. The teacher determines if the absence is excused in accordance with the excused and unexcused absence policies included herein. When absences are excused, the "A" is enclosed in a circle. All information must be immediately entered into CLOUDS when the system becomes available through Galaxy tablets (iCLOUDS) by doing the following:

**iii. Galaxy Tablets (iCLOUDS):**

- Under "My Classroom", click on the child's name you want to enter attendance for
- Click on "Attendance Sign-in/out sheet"
- Select the Month
- Click on the Day you want to enter attendance



- Enter Attendance data

**iv. CLOUDS (CSB Partner Unit Staff):**

- Go to Attendance Folder
- Select Manual Attendance
- Click on the “A” box for that child
- Enter the Attendance date

Partner Teachers must enter absence reasons by Friday of each week via the Galaxy tablets. Parents are required to give the reason for a child’s absence when the child returns to school if not already provided. On occasions where the child has not returned to school, the Site Supervisor (CSB Staff) can enter the reason for absence in CLOUDS after contacting the parent.

At the end of the month, the Partner Teacher reviews each attendance record via the Galaxy Tablet and verifies the totals for the days of attendance, excused and unexcused absences. After verifying each attendance record, the teacher will click on the “Submit” button by the 3rd day of the following month which will send the electronic file to the Site Supervisor (CSB Partner Staff) for their approval. All hard copy sign in and sign out sheets and absence notes should also be forwarded to the Site Supervisor (CSB Partner Staff) by the 3rd of the following month.

After Teachers have submitted the attendance records through the Galaxy Tablet, Site Supervisors (CSB Partner staff) shall review the submitted attendance sheets under the Track Forms section in CLOUDS under the “Submitted” section. After reviewing each attendance sheet for accuracy, the Site Supervisor (CSB Partner Staff) shall “Approve” or “Deny” each attendance record. If the attendance record is denied, it will go back to the Galaxy tablets for correction and must be re-submittal by the Teacher.

**v. CSB Partner Staff**

- Collect hardcopy attendance sheets & absence notes from Partner agencies no later than the 3rd of the following month and enter into CLOUDS Manual Attendance module by the 5th of each month.
- all attendance records need to be verified (i.e. excused, un-excused and BID...etc.) via CLOUDS

**vi. CD 9400 Process**

CLOUDS will automatically generate the state Monthly CD 9400 sheets (Programs funded by the State). To complete the submission process, staff will do the following:

- Using the CLOUDS 9400 Monthly Enrollment report, Site Supervisors or Partner Staff will check each child’s funding, day length, adjustment factors and attendance records for accuracy. The Site Supervisor compares each child’s 9400 record with their electronic

attendance record (CLOUDS>Track Forms>Attendance) & hard copy sign-in/out sheets (CSB682). Any discrepancies are to be corrected in CLOUDS via the Attendance Analysis module.

- After all discrepancies have been corrected, the Site Supervisor or Partner Staff will click on each child's individual verification button in which they can change the selection from "No" to "Yes" signifying that information for that child is correct. When all the children listed under each 9400 sheet has been verified (All "Yes" for each child listed), the site supervisor can now complete the sheet by clicking on the final "Verify" button which will record the site supervisor's or CSB Partner staff's digital signature on the 9400 sheet thus completing the process.
- All 9400 sheets must be completely verified by the 5<sup>th</sup> workday of the month on CLOUDS.
- Assistant Directors/Cluster Clerks or partner staff confirms that all CD 9400 sheets have been verified on CLOUDS via the 9400 Monthly Enrollment report by the 6<sup>th</sup> workday of the month. Only the hard copy sign-in/out sheets (CSB682) must also be submitted to the Assistant Director or CSB Partner Analyst for their review. It is not necessary print out the 9400 sheets and electronic attendance sheets from CLOUDS as that data is already in CLOUDS. When all 9400 sheets have been verified in CLOUDS via the 9400 Monthly Enrollment report (requires a visual inspection from AD or CSB Partner Analyst), all hard copy sign-in/out sheets (CSB682) are forwarded to Business Systems by the 6<sup>th</sup> workday.
- Business Systems staff will confirm that all children have been verified on the 9400 Monthly Enrollment report (visual inspection). If there are any discrepancies, the specific Site Supervisor or Partner Analyst will be notified of necessary corrections. Corrections must be done as soon as possible.
- Business Systems staff will notify Fiscal when CD 9400s have been checked and completed by the 10<sup>th</sup> work day of each month.
- When the Fiscal Department is notified by the Business Systems Unit that all 9400s have been verified, CSB Fiscal staff will generate the electronic CDNFS 9500 and CDNFS 8501s to review. Once CSB Fiscal staff determines the reports are accurate, they will print and submit the reports to the California Department of Education by the 20<sup>th</sup> of the month for each quarter (September, December, March & June).
- The Business Systems Analyst will generate the CD 801A report in CLOUDS and submits it electronically to the State CDMIS website by the 20<sup>th</sup> of every month for the preceding month.

#### **vii. Excused Absences**

- **Illness:** Absences may be excused for illness of the child, parent, or any sibling. If the absence is due to the illness of the child, the specific reason must be recorded on the sign-in sheet (e.g. cold, cough, sore throat, fever, runny nose, etc.). Illness absences lasting three (3) or more consecutive days may require appropriate medical professional documentation.
- **Family Emergency:** Absences due to family emergencies may be considered excused absences. The reason for the family emergency must be specified in the sign in and out sheets. Any of the following reasons can be considered family emergencies:
  - Death of a family member.
  - Immediate need for medical health treatment of anyone in the family unit.

- Any incident caused by a situation which results in the family having their normal schedule disrupted to the extent that the parent cannot safely accompany their child to the site (i.e., theft, fire, flood, arrest and/or incarceration of a parent, or any other similar situations)
  - If regular means of transportation to school is disrupted, and no alternative, i.e. public transportation is available.
  - Any other situation at the discretion of the site supervisor.
- Best Interest Days (BID): Absences may be excused for the “best interest of the child” which would include time for a child to be with a parent or relative (i.e. vacation or visitation with non-custodial parent, a court-mandated visit, or participating in cultural or religious holidays). Other requests for BID are at the discretion of the Site Supervisor. BID absences are limited to ten (10) days per program year per child, with the exception of children who are recipients of protective services or are at risk of abuse or neglect. Proof of such services must be documented in the child’s data file. The reason for the “Best Interest Day” must be specified in the sign in and out sheets.
  - Exclusion due to unmet health requirements: Children must be excused for immunizations that are not up-to-date or a physical or TB clearance that is not received within 30 days of enrollment. Parents are allowed one extension for physicals beyond the 30 day requirement with proof of an appointment on file. No extensions are allowed for TB clearances. Children are permitted up to three days of excused absences. After that, a Notice of Action (as applicable) will be issued for termination from the program.

#### EE. Title XXII Requirements for All Children

Record of “up to date” immunizations must be on file before children can attend. A complete physical examination by the child’s physician is required within 30 days of admission. A form is provided at the intake interview for use by the family physician. An immunization record authorized by a Medical Doctor or a Registered Nurse must be shown. The Site Supervisor or Comprehensive Services staff will review and file a copy at the time of enrollment. Immunizations must be kept current while the child is attending the centers. The Site Supervisor or Comprehensive Services staff member notifies parents when immunizations are due. Children whose immunizations are not kept up to date will be excluded from the center until they are brought up-to-date, unless there is a medical waiver on file.

Although TB clearance must be obtained within thirty days of admission, the physical must also have indicated the result of the TB screening on the child’s record. Children may be eligible for a free physical through the Child Health Disability Prevention Program. Parents should be encouraged to discuss this option with the Site Supervisor or Comprehensive Services staff member.

Enrollment information is kept confidential from all but: (1) authorized program staff, (2) California Department of Education program evaluators (3) authorized public officials. Information will not be released without parental permission, except as mentioned above.

Children with disabilities are accepted by the centers when CSB is able to obtain appropriate documentation to determine the child’s needs. CSB will work with the family to make all reasonable

accommodations for the child. CSB complies with ADA and IDEA.

## FF. Fees for Non-Head Start and Early Head Start Funded Programs

### 1. Purpose

The purpose of these procedures is to document the process of billing, collecting, and depositing of childcare fees in accordance with County policies and the State's Funding Terms and Conditions related to child development programs.

### 2. County Administrative Bulletins

Community Services Bureau shall comply with the requirements set forth in Administrative Bulletin Number 205 regarding cash collections procedures.

### 3. Fee Assessment

CSB shall use the current fee schedule prepared and issued by California Department of Education for child care programs funded by the State.

- The family fee will be assessed either a flat monthly full-time or part-time fee based on certified hours of care for the month, income, and family size.
- If family's certified need is 130 hours or more, the family will be assessed full-time fee.
- If the family's certified need is less than 130 hours, the family will be assessed part-time fee.
- Upon initial enrollment or final enrollment month, a family may be charged cost of care fee (current State Reimbursement Rate (SRR) multiplied by adjustment factor multiplied by days of enrollment) if this is less than monthly part-time fee rate.
- The family fee will be assessed:
  - **At initial enrollment.** If the enrollment day is the first of the month, the family fee will be assessed a full-time or a part-time fee based on their certified hours of care. If the enrollment day is not the first day of the month, fee will be based on the certified hours for the partial month and another fee for each subsequent month based on their certified hours. The first payment is due the first day of enrollment and due the first day of each subsequent month.
  - **At recertification.** The assessed fee will be effective on the first of the subsequent month after the new fee is assessed (Issue date of NOA) if there are 14 or 19 calendar days remaining in that month. If there are less than 14 or 19 days remaining in the month following the issue date of NOA, the assessed fee will become effective on the first of the month a month after the subsequent month.
  - **When family voluntarily requests a reduction of family fee.** The assessed fee reduction will be effective on the first day of the month that follows the issue date of the NOA. Families must still be given 14/19 calendar days from the issue date of the NOA, to file an appeal.
- If more than one child in a family is participating in the state funded program the family's fee shall be assessed and collected based on the child who is enrolled for the longest period in a day.

- If the children are located at different child care centers, the fee shall be collected by the center in which the child who is enrolled the longest period in the day is enrolled.
- If a child drops at one center and enrolls in another before the NOA period, both centers must communicate throughout the transition to determine the impact on related fees. (We must communicate)

For Fee for Service Program (Tuition Based), CSB shall use the monthly rate approved by the County Board of Supervisors.

#### **4. Exclusions from Fee Assessment**

- The exclusions shall apply only to State-funded childcare programs.
- No fees shall be collected from CCTR, FP, and FPL families with an income level that, in relation to family size, is less than the first entry in the fee schedule.
- There is no family fee for PP and PPL programs
- Families receiving services because the child is at risk of abuse, neglect, or exploitation, may be exempt from paying fees for up to twelve (12) months if the referral prepared by a legally qualified professional from a legal, medical, or social services agency, or emergency shelter specifies that it is necessary to exempt the family from paying a fee. The cumulative period of time that a family may be exempt from paying a fee for this reason shall not exceed 12 months.
- Families receiving services because the child is receiving protective services may be exempt from paying fees for up to twelve (12) months if the referral prepared by the county welfare department, child welfare services worker specifies that it is necessary to exempt the family from paying a fee. The cumulative period of time that a family may be exempt from paying a fee for this reason shall not exceed 12 months.
- In accordance with the State's Management Bulletin 09-18, all families that currently receive a CalWORKs grant on behalf of the children will not be assessed a fee. Former CalWORKs grant recipients are not included in this exemption.

#### **5. Credit for Fees Paid to Other Service Providers**

This section shall apply only to State-funded child care programs.

- When CSB cannot meet all of the family's needs for child care for which eligibility and need have been established, CSB shall grant a fee credit equal to the amount paid to the other provider(s) of these childcare and development services. CSB shall apply the fee credit to the family's subsequent fee billing period. The family shall not be allowed to carry over the fee credit beyond the family's subsequent fee billing period.
- CSB shall obtain copies of receipts or cancelled checks for the other child care and development services from the parent. The copies of the receipts or cancelled checks and a complete and signed CSB Fees Rendered Form shall be maintained in the parent's fee assessment records.
- The copies of the receipts or cancelled checks and a complete and signed CSB Fees Rendered Form are due by the first day of the month. Fees due shall be considered delinquent if this documentation and any remaining fees owed are not collected within seven (7) calendar days.
- Copies of the receipt or cancelled check shall include the following: name of the other service provider, amount of payment, date of receipt or payment, the period of child care services covered by the payment, name of the parent, and name of the child who received childcare

from the other service provider.

### **GG. Billing Procedures**

Childcare fees are paid in advance. One week before the end of each month, each Center shall submit to the CSB Fiscal staff a Billing Worksheet that contains the following information:

- Name of the parent or guardian
- Name of the child enrolled
- Funding category of the program where the child is enrolled
- Monthly rate determined by the Site Supervisor based on State's fee schedule (for child development contracts) or county approved rate (for fee for service program)
- Total amount assessed
- Collections made in prior month
- Comment section for effective date of the monthly rate, last date the child will attend the day care, and other pertinent information that affects the calculation of monthly billing.

No adjustments shall be made for excused or unexcused absences. The parent or guardian shall pay the total amount billed if the child is absent regardless of the reason during the billing month.

Periodic review of billing information – Assistant Directors shall reconcile or perform independent review from the participant's files to the billing report to ensure all parent fees are billed correctly.

CSB Fiscal staff shall input the information from the Billing Worksheet to QuickBooks in order to generate the Monthly Invoice for the following month. The Invoice shall be sent to the Site Supervisor for distribution to fee paying parents on or before the first of the following month.

Childcare fees can be paid in advance or are due by the first of the month. They shall be considered delinquent if not paid after seven (7) calendar days.

If account is delinquent at the close of business on the seventh calendar day, a Notice of Action shall be issued to inform the family of the following:

- The total amount of unpaid fees
- The fee rate
- The period of delinquency

That services shall be terminated fourteen (14) to nineteen (19) calendar days (depending on method of issuance) from the date of the Notice of Action unless all delinquent fees are paid and/or documentation of credit for fees paid to other service providers is collected before the end of the 14-19 day waiting period. The 14-day period pertains to NOAs that are hand delivered to the parent; the 19-day period pertains to NOAs that are delivered to the parent via the US Postal Service.

If the family is unable to pay their fee the program shall accept a reasonable plan from the parents for payment of delinquent fees. The plan must be developed before the end of the 14-19 day waiting period and shall not exceed 4 months to repay the full amount of delinquent fees. The center shall continue to provide services to the child provided the parents make a minimum "good faith" payment

of at least 10% of the total delinquent fees at the time the plan is developed, pay their full assessed monthly fees when due and comply with the provisions of the repayment plan. The Delinquent Child Care Fee Repayment Plan Form can be printed from the Intranet-CSB Resource Center under 0600 Enrollment of Electronic Forms.

- Agency staff shall submit the repayment plan to their Assistant Director or Partner Agency Director for approval before finalizing the plan. Once approved, the originals of the termination NOA and repayment plan shall be filed in the family file and copies shall immediately be provided to CSB Fiscal staff and the center's Assistant Director or Partner Agency Director.
- Upon termination of services from non-payment of delinquent fees, staff shall make this indication in CLOUDS, and the family shall be ineligible for childcare services until all delinquent fees are paid.

Center staff must issue a Notice of Action-Delinquent Fees on the morning of the 8th day of the billing month if family fee is unpaid by close of business on the 7th day of the month. Center will keep a copy of the NOA-Delinquent Fees in the child's file and send a copy to CSB Fiscal staff upon its issuance. The center shall make reasonable attempts to collect unpaid fees from families before the exhaustion of the 14/19 day appeal request period.

If unpaid fees have not been collected successfully by the end of the 14/19 day appeal request period, services to the family must be terminate unless a payment plan was established prior to the 14/19 day (see payment plan policies and procedures), CSB Fiscal staff is notified immediately of termination or establishment of Payment Plan, and copies of all paperwork related to action taken, including the NOA and CSB664- Delinquent Child Care Fee Repayment Plan must be sent to CSB Fiscal Staff and original copies are filed in child's file.

If unpaid fees are collected, staff shall send the pre-numbered receipt, Deposit slip/original check marked "electronically deposited", and original bank receipt/bank deposit confirmation to CSB Fiscal Staff immediately for recording. Triplicate copy of Receipt issued to family is filed in child's file.

In the event the child is no longer enrolled at the center:

- CSB Fiscal staff will send a letter of collection together with the Statement of Account and NOA-Delinquent Fees to the family. If the account is still unpaid after 2 weeks, a follow up collection letter as a second notice will be sent to the family.
- All attempts to collect unpaid fees must be made within 45 days of termination
- Any over payment made by the family towards a family fee of \$10.00 or less, will be refunded upon a family's written request.

## HH. Fee Collection Procedures

- Each center shall collect checks, money order or cashier check from the parents. Cash is not acceptable mode of payment. A designated center staff shall issue signed receipt to the parent

for the amount collected. At CSB centers, this person must be a county employee, and may not be temporary staff. The designated staff shall be accountable for the money received and such money shall be stored in a locked cash box placed in a secured area of the center.

- Center staff shall process all collected fees immediately. At least once weekly, or if fee collections exceed \$250, the designated staff must endorse the back of each check properly and deposit the money to the County Wells Fargo Bank account. Immediately following the deposit designated staff shall submit a copy of the receipt(s) issued to the parent(s), a copy of the Deposit Slip/original check marked "electronically deposited" and Original Bank Receipt/bank deposit confirmation to the CSB Fiscal Unit.
- CSB Fiscal staff shall check copies of Receipts to make sure that total amount agrees to Deposit Slip/original checked marked "electronically deposited" and Bank Receipt/bank deposit confirmation amounts.
- CSB Fiscal staff shall enter the payment information to QuickBooks in order to update parent accounts. Receipts shall be stamped "Posted" and filed in numeric order by Center.
- CSB Fiscal staff shall code the collected family fees accordingly and input the data in the county's Electronic Deposit Permit system.
- CSB Fiscal staff shall file the Deposit Slip/original checked marked "electronically deposited", Bank Receipt/bank deposit confirmation and print out of Validated Deposit Permit in the Deposit binder.
- Checks marked "electronically deposited" are to be kept in a locked file cabinet for fourteen (14) days from the deposit date before shredding by CSB Fiscal staff.

## II. Receipts/Banking Procedures

The S-Receipts issued to parents shall be in quadruplicate (four copies).

- Take the hard cardboard piece from inside the back cover of the book to use between the series of S-receipts.
- Give the original S-receipt to the parent and send the duplicate copy of the S-receipt to the CSB Fiscal staff with the duplicate deposit slip and original bank receipt (the transaction record).
- The triplicate copy of the S-receipt shall be put in the child's file at the site.
- The quadruplicate copy of the S-receipt shall stay in the S-receipt book and the entire book shall be sent to the CSB Fiscal staff when a new S-receipt booklet is needed.
- The following steps shall occur for voided receipts:

Write "VOID" across the receipt. The voided S-receipt must be signed and dated by the Site Supervisor.

The reason for the void must also be written on the S-receipt. The original, duplicate and triplicate copies shall be sent to the CSB Fiscal staff when an error is made that resulted in the voiding of the S-receipt.

- For credit for fees paid to other service providers, the center staff shall send to CSB Fiscal staff a copy of the receipt or cancelled check paid by the parent to the other childcare service provider. The Site Supervisor shall attach these receipts or cancelled checks to the signed Fees Rendered Form and submit to CSB Fiscal staff. The Fees Rendered Form can be printed from the Intranet-CSB Resource Center, under 0600 Enrollment of Electronic Forms. The form should be properly filled out and the credit amount should be equal to and no more than the amount paid to the other provider and shall not



exceed the parent fees billed during the month.

## JJ. Confidentiality of Records

The use or disclosure of all information pertaining to the child and his/her family will be restricted to purposes directly connected with the administration of the program. The Comprehensive Services Assistant Manager or Site Supervisor will permit the review of the basic data file by the child's parent(s) or parent's authorized representative, upon request and at a reasonable times and place.

## PART II. Planning

### A. Philosophy

The Community Services Bureau Philosophy of Program Management is as follows:

To establish a culturally competent, systematic and innovative process of program planning that demonstrates forward mobility and strategic thinking, in an effort to meet the changing needs of the children and families within the community.

In efforts to fulfill our philosophy, administrative staff including fiscal, personnel, information technology and administration, is committed and dedicated to carry out the following program goals:

- Poor health and nutrition are significantly correlated to children and families living in poverty. CSB will address the need to improve indicators of nutritional health through increased education and physical activity.
- Comprehensive Services staff is required to maintain up to date accurate data in order to provide quality comprehensive services to children and families, and to maintain agency compliance. CSB will provide ongoing training opportunities to assist staff in enhancing their record keeping skills.
- Exposure to violence has a lasting impact on children's development including their emotional, mental and physical health. CSB will promote positive and enduring adult-child relationships that increase a child's level of secure attachments by providing services to promote the safety and well-being of children and families.
- CSB will support parents in their ability to maintain family well-being and promote positive parent-child relationships. Families will become more competent and experience increased joy as they gain confidence in their parenting.
- CSB will achieve and maintain an expanded and stable funding base of diverse sources.

CSB implements a systematic, ongoing process of program planning that includes consultation with the programs governing body, policy groups, program staff and with other local community organizations that serve enrolled families.

CSB planning includes: community assessment, multi-year (long-range) program goals and short-term objectives, systems planning calendar and written plans for implementing services in each of the program areas.

## B. Methodology

### 1. Community Assessment

- The Community Assessment is conducted once over the five year grant period with annual updates at the onset of each program year. The Community Assessment helps keep CSB abreast of substantive issues facing the community which informs all systems and services of the bureau. Strengths, resources, needs, changes, and trends in the CSB service area are identified and integrated into the planning process and into the development and implementation of policies, procedures, service plans and goals and objectives.
- The Community Assessment process is led by a CSB Analyst. The data that is collected externally and internally and must consist of, but is not limited to:
  - The number of eligible infants, toddlers, preschool age children, and expectant mothers, including their geographic location, race, ethnicity, and languages they speak.
  - Eligible children experiencing homelessness;
  - Eligible children in foster care;
  - Eligible children with disabilities, including types of disabilities and relevant services and resources;
  - The education, health, nutrition, and social service needs of eligible children and their families, including prevalent social or economic factors that impact their well-being;
  - Typical work, school, and training schedules of parents with eligible children;
  - Other child development, child care centers, and family child care programs that serve eligible children, including home visiting, publicly funded state and local preschools, and the approximate number of eligible children served;
  - Resources that are available in the community to address the needs of eligible children and their families; and,
  - Strengths of the community.
  - The findings of the Community Assessment are used to assist CSB in developing the following key program planning elements:
    - CSB's program philosophy, including its vision and mission;
    - Long-range and short-range program objectives;
    - The type of services and program options to be provided;
    - The recruitment areas of the program;
    - Identifying locations of centers and home-based programs;
    - Establishing the criteria for recruitment and selection.

The Community Assessment is presented annually to the Policy Council and Board of Supervisors and program staff at all levels.

### 2. Self-Assessment

- Once each program year, CSB conducts a joint Grantee and Delegate Agency self-assessment of the effectiveness and progress of our programs in meeting program goals and objectives and in implementing federal regulations. Self-assessment tools include resources from the OHS Monitoring Protocol and Classroom Assessment Scoring System (CLASS™). The modes of assessment in the protocols include: Observation, Interview, and Records Review.
- A training and overview of the self-assessment process is given prior to the designated week the self-assessment is conducted. The role of the Bureau Director and Delegate Director and/or their designees in the self-assessment process are as “advisor” to the team. The analyst responsible for the self-assessment is the Team Leader and may be supported by a consultant. Teams are comprised of grantee and delegate agency management and non-management staff, parents, community partners, and representatives of the Board of Supervisors. Teams are formed in November of each year.
- The self-assessment process concludes with the team leader and/or his designee(s) writing a cumulative and comprehensive report that addresses program strengths as well as potential non-compliances. If needed, a corrective action plan is developed to remediate areas of non-compliance. The final report of the self-assessment, including the certifications of corrective actions, is presented to the Policy Council, Local Policy Committee, Delegate Board, and Board of Supervisors for approval in March of each year. As soon as these approvals are secured, the final report is then forwarded to the ACF Program Specialist.
- The results of the self-assessment are used in the planning process, in developing and improving program services, and in formulating the program approach included in grant applications.

### **3. Strategic Plan**

With the support of the Employment and Human Services Director, CSB adopts the Program Goals and Objectives as the bureau’s five year Strategic Plan. The plan addresses needs and concerns that are identified through the community assessment, self-assessment, and ongoing monitoring results. They are also developed with input provided from parents through the Policy Council’s Program Services Subcommittee. The strategic plan is reviewed and updated semi-annually by the Senior Management Team. Annual updates are presented to the Policy Council and Board of Supervisors.

### **4. Bureau Planning Calendar**

- The purpose of the CSB Planning Calendar is to provide chronological guidance and a timeline for critical events such as: reviews, audits, reports, etc. that occurs within the fiscal year.
- The planning calendar ensures continuity within the programs as well as throughout the bureau. Included in the planning calendar are methods to ensure consultation and collaboration with the program’s governing body, policy groups and program staff. The

planning calendar is updated and submitted for approval annually by the Policy Council and the Board of Supervisors.

## 5. Management Planning Meetings

Planning is conducted on an on-going basis at varying levels throughout the bureau during planning meetings, staff summits, and management retreats. Additional information regarding management planning meetings is found under Part I of Section 1-Program Governance.

## PART III. Education & Child Development Program Services

### SUB PART I. Individualization in the Program

#### A. Description

Individualization is the process used to design a plan for each child that reflects their unique characteristics, strengths and needs.

Upon completion of the child's first sixty (60) days of enrollment, teachers will develop four (4) individual goals based on:

- Home visits
- Child's health and nutritional screenings and health histories
- Educational screenings: Ages and Stages Three (ASQ-3) and Ages and Stages Social Emotional Questionnaire (ASQ-SE)
- Desired Results Developmental Profile (DRDP 2015) Assessment
- Parent conferences
- Children's Individual Education Plans (IEP or IFSP)
- Observations of children and anecdotal notes

Teachers will create an individualization binder/folder with a section for each child to include copies of parent teacher conferences (CSB118A/B) and a copy of the child's IEP/IFSP, if applicable. Each child is assigned a letter code that is written in the top right corner of the lesson plan during their focus week. The front of the binder must include a key to identify each child's focus week and letter code.

#### B. First Parent Conference

The first parent conference is completed within the first ninety (90) days of enrollment. Teachers must use the Education Due Date Calculation Sheet (CSB107) to keep track of each child's conference due dates.

During this conference, the teacher and parents discuss the child's progress based on screenings, DRDP 2015 assessment, and parent observations. The teacher and parent develop the goals for the child's individual plan. The child's strengths, individualized goals and activities that will support the development of goals are listed on the conference form. Teachers will collaborate with parents to identify and record strategies for home that will assist the child to achieve their identified goals. Parent

and teacher must sign and date the form.

### C. Second Parent Conference

The second parent conference is completed within thirty(30) days of the third DRDP 2015. During this conference the parent and teacher review the child's progress on their goals set during the first conference and discuss parent observations and teacher observations.. Teachers will collaborate with parents to identify and record strategies for home that will assist the child to achieve their identified goals. Kindergarten readiness information may be shared at this time.

### D. The Infant-Toddler Individual Needs and Services Plan

The Individual Needs and Services Plan (CSB180) (INSP) is completed prior to the first day of attendance. The process includes an interview with a family member by a staff member. The form is updated quarterly and included in the plan is:

- The current feeding schedule and the amount and types of food provided including whether breast milk or formula and baby food is used.
- The meal patterns of the child, including new foods introduced, and food preferences.

The INSP tracking form should be used by teachers to know when the quarterly updates are due. Section D of the INSP is important and required to complete for children who are between the ages of 25 and 36 months. The areas are listed of how the program will ensure provide age-appropriate language development, large/small motor skills, and social emotional activities. Also, notes to ensure the continuity of care for the child should be documented.

### E. Lesson Plans

Lesson Plans are posted weekly. The lesson plan provides various developmentally appropriate activities and materials for the children to engage in to support their physical, social, and cognitive growth. The lesson plan includes activities that meet the children's individualized needs based on the results of their screenings and assessments. Per the individualization process described above, children's individual codes are noted on the lesson plan.

The lead teachers are responsible for:

- Planning and developing the weekly lesson plan with their classroom team.
- Submitting the lesson plan to the site supervisor every Thursday.
- Posting the weekly lesson plan by Monday morning.

The Site Supervisor is responsible for:

- Reviewing and approving the lesson plan.
- Signing off and dating the approved plan.
- Ensuring the lesson plans are posted in the classrooms by Monday morning.

### F. Developmental, Sensory, and Behavioral Screening

All newly enrolled children (including those with an IEP/IFSP) are screened by teaching staff in the areas of social emotional development using the ASQ-SE and cognitive development using the ASQ-3 within 45 days of enrollment. Teachers must use the Education Due Date Calculation Sheet (CSB107) to keep track of each child's screening due dates. Comprehensive Services staff screens all children in hearing, vision, and heights/weights within 45 days of class entry, and annually thereafter. Parents are informed about all screenings and their purposes in advance. The results from the screening are used to begin the individualization process for each child. Should the results indicate a concern, CSB will follow the outlined referral protocol. If a child does not qualify for referral services, CSB staff will support the child and family through outside services, if applicable, and will seek guidance from Mental Health or other qualified staff to ensure the concerns do not affect the child's school readiness. (For more information on screenings, please refer to Part II, Services for Children with Disabilities).

## G. Assessment

The Desired Results Developmental Profile Child Assessment (DRDP 2015) is the required assessment tool mandated by the California Department of Education and also includes the Head Start Outcome requirements. Teachers must use the Education Due Date Calculation Sheet (CSB107) to keep track of each child's assessment due dates.

The assessment of children is accomplished through on-going written observation of the child. Infants, toddlers and preschool children are assessed three times per year. Anecdotal records and work samples are kept for each child to show progress.

Assessment results are entered into CLOUDS within the required timelines. Results of the assessments are shared with parents during parent conferences, and are a basis for developing children's individual goals and plans and used for individualizing the lesson plans.

Child portfolios are used as evidence to support DRDP2015 rating accuracy and to comply with state requirements. Portfolios include, but are not limited to, child work samples, anecdotal notes, photographs, parent observations, and recordings/videos.

## H. Program Transitions

Parents are given the opportunity to participate in and be supported in the transition of their children when they move to new classrooms, programs or enter kindergarten. For families and children who move out of the community in which they are currently served, including homeless families and foster children, CSB staff will support the effective transition to other Early Head Start or Head Start programs. If Early Head Start or Head Start is not available, CSB staff will assist the family to identify another early childhood program that meets their needs.

### 1. Transition Policies and Procedures for Infants and Toddlers

While children are enrolled in Early Head Start, they change classrooms based on their age and developmental level. Transition to a new classroom begins two weeks before a child moves to a toddler or preschool classroom.

There are two types of transitions that happen; one takes place when a child moves to a new classroom based on their age and developmental level and the second takes place when a child transitions out of the Early Head Start program. Transition to a new classroom begins two weeks before a child moves to a toddler or preschool classroom. During this time, a transition plan is developed that may involve the child and family member visiting the new classroom.

Over the next days, the child gradually increases the amount of time spent in the new classroom. Initially, the primary caregiver plays an important part to help the child adjust to his/her new environment by assisting the child in their new classroom.

Whenever possible, CSB makes attempts to ensure a continuation of early childhood education services. Staff works in conjunction with other centers and programs to provide a quality and effective transition to preschool. The transition plan from the toddler program to preschool is mandated to begin six months prior to the transition. The CSB Transition form (CSB161) is completed by the parent/family member, child's caregiver and the site supervisor six months before the transition and updated quarterly.

The child may then be placed on the CSB wait list if an immediate transition to a Head Start classroom is not available. The Comprehensive Services staff notifies the family member if a space becomes available and a transition to a Head Start program will occur.

Three weeks prior to the transition, the child will begin visiting their preschool classroom accompanied by their caregiver teacher. The length of the visits and the number of visits will be determined by the child's comfort level and will be gradual in duration. A final home visit will close the child's Early Head Start file. When the child begins Head Start, they begin a specific orientation process (see section B; Curriculum Implementation; 1 Orientation).

## **2. Kindergarten Transition**

Kindergarten registration information is provided to families between January and March. Parents are given information on their local school district registration procedures.

Collaboration with the local school districts regarding kindergarten transition may include activities such as open houses, kindergarten fairs, field trips, school representatives at parent meetings, collaboration meetings with kindergarten teachers and other representatives, joint training and professional development opportunities for preschool and kindergarten teachers, and registration resources. Parents are also encouraged to visit kindergarten classrooms and to familiarize themselves and their child with the school facility. Current kindergarten children are also often invited into the classroom as a guest speaker to talk about their kindergarten experiences. Site staff assists parents with the kindergarten registration process, and if necessary, assist parents to obtain the necessary documents required for kindergarten entry.

Kindergarten transition meetings are conducted between April and June. At that time, resources for parents to assist their child in transitioning to kindergarten are provided, in addition to kindergarten school supplies for children.

The Creative Curriculum has a specific Getting Ready for Kindergarten Teaching Guide that our teachers must use for planning at the end of the year, specifically, the last few weeks of school, that

focuses on kindergarten readiness through literacy, math, arts and technology. Teachers will also use the Second Step Early Learning curriculum to support children throughout the school year and in particular for those children going to kindergarten, during the last few weeks of school. The last three lessons in Second Step specifically focus on transitions to kindergarten (Learning in Kindergarten, Riding the Kindergarten Bus, and Making New Friends in Kindergarten).

For the PD/PY classrooms that do not operate during the summer, CSB staff will collaborate with school districts to determine the availability of summer school programming for children who will be entering kindergarten and will work with parents and school districts to enroll children in such programs, if available.

### **3. Kindergarten transition planning for children with disabilities**

- Identify family concerns, priorities, resources that relate to the change, and parents' expectation(s) of kindergarten.
- Provide training to parents to become knowledgeable regarding the application procedure and their parental rights.
- Review placement options, parental rights as they relate to responsibilities within the school system, and steps they can take to help their child do well in school.
- Review child's progress and update records. Complete "Authorization to Release Information" (CSB139).
- Provide activities for parents to do at home to prepare their child for kindergarten.
- Inform parents of transition meetings, and allow them to decide what role they will play.
- Schedule an introduction for parents with their new contact, either in person or by phone.
- Encourage parents to arrange a visit to the prospective school before their children transfers.

## **SUBPART II. Curriculum (Education and Early Childhood Development)**

### **A. Child Development and Education Approach**

All CSB Centers implement The Creative Curriculum for Infants, Toddlers and The Creative Curriculum for Preschoolers. Goals for curriculum promote children's active involvement in their own learning. Children will have a learning environment and varied experiences appropriate to their age and stage of development that will help them grow physically, socially, linguistically, intellectually and emotionally. The education program is aligned with Head Start Performance Standards (45 CFR 1304), The Head Start Early Learning Outcomes Framework (HSELOF), The California Preschool/Infant-Toddler Learning Foundations, National Association for the Education of Young Children Developmentally Appropriate Practices, Program for Infants and Toddlers Caregivers (PITC) and Reggio Emilia Inspired Project Approach. The Program Services Committee of the Policy Council provides input into the program curriculum and approach to children's education.

#### **1. Educational Options**

- Center based: Preschool/infant toddler full-day and Preschool part-day program options.



- Full Inclusion programs: Children with disabilities are mainstreamed into center based classrooms in collaboration with the school districts.
- Preschool Special Day class: School district operates special day classes in collaboration with CSB.
- Home Based: Home base educators serve as facilitators of children’s learning in the child’s home environment. The program provides one home visit per week for a period of 1.5 hours and two group socialization activities per month.

## 2. CSB Educational Programs

The curriculum goals are based on the State Child Desired Results and Head Start Child Outcomes.

- Desired Result 1: Children are personally and socially competent
- Desired Result 2: Children are effective learners
- Desired Result 3: Children show physical and motor competence
- Desired Result 4: Children are safe and healthy
- Desired Result 5: Families support their child's learning and development
- Desired Result 6: Families achieve their goals

The curriculum is enhanced by the Project Approach. The Project Approach is a meaningful way to teach content built on children’s knowledge and interests. Projects support the development of a child’s knowledge, skills, and feelings.

In addition, the curriculum is supported by Second Step Social Emotional Skills for Early Learning program supports children’s growth and helps teachers guide children to learn, practice and apply skills for self-regulation and social- emotional competence.

## B. Curriculum Implementation

### 1. Orientation:

Child and family orientation is ongoing throughout the year. Orientation Steps are as follows:

- Phase In: The first day of school is called phase in and lasts a minimum of two hours. The goals for phase in are to welcome the child and family into the program and familiarize them with program philosophy and procedures.
- The teacher completes the Tour of the Classroom and Education, Health, and Nutrition sections of the Classroom Orientation Checklist form (CSB112).
- The Site Supervisor completes the Review of Program Policies and Procedures section of the Classroom Orientation Checklist form (CSB112).

### 2. Classrooms:

Preschool Classrooms are divided in clearly defined interest areas based on the Early Childhood Environmental Rating Scale and Creative Curriculum:

- Block, Art, Discovery (science), Dramatic Play, Toys and Games (manipulative and

math), Library, Writing, Sand and Water, Technology and a quiet/cozy area where children can play alone or with one classmate.

- There is a place where each child can keep personal belongings.
- Learning materials are logically organized, age appropriate, open ended, labeled and accessible to children.
- There are enough materials in each area for several children to work together.
- Materials in the classroom are intentionally and periodically changed using the Material Rotation form (CSB142).
- Classroom displays are current and reflect children’s work and activities.
- Classroom rules are generated by the children and posted. Rules are phrased in positive terms, for example instead of saying “no running”, say “walk”.
- Classroom helper charts are posted.
- The classroom is inviting to families with displays of family photographs, parent information boards, and some adult sized furniture.
- Environments reflect diversity by including visual materials and activities that reflect diversity in gender, family composition, culture, language and ethnicity.
- Rooms are designed to be attractive and comfortable.

Infant and toddler environments are set up using the Infant Toddler Environmental Rating Scale and Creative Curriculum. The classroom environment is guided by the infant/toddlers changing curiosities, considering the needs, interests, and developmental level as the caregiver continuously reads the cues of the infant/toddler, and includes:

- Block, Art (12 months and up), Discovery (science), Dramatic Play, Toys and Games (manipulative and math), Library, Sand and Water (18 months and up) and a quiet/cozy area where children can play alone or with one classmate.
- Gross and fine motor materials, sensory opportunities, books, and classroom displays that reflect family backgrounds and diversity.
- Materials are offered in logical groupings such as manipulatives, blocks, art, etc. to encourage independent exploration.
- Materials are rotated regularly as children’s development and interests change using the Material Rotation form (CSB142).

### 3. Classroom Transitions:

In infant, toddler, and preschool classrooms, teaching staff ensures that transitions are thoughtfully conducted for each child. Between daily events, transitions are implemented intentionally, smoothly, and naturally.

When activities during the day are predictable, it helps children begin to understand the concept of time. Anticipating what is coming next makes children feel they are in control of what is happening. The CSB approach to classroom transitions is:

- **Be proactive and be alert.** Have strategies to engage children who may be having difficulties with transitions.
- **Always transition children in small groups**, and ensure children are assigned to a small group at enrollment.

- **Plan ahead and make transitions fun!** Transitions should be engaging for children and can include finger plays, songs, and short activities to reduce wait time.
- **Prepare.** Prepare all teaching materials and small group activities ahead of time so they are ready for the day and easily accessible.
- **Talk with the children** and let them know when a transition is going to occur. Give children a signal 3-5 minutes before the transition.
- **Review transition safety with the children** at the beginning of the year and whenever needed.
- **Follow the protocols** outlined in the Transition Head Count Policy and CLOUDS In-Transition feature, which include a visual count.
- **Always visually sweep!** Before leaving the classroom or yard by physically walking the perimeter and looking around thoroughly.
- **Communicate** continuously with all team members. -State the number of children who are going with you as you transition.
- **CSB has zero tolerance for lack of visual supervision!** All designated caregivers are to be present, engaged, and calm during transitions.
- **All transitions that require children exiting or entering the classroom** must be conducted using the Classroom Transition Tracking Sheet form (CSB700).
  
- **Teacher placement is critical** as the children transition, with one staff at the front of the group and one in the back. When there is only one staff member present, his/her placement must be such that he/she may be able to see every child as they transition.
  
- **Whenever possible, caregiver groups should be maintained** throughout daily activities, including transitions. Transitions should always occur in small groups.

#### 4. English Language Learners:

Education for children who are learning English is enhanced when programs and families partner together. The learning environment includes usage of the child's first language. Promoting language understanding and use in this atmosphere encourages easy communication among children and between children and adults. The following examples help promote language understanding:

- Give children ample time to talk to each other and ask questions in the language of their choice. Continued use and development of the child's home language will benefit a child as he or she acquires English.
- Encourage free discussions, shared experiences and conversation between children and adults.
- Provide games, songs, stories, or poems that offer new and interesting vocabulary.
- Encourage children to tell and listen to stories. Interest areas offer opportunities for teachers to teach content as children explore materials.

#### 5. The Project Approach:

The educational program is enhanced by the project approach to learning and is expected to be

implemented in every preschool classroom at least twice per program year. Projects are in-depth investigations on a topic based on children’s interests. Projects:

- Must be relevant to children’s experiences and interests.
- Topics of study must be authentic so that children can manipulate and explore real objects.
- Family members are a part of the implementation of projects.
- Project components include:
  - Selecting a topic based on the children’s interests
  - Teaching team creates a “web” of interrelated ideas and activities: ideas may incorporate literacy, math, science, social studies, the arts and technology into the study
  - An opening event
  - Project investigations
  - Field trips and visiting experts
  - Documentation of projects through photographs, children’s written feedback, drawings, etc.
  - A closing event

Creative Curriculum provides predesigned in-depth Studies on a variety of topics. These Studies do not take place of the required twice per year Project Approach, but can be used to support projects. CSB does require two Studies to be implemented each year, The Beginning of the Year and Getting Ready for Kindergarten, in addition to the two projects.

#### **6. Program for Infants and Toddlers:**

The CSB infant and toddler program is enhanced by the Program for Infant Toddler Care (PITC) philosophy, which is based on the belief that infants and toddlers come to the program with their own interests, needs, and temperaments. PITC emphasizes program components that focus on responsive caregiving practices based on supporting the child.

PITC Program components:

- Care in small groups; each child is assigned to one special infant/toddler care teacher who is responsible for that child’s care.
- Cultural Continuity; because of the important role of culture in a child’s development, infant and toddler care teachers heighten their understanding of culture in the lives of children, develop cultural competencies, acknowledge and respect cultural differences, and learn to be open and responsive to families.
- Individualized care; this follows children’s unique temperaments and promotes child well-being and a healthy sense of self. This approach supports each child’s growing ability to self-regulate and to function independently in personal and social contexts. It also ensures that teachers read children’s cues throughout the program day.
- Inclusion of children with special needs; this makes the benefits of high quality care available to all infants and toddlers through appropriate accommodation support in order for the child to have full active program participation.

#### **7. Supporting Child and Family Culture and Diversity:**

- Families are asked to share their culture and traditions.
- Food served at mealtimes is culturally inclusive.
- Environments and materials include diverse materials such as pictures, books and photographs. Dramatic play props, puzzles, music, planned activities and books reflect diversity in gender, culture, language and ethnicity.

#### **8. Teacher/Child Interactions:**

Positive teacher child interactions build trusting, nurturing bonds between teaching staff and children which supports the children's developing a love of learning.

Teaching Staff:

- Welcome children and families into the program daily.
- Foster positive social behaviors such as cooperation, conflict resolution, and turn taking by using modeling, coaching and encouragement.
- Speak to the children at their eye level and move to where a child is to speak with them directly.
- Teacher's voices are warm and calm.
- Engage children in conversations throughout the day. Encouraging verbal expression enhances children's self-esteem and cognitive growth.
- Comfort children who are crying and validate their feelings.
- Engage in activities with the children on the floor by sitting on the floor with them as much as possible.

#### **9. Caregiver Groups**

Upon entry, each preschool child is assigned to a caregiver group of six to eight children based on the developmental and individual needs of the child and the classroom. The teaching staff assigned to the caregiver group plans and implements individual activities for their group during small group time.

Upon entry infants are assigned to a caregiver group of three children per caregiver. Upon entry, toddlers are assigned to a caregiver group of four children per caregiver. Infants and toddlers remain with the same caregiver whenever possible throughout their enrollment in the program to ensure continuity of care.

Caregiver groups can be named after animals, shapes, etc.

#### **Caregiver Groups during Transitions:**

- It is CSB's policy to transition children in small groups including; to and from outside time, small group, large group, and bathroom routines.
- Caregiver groups are maintained throughout the daily activities when appropriate.

- Teaching staff work closely with their caregiving group at meal times, small group, hand washing, etc. For children, this reduces confusion, distraction and promotes attachment with the primary caregiver.

## **10. Child Health and Safety**

Teaching staff integrates health and safety lessons and activities into the lesson plan. Health activities may include: oral health, pedestrian safety, good hygiene practices, and emergency safety including: fire, earthquake, shelter-in-place and school safety.

Children wash hands upon entering school, before eating, after wiping noses, after touching animals, before and after messy play, including sand/water play and Play-Doh, contaminated objects, upon returning from the play yard and after toileting.

Staff inspects classroom and outside areas daily to ensure all facilities, furniture, materials and structures are safe and free from hazards. The 7 Health and Safety Daily Classroom Checks in 7 Minutes form (CSB777) is completed daily in all indoor areas used by children, prior to children using the space. The Daily Playground Checklist (CSB136) is completed daily to document inspection of outdoor areas accessible to children.

Teachers perform a daily health check of each child upon their arrival to school. Refer to section 2, IV. Sub Part III, A, Daily Health Inspection for further guidance.

For infants and toddlers, this practice is done using the Daily Communication Form where families and staff document about each child at the beginning and end of the day. The daily health check is also conducted and documented on this form.

Teaching staff conducts head counts hourly in CLOUDS and during transitions in CLOUDS and using CSB700 in accordance with the Protocol for Hourly and Transition Head Count and Tracking as described in CSB700A.

Teaching staff checks that door alarms are set and all gates are secured at all times.

Children are supervised at all times, and always supervised while toileting.

## **11. Nutrition**

Children participate in learning activities planned to affect the selections and enjoyment of a wide variety of nutritious foods.

Nutrition activities may include: field trips, planting gardens, reading stories about food and nutrition, and sampling a wide variety of foods.

Children are involved in simple cooking projects. Teaching staff serve meals family-style at the centers. Children participate in setting the tables, serving themselves, and pouring their own beverages.

## **12. Language / Literacy Curriculum Enhancements**

- **Learning through Literature Curriculum Enhancement:** Each month teaching staff

implements a picture story book to read that contains a written guidance of extension activities and open ended questions to ask.

- **Raising A Reader:** Tote bags with age appropriate books are taken home weekly by each child. Parents are encouraged to read to children daily and discuss the stories. Books are multicultural and include children's stories in Spanish.
- **Tandem:** Similar to Raising a Reader, bags with age appropriate books are taken home weekly by each child. Parents are encouraged to read to children daily and discuss the stories. Books are multicultural and include children's stories in Spanish.
- **Books at Naptime:** Each child may choose a book to read to themselves on their mat.

### **13. Pedestrian Safety**

Children and parents are taught the importance of pedestrian safety within the first 30 days of school. This includes educational videos and materials on pedestrian safety for both children and parents, various classroom activities and educating parents at parent meetings.

### **14. Media in the Classroom**

Classrooms are equipped with Surfaces and installed with ABCmouse. Other media are used in the classroom when intentionally connected to a project topic or curriculum enhancement. Other media must be approved by the site supervisor before they are viewed in the classroom and must be documented on the lesson plan

### **15. Lesson Plans**

The Infant, Toddler, and Preschool weekly lesson plans are designed to ensure that all classrooms provide developmentally appropriate activities consistent with Head Start Performance Standards, Creative Curriculum, and Second Step (preschool). The lesson plan communicates to staff and parents the activities for each day of the week. The preschool lesson plan is enhanced by the project approach. The infant and toddler Plans and Possibilities include activities that support each child's individual goals. Plans for these age groups are flexible, are based on children's interests, and is a guide for the day rather than a strict implementation plan. The teacher submits a completed lesson plan form to the Site Supervisor weekly for approval and is posted by Monday morning. Lesson plans (CSB105A, B, and C) are completed at the center by the teaching staff, with input from parents.

### **16. Required Elements of the Children's Daily Schedule**

The classroom daily schedule provides a balance of structure and flexibility. The schedule establishes sequences for the implementation of activities and possibilities in the classroom. It includes a variety of play activities and more and less active times of the day.

- **Greeting/ Health Check-** each child and family member is warmly greeted when they enter the program daily. A brief health check is conducted by the teaching staff that includes touching of the child's skin and looking into their eyes. Staff may ask a child how they are feeling. Parents must remain during the health check and may be asked questions about their child.
- **Work Time/Child Initiated Activities;** Children have access to all interest areas in the

classroom. Project-based and center activities are offered as additional choices for the children in the preschool classrooms. Teachers add materials for children's creative activities during this time. Teachers work with children and ask open-ended questions to stimulate and enhance child learning. Infant and toddler classrooms may offer special activities in addition to the materials that children may interact with independently

- Small and Large Group Time/Teacher Directed Activities; Small group is a planned activity implemented in caregiver groups. Small group time activities may be conducted anywhere in the classroom or outside. Large group time is a planned time of day and can include music, movement, Second Step (preschool), conversations and discussions. Every child is offered the opportunity to participate but no child should be forced to attend group times. Similar times of the day are planned for infants and toddlers however; these must be based on the children's cues and may be modified in the moment and/or as needed.
- Outdoor Play/Gross Motor - Children are able to use their large muscles and develop socialization skills; activities include tricycles, wagons, balls, games, water tables, obstacle courses, music, art, and dramatic play activities (30 minutes each morning and each afternoon). Outdoor play must still occur in the winter months when the temperature is cooler. If weather, such as heavy rain, does not permit outdoor play, a gross motor activity must be offered indoors.
- Meal Times - Breakfast, lunch and a snack times are provided for children depending on their program model. Infants are fed on demand and toddlers are fed on an individualized schedule. Mealtimes are learning times when teachers assist children with setting the tables, serving their own food and engaging them in conversation. Breakfast and lunch times are approximately thirty minutes and snack time is fifteen minutes.
- Rest Time – Full day classrooms are required to schedule a one and a half to two-hour rest period for preschool and toddler children. Depending on the child's needs toddlers rest and nap on demand. Infants rest and nap on demand.
  - No child is to be restrained in their crib, on their cot or on their mat at any time.
  - Children are encouraged to nap but not forced. Alternate quiet learning activities are provided for non-nappers.
  - All children must be visually supervised at all times (CCL Regs: 101229, p. 137)
- Preschool classrooms: All children must be given an opportunity to rest without distraction or disturbance from other activities or children. Teachers encourage children to rest by offering them a book, engaging them in soft conversation and gently rubbing their backs. "Each center shall provide a variety of daily activities designed to meet the needs of children in care including but not limited to: (2) rest and relaxation. (b) All children shall be given an opportunity to nap or rest without distraction or disturbance from other activities at the center," CCL reg.101230 (a) p.138. Once the children are resting, one staff person may supervise the "napping" children, "provided that the remaining qualified teachers necessary to meet the overall ratio ... are immediately available at the center," CCL Regs:



101230 (c), p. 139.

- Infant and toddler classrooms: Infants are provided an “on demand” schedule for their routines, including napping. Every infant and toddler is required to have a crib, cot, or mat. Once the infants or toddlers are sleeping, one staff person may supervise the sleeping infants/toddlers provided the remaining staff necessary to meet the ratio are immediately available at the center (CCL regulation: 101416.5(d) p.158) No infant/toddler is to be restrained on their crib, cot or mat at any time.
- Rest time napping equipment placement and sanitation guidance for preschool classroom and Infant/toddler classrooms:
  - The napping space for toddlers and preschoolers must be equipped with a mat, or cot, including a sheet and blanket. Each infant is provided a crib. The crib mattress for infants are cleaned and sanitized regularly or as needed. The toddler and preschool cot or mat is cleaned and sanitized regularly or as needed.
  - Preschool bedding is individually stored so that one child’s used bedding does not come in contact with another’s, and is laundered weekly.
  - Napping equipment is arranged to provide access to children and spaced to prevent the spread of germs. Cribs must be placed three feet apart. Cots are placed eighteen inches apart and children are placed so that each child is alternating head-to-feet.
  - Blankets of any type are not allowed in infant cribs because of the risk of suffocation.

## **17. Parent Involvement in providing input into the Curriculum**

Parents are partners in the processes of planning and implementing curriculum, and are encouraged to participate in the program in a variety of ways:

### **i. Home Visits**

All parents must be given the opportunity to participate in two home visits a year.

- Initial Home Visit: Within the first 45 days of enrollment, or if feasible, before the program year begins, teachers conduct a home visit. Parents begin to develop a positive relationship with their child’s teacher through this initial communication. The home visit gathers information about parent’s observations of their children and the goals they have for them. The initial home visit gives the child an opportunity to meet the teacher in a familiar setting and may be used to plan individual goals for each child. Staff should make every effort to conduct the home visit at the child’s house. The ASQ-SE is conducted at the initial home visit with the family. If parents request that teachers meet them in an alternate location or if they prefer not to have staff come to their homes, the other location will be considered home visit. See Initial Home Visit form (CSB 170 and CSB170IT). If the parent chooses not to have the visit in the home, the reason for that decision must be stated on the home visit form.
- Each new family will be given a CSB Child Development Brochure, a toothbrush and

guidance for tooth brushing and hand washing. The teacher will also assist the parent to complete a social/emotional screening. Teaching staff will enter the parent and print out the results and add it to the child's file.

- Returning Child Home Visit: For children who are enrolled for a second year in the program, the returning child home visit form should be completed (CSB106). As with the initial home visit every effort should be made to conduct the home visit in the child's home. Teaching staff will distribute a toothbrush and hand washing/ tooth brushing guidance.
- Second Home Visit: During the second home visit, the teacher and parent review the child's progress and assessment results. For preschool they may discuss kindergarten readiness. For all children, they may plan activities for the parent and child to do at home and address questions or concerns the parent has.

ii. **Parent Conferences**

All parents must be given the opportunity to participate in two conferences a year. Conferences are not home visits.

- First Parent/Teacher Conference – Within ninety (90) days of the child's first day of school, each parent will be given the opportunity to participate in a Parent/Teacher Conference. During this conference, the teacher and parent(s) will discuss the child's progress (based on results of the screening, assessments, observations, and child's work), and will develop an Individual Plan (IP). If the child has an IEP, the IEP goals must also be included in the plan. DRDP 2015 measure numbers must be reflected next to the written goals. (CSB118A.)
- Second Parent - Teacher Conference – A second Parent -Teacher Conference will be scheduled thirty (30) days after the third DRDP to review the child's progress/goals that were set during the first Parent-Teacher Conference.
- Parents are asked to give input into the weekly lesson plan by reviewing the lesson plan draft and offering input on all aspects of the plan including, but not limited to, small and large group activities, songs, and stories. Parents then sign the lesson plan to show their input and feedback.

### C. Other Elements of Parent Involvement

- Parents have the opportunity to participate in planning and implementation of field trips.
- Families are encouraged to share their culture and traditions by volunteering in the classroom.
- Parents are provided with individualized home activities by the child's teacher to reinforce child's learning objectives at home.
- A variety of family literacy programs are offered to support parents in helping their children develop a love and appreciation of books. These include Raising a Reader or Tandem.

### D. Home-Based Option

CSB's Home-based program option provides opportunities for parents to enhance the parent-child relationship promote the education and development of their children, enrich the home environment to encourage their children's learning, identify and refer children with special healthcare needs, developmental delays, or disabilities. The home educators serve as facilitators, educators, and a support system for parents and families. They act as vital links to the local community and resources. All services provided to the home-visited family are the same quality as those given in centers.

The Home-based Option uses the center-based sites for socialization and plans activities with the parents to use the home as their primary learning environment.

Head Start's Home-based Option services include:

- Providing one home visit per week per family (a minimum of 32 home visits per year), lasting for a minimum of 1.5 hours each.
- Providing a minimum of two group socialization activities per month for each child (a minimum of 16 group socialization activities each year).
- Nutrition objectives are accomplished through both home visits and group socialization activities. The emphasis is on nutrition education, helping parents learn to make the best use of existing resources. Parents receive information and guidance on menu planning, consumer education, and money management.

The program maintains an average of 10 to 12 families per Home Educator with a maximum of 12 families for any individual Home Educator. Services include:

- One home visit per week for each child and provider lasting for a minimum of 1.5 hours each
- Two group socializations activities per month for each child. During socialization, activities and training are planned for parents and providers to increase their knowledge about child development issues.
- Monthly parent meetings are planned and offered at socialization. Parenting classes, support groups, and trainings are scheduled through the year.
- All services provided to the home-visited providers are the same quality as those given in centers. The only difference is the home setting is used as the learning environment, and the provider is the educator.

## **E. Classroom Assignments**

Children are assigned to classrooms and teachers in accordance with their needs, available space, and other relevant variables. Each classroom must have a roster listing all enrolled children. The Site Supervisor notifies the teachers of new enrollees.

Copies of class rosters are continuously available on CSB CLOUDS System and are kept current as children enroll or leave the program.

Classroom rosters do not list more than twenty children on any given day, per federal enrollment regulations except if a waiver has been granted. State Preschool not receiving HS funding may enroll 24 children. CSB centers maintain a minimum class size of at least 95% and a maximum of twenty children, and must never exceed the licensing capacity of the classroom.

## **F. Adult-to-Child Ratio**

## 1. Ratio Requirements

CSB's part day Head Start program is governed by California Community Care Licensing Title 22 Regulations which require a 1:12 ratio. However, Head Start regulations require that the maximum class size is 20 (unless a waiver is granted), so the adult-to child ratio in these classrooms is 1:10.

CSB's California Department of Education programs, including those combined with other funding such as Head Start and Early Head Start is governed by California Community Care Licensing Title V Regulations which require the following ratios: For children ages 3-5, 1:8; for toddlers, 1:4; for infants 1:3. For preschool classrooms, Title V regulations allow a classroom to be out of ratio for up to 120 minutes per day. These 120 minutes allow for rest time in early morning or late afternoon and do not apply during the core instructional time of day. During those times, children must be supervised according to the Title XXII regulation of State Licensing at 1 teacher per 12 children.

Children under three years of age may not be in groups with more than eight children. Each full-day classroom is staffed with a qualified Teacher and 2 Associate Teachers. If this is not possible, an Associate Teacher may be substituted for a Teacher and a Teacher Assistant Trainee for an Associate. Each part-day classroom is staffed with two Teachers and a Teacher Assistant Trainee.

The EHS Infant and toddler classrooms have the following ratios: Infants (birth – 18 months) is one to three (1:3) and toddlers (18-36 months) is one to four (1:4). Maximum group size for infants is six at all times. Maximum group size for toddlers is 8 at all times.

## 2. Supervision

All staff inside the classroom and outside in the yard are responsible to ensure that all children are visible at all times and that they are being supervised at every moment. Teaching staff supervise infants and toddlers/twos by sight and sound at all times.

Teaching staff, including substitutes and other CSB staff serving as a supervising adult for ratio purposes must sign into the classroom via the CLOUDS Wallpad or tablet. The CLOUDS Staff Management Module is utilized for program oversight and planning, including monitoring to ensure compliance with ratio requirements at all times. For these purposes, staff must also transition in and out of classrooms to account for child to teacher ratio, location of the staff person within the center, and on-duty status, including but not limited to transitions to the playground, another classroom or on break/off duty.

- i. To sign-in/ sign-out of a classroom on CLOUDS:
  - Select the "Staff" button on the Wallpad
  - Select the box with the name of the staff member being signed in or out (staff not already showing on the Wallpad may select the green box and enter their employee ID# to place themselves into the classroom)
  - Select the "Sign-In" or "Sign-Out" button on the pop-up
- ii. To transition on CLOUDS:

- Select the “Staff” button on the Wallpad
- Select the box with the name of the staff member being transitioned
- Select the “In-Transition” button on the pop-up
- If transitioning to another classroom, select the “Staff In-Transition/ Substitute” box on the wallpad
- Select the “In-Transition” button, then find and select the box with the name of the transitioning staff
- Select “Yes” in pop-up

## G. Sign-In and Out Procedures

### 1. Signing-In:

Everyone must sign in at a center: visitors and guests. Upon arrival, every child must be signed in by a parent, friend or relative over 14 years of age, denoted on the emergency contact list. The full signature is required, along with the time of arrival. If a child arrives at the center unaccompanied, teaching staff must bring that child into the center, and contact the parent (and State Licensing) immediately so they may return and properly sign in the child. Failure to sign children in properly may require a referral to County Child Protective Services.

For our part-day sessions, if a parent and his/her child arrive before the start of session or stay after the closing of the session, the teaching staff will remind them that the child is the parent’s responsibility during that time.

### 2. Signing-Out Procedures:

The parent must always sign a child out at the end of the day.

Children who leave and return to the center during the day must be signed out and in by an authorized adult, e.g. a child leaving for a doctor’s visit.

Adults who arrive at the center to pick up a child must be listed on the Children's Center File Emergency Card. Picture identification must be provided before child is released. It is the teacher's responsibility to keep emergency numbers current. At least two people must be listed who can pick up the child in an emergency.

If a person picking up the child is not on the emergency form, written preauthorization from the parents is required before CSB staff will release the child from the center. Children will not be permitted to leave the center unless accompanied by a preauthorized adult. Parents may not give verbal authorization for pick-up of children.

### 3. Child Release Policy:

The safety of the children is the priority for all CSB staff; therefore, the following policy must be enforced at all times:

- All parents are required to complete emergency forms during the enrollment process. Emergency forms with the names and telephone numbers of persons authorized to pick up the child will be kept in the child’s file. Emergency forms must be updated at

- least every 12 months or anytime information changes.
- Photo identification will be required of all newly authorized individuals or individuals not recognized by staff prior to release of the child. Under no circumstances will a child be released to an unauthorized person.
- If CSB personnel are not certain the pick-up person is who he/she claims to be, the child will not be released.
- Staff will not release children if the person picking up the child smells of alcohol or if staff has reason to believe the person is under the influence of alcohol or other foreign substance.
- Staff will not release children to the person picking up the child if there is a court ordered restraining order on file against the person.
- Children will not be forced to leave the center with someone they are not familiar with.

#### **4. Sign-Out Disputes Due to Child Custody Issues:**

If a parent requests that the other parent not be allowed to remove a child from the center, Site Supervisor or Head Teacher must request a copy of the court order, and place it in the child's file in the locked cabinet.

The parent must be informed that CSB is not a law enforcement agency and cannot undertake that role. (A parent cannot be denied access to his/her child unless there is a Court Order.)

If a dispute over custody should occur in the classroom, the teaching staff will deal with the family calmly. The staff will ask the person if they would like to talk with a Supervisor. If it seems likely that the parent may become violent, the teacher may release the child, and inform the parent that they (teacher) must call the police as soon as the likelihood of violence becomes apparent. Should the parent leave with the child prior to the arrival of the police, the teaching team must be prepared to provide a description of the person, the car, and the license plate number. The teacher must call her/his Site Supervisor to report and document the incident. Such unusual incidents must be reported to an Assistant Director and to Community Care Licensing using the standard procedure.

#### **5. Adults Signing Their Child In or Out While Under the Influence of Alcohol or Drugs:**

Any parent or other person who is authorized to pick up an enrolled child and appears to be under the influence of drugs or alcohol, or in an impaired physical condition which may prevent him/her from assuring the child's welfare, will not be allowed to take the child. In the event that this occurs, staff must use their best judgement in determining if the behavior presents a risk to the child. Staff may also seek a second opinion from another staff or site supervisor to ensure their assessment of impairment is accurate. Staff will let the parent or other person picking up know that the child cannot be released, but another authorized person from the child's emergency card can be called. Staff can try to keep the parent at the site by discussing the child's day or any other broad topic. At any point, if necessary, staff may call 911 or the local police if they feel additional support is needed. Should the parent/other person continue to insist leaving with the child, and staff or children are physically threatened, allow the person to take the child. Should this happen. Staff must get the license number of the vehicle and call the police immediately. Teaching staff must:

- Call County Child Protective Services and file a child abuse report

- Make an unusual incident report to Community Care Licensing  
Inform their AD of the situation/concern

If the police arrive at the center while the adult is still present, it is their responsibility to determine what further action should be taken. Only a police officer can officially determine if an adult is intoxicated or in an impaired physical condition.

#### **6. Late Sign-Out Procedures:**

A parent is considered to be late when he/she has not picked up their child by the agreed upon time. Staff should not call parents to pick up their children before these times. (CSB132) When a parent is late, the teaching staff will implement the following procedure:

- First Time - The staff will verbally inform the parent of the importance of picking up their child on time. This must be documented on the child's folder at the center.
- Second Time - When the child is picked up, the staff will give a late child notice to the parent. A copy of this notice will be kept in the child's file at the center.
- Third Time - The staff will call the Site Supervisor. The Site Supervisor will inform the parent that if this occurs again the child will be suspended from the center and placed on the waiting list. The Site Supervisor will give a "Late Child" letter to the parent. A copy of this letter will be placed in the child's folder at the center. (CSB132.)
- Fourth Time - The staff will call the Site Supervisor, who will inform the family that their child will be placed on the waiting list. If the family receives collaborative funding from the CA Department of Education, a formal Notice of Action will be given terminating the state funding after the 14-day grace period for appeal. The Site Supervisor will notify the Assistant Director and the Comprehensive Services Assistant Managers of the change in that child's status.

Closing Time - If a child has not been picked up by closing, and no one can be reached to pick up the child, the Site Supervisor will determine the plan of action (which may include calling Child Protective Services). CSB staff must never transport children from the center via vehicle or on foot.

#### **7. Full-Day Program Sign In/Out Procedures:**

The number of hours for each child enrolled in a full-day program is based upon their Contracted Hours Agreement, completed with the staff responsible for enrollment at that site. All full-day children must be signed in according to their contract hours. Each parent will have an individual sign-out time based on their unique needs for full-day services and Contract Agreement. The same procedures for late pickup are to be followed although "late" times will vary according to the parent's contract hours. Parent(s) may request a change in hours through "Request for Change of Contract Hours" form. (CSB-607)

## **H. General Classroom Celebration Policy**

### **1. Description:**

The Community Services Bureau avoids endorsing commercialism surrounding the holidays. The focus is about learning and celebrating diversity. The following guidelines are followed when planning activities with staff and parents:

- Holidays are not a major part of the curriculum. They are integrated within the total curriculum. No more than a few days and few activities are dedicated to any holiday.
- Holidays are not a theme and the whole room is not to be decorated reflecting a holiday.
- Learning about holidays broadens children's awareness of their own, and other, cultural experiences. Activities must be thoughtfully planned and implemented for inclusion of all children and families.
- Every group represented in the classroom (children and staff) is to be honored.
- Teachers must not assume that everyone from the same ethnic group celebrates holidays in the same way. Teachers check with the families to ensure that activities are indeed reflective of the cultures represented in the classroom.
- Teachers must plan strategies for working with children whose family beliefs do not permit participation in holiday celebrations. Their parents are to be included in planning a satisfactory alternative for these children in the classroom.

### **2. Children's Birthdays:**

Children's birthdays are very important and birthday celebrations are as unique as each child. However, the classroom's daily routine should not be changed to accommodate birthday celebrations. Because children learn by example, and to reinforce the nutrition education in the classroom, the following ideas are suggested:

- Giving and/or reading a book to the child and classmates
- Bringing educational toys to share
- Bringing a baby book or other symbolic item, or a special family story to share
- Lead a game
- Decorating the classroom
- Leading a nutritious class project (any food provided cannot be served in place of regular food service)

### **3. Inappropriate Activities in the Classroom:**

- Staged performances, plays, and ceremonies where children have memorized vocal parts or if rehearsals are required
- Lectures, where children have to sit and listen for a long period of time
- Commercial displays
- Adult-directed activities that focus on a product rather than a process (i.e., patterned art / work)
- Combined classrooms with large groups of adults and children
- Graduation ceremonies with caps and gowns

## **I. Field Trip Policy**



### 1. Procedures:

Field trips complement the classroom educational experience, current curricula, and must be developmentally appropriate. Field trips encourage hands-on exploration and experimentation. Field trips permit the child to learn about his/her world (school, neighborhood, and community). Bus or walking field trips may not be taken to amusement/theme parks or have large bodies of water as the main component of the field trip event. Field trips to water parks or swimming pools are prohibited. Field trips where tide pools are observed must have prior approval by an AD.

- Site supervisors must inform Nutrition office one week prior to date of a field trip using the Field Trip Form (CSB115). All field trip lunches will consist of sun butter sandwiches, string cheese, fruit, vegetable, and milk.
- Parent volunteers are encouraged to plan and participate in field trips. Only children enrolled in the classroom taking the field trip may participate. CSB will not provide parent/family transportation, with the exception of the exception of the previously determined 2-3 parent volunteers/chaperones. Parent volunteers must adhere to the immunization requirements.
- Parents may drive their own child to a field trip after signing their child out of school. Parents may not drive other students or parents on a field trip. Upon arrival of the field trip, parents must sign their child in using a paper copy if tablets are not available. Should parents chose to leave early or leave at any time with their child, parents must sign their child out
- Field trips are approved in advance by the Site Supervisor and AD are documented in the classroom lesson plan. Teaching staff notifies the Site Supervisor or designee when leaving/returning from the trip.
- Parental permission slips are required for all field trips (CSB114). Transportation is provided for staff and children.

In general, travel time for field trips should be no more than 60 minutes in length, round trip, and allow for heavy traffic conditions when necessary. Additional travel time may be accommodated with prior AD approval. Walking field trips are encouraged, with the destination within a half- mile radius of the center.

- A field trip should be completed within four hours, including lunch and transportation.
- Full-day programs require a two hour nap/rest period. A field trip should not interfere with the regular naptime schedule.
- Requests for additional time for field trips may be submitted to the Assistant Director for approval.

AM and PM classes do not combine or change program hours to go on a trip. On bus field trips, multiple classrooms may share buses as capacity allows, however, children must be separated into smaller

caregiver groups upon field trip arrival and while boarding and exiting the bus. Adult-to-child ratio on all field trips is a minimum of one adult for every four children (1:4). This ratio may be adjusted lower (1:3 or 1:2) at the discretion of the teacher or Site Supervisor. Staff (and volunteers) must have assigned groups of children for whom they are responsible at all times. Each group must stay together, within the teacher's area of vision/supervision. Teachers are responsible for ensuring that each adult volunteer properly supervises his/her assigned group of children on the field trip. Documented headcounts on field trips will be taken at the following times:

- Upon leaving the center
- On the bus or van
- Upon arrival at the destination
- At random times during the field trip
- When boarding the bus or van for the return to the center
- After return to the center
- Use paper copy for parents to sign-in and out if tablets are not available.

Emergency information for each child, three blank accident forms, a cell phone, and a First Aid Kit must be taken on walking or driving trips, including bus field trips (CSB-113-Field Trip Information and CSB-1015-Vehicle Use Request Form)

- During field trips, each child must wear a tag at all times that only identifies the name of the center and the center's telephone number on the front. Child's name may be written on the back of the tag, but never on the front.
- Field trip leaders must keep to their schedule, or call the center if there are any changes.
- If there are insufficient adults, inclement weather or any circumstance that would make it less than an optimal experience, the trip must be cancelled. A well-planned field trip taken under adverse conditions or circumstances may become a danger.

## **2. Planning Protocols:**

When planning a field trip or socialization, the following must be completed:

- Establish educational goals and objectives for the planned trip
- Teacher, or their representative, is to visit the destination to check travel time and accommodations, and to ensure the safety of the children

The field trip planning form (CSB115) must be completed and submitted by the teacher and approved by the Site Supervisor and AD at least one month prior the field trip. If planning the use of a bus for the field trip, CSB115 must be given to the AD clerk immediately to schedule a bus at least one month in advance.

- If applicable, the request for change of menu and purchase requisition must be completed and submitted one month prior the field trip
- Parents are notified at least two weeks in advance of the upcoming trip, at which time they are encouraged to volunteer for the trip
- Children are prepared for the trip at least one week in advance through in-class

- discussions of field trip safety
- When transportation is provided at least one trained bus monitor is aboard each vehicle at all times

The bus monitor training will include:

- Child boarding-and-exiting procedures
- Use of restraint systems
  - Bus: Properly fastened seat belts per the waiver for transportation services
  - Van: Properly installed car seats
- Required paperwork
- Emergency response and evacuation procedures
- Use of special equipment
- Child pick-up and release procedures
- Pre- and post-trip vehicles checks

In Case of Minor Accident at Site or on Field Trip

- A designated staff member with a valid First-Aid Certificate assesses the situation, and renders first aid if necessary.
- If a minor accident occurs on a field trip, the teacher of an injured child must notify the child's parents on return to the center. (As noted above, the emergency contact list must be on hand.
- The Injury/Incident Report form (CSB245) " form is completed, signed, and dated
- The teacher retains one copy for the center and gives one copy to the parents.
- In Case of Major Accident at Site or on Field Trip  
The teacher calls paramedics immediately. Classroom staff assesses the situation, and renders first aid as indicated for life-saving measures.  
Injured children are taken to the nearest emergency facility and the teacher or Site Supervisor accompanies the child.  
The teacher of an injured child must notify the child's parent(s) immediately. (The emergency contact list must be on hand)  
The teacher must immediately notify the Site Supervisor, who will notify the Assistant Director and/or the Bureau Director or designee.
- Licensing must be notified by telephone (with a follow-up of the "Unusual Incident/Injury" report) as soon as possible.
- The parent may accompany the child in the emergency vehicle.
- If the parent is not at that location, the child's teacher accompanies the child in the emergency vehicle.
- If necessary, CSB staff will provide transportation for the parent to/from the emergency facility.
- The "Accident/Incident Report" form (See Form CSB208) is completed, signed, and dated by the staff person involved in the situation.

- An insurance form is also completed, signed, and dated.
- The teacher retains one copy of the “Accident/Incident Report” and insurance form for the center, and submits copies of the reports (within 24 hours) to the Site Supervisor.
- The Site Supervisor submits copies of these reports to the Assistant Director and/or the Bureau Director.
- The CDE must be notified by the Bureau Director if the client is in a program funded by the state.

## **PART IV. HEALTH PROGRAM SERVICES**

### **SUBPART I. Prevention and Early Intervention**

#### **A. Determining Child Health Status**

Community Services Bureau establishes and maintains individual, comprehensive files for children and families. Health records, developmental progress portfolios, and files, including Administrative, Delegate Agency, and Grantee-Operated Program and Subcontractor’s filing systems, are kept confidential with use of the Access to File form (CSB900) and following the approved Confidentiality Policy. All staff with access to health information is trained on HIPAA (Health Information Portability Accountability Act) requirements.

CSB obtains parental consent prior to the administration of health or developmental procedures through the program or by contract or agreement and maintains documentation of parental refusal of authorization for health services through use of the Parental Refusal of Health Services Form (CSB298).

CSB staff collaborates with parents to address the health and well-being of each child in a linguistically and culturally appropriate manner, communicating the child’s health needs and developmental concerns.

##### **1. Physical Examinations - Well Child Check (CSB207)**

Each parent is provided with a Report of Health Examination - Well Child Check (CSB207) for use in obtaining their child’s physical examination. As much pertinent health information as possible is accumulated and recorded for each child, paying particular attention to the items required by the Bright Futures Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Schedule to ensure that children are following a schedule of complete well child care. The child’s initial physical examination required for program entry must be current (in accordance with the EPSDT schedule) and received no later than thirty days after entry into the program. One extension is allowed with documentation of a pending appointment. Children returning for a second year require additional physical exams in accordance with the EPSDT Schedule. Comprehensive Services Teams enter all data on the physical exam into the CLOUDS data management system. This enables program staff to track services and follow-up on actions such as treatment needed, future appointments, and referrals. Managers access reports to help monitor progress in meeting program requirements in a timely manner.

##### **2. TB Clearance – CSB Center-Based Program**

In accordance with section #101220 of Licensing Code, TB Clearance documentation must be obtained for each child within 30 days of enrollment (admission) into the program. TB Clearance documentation must consist of either:

- A negative TB Skin Test or Chest X-Ray result, or
- A physician's check mark indicating "No Risk" on CSB207–Report of Health Examination - Well Child Check or other signed or stamped document from the physician/clinic.

The TB screening referenced in the TB Clearance documentation must be in accordance with the EPSDT schedule. The one extension allowed for pending physical exam appointments does not apply to TB Clearance documentation. Children without TB Clearance will be excluded if clearance is not obtained within 30 days of enrollment.

### **3. Health Insurance**

Through use of the Health History and within 30 days after the child first attends the program, or for the home-based program option, when the child receives a home visit, those children with and without medical and/or dental insurance are designated as such. In the event that the child does not have insurance coverage, Comprehensive Services Teams will assist families in accessing insurance as soon as possible by referring the child to various programs such as the Child Health and Disability Prevention (CHDP) Gateway program, Medi-Cal/Denti-Cal, the Kaiser Permanente Children's Health Plan, and services through Covered California.

### **4. Health Records**

In the event that health records are returned to the program with information missing, Comprehensive Services Teams obtain consent for release of information from parents. This consent is used to obtain information from medical/dental offices, medical records departments and laboratories. Every effort is made to educate parents regarding the EPSDT schedule and the documentation needed prior to visiting a doctor or dentist.

The following information shall be obtained and entered into CLOUDS and the child's confidential file:

- Health and developmental history
- Immunization record including immunizations and in series/waivers
- Treatment plans
- Age-appropriate physical exams, dental exams and screening results
- Records of major/minor illnesses and injury during program activities
- Schedule of daily medications - prescription and over-the-counter medications such as sun screen and rash ointment
- Allergic reactions
- Dietary intake and food habits
- Age and gender-appropriate growth charts
- Source of payment for services, including free federal, State of California, and locally funded health services
- Medi-Cal number or private insurance identification
- Referral and follow-up information

- Record of follow-up and documentation of actual services provided
- Emergency information/Parent Contact
- Signed parent consent forms
- Parent Refusal of Health Services Forms
- Family Meeting Documentation
- Teacher observations
- Progress reports
- Other information as needed

A child whose authorized representatives adhere to a religious faith that practices healing by prayer or other spiritual means shall not be required to meet the requirements of the health examination. In this case, the authorized representatives must provide:

- Information on the child's health history
- A signed statement that indicates:
  - Their acceptance of full responsibility for the child's health.
  - Refusal to obtain a medical examination for the child.
  - Request that no medical care be given to the child.

## **B. Protocols for Determining Child Health Status**

### **1. Application**

Before enrollment, Comprehensive Services Clerks are responsible for:

- Reviewing the electronic application information/intake documents.
- Noting concerns (known or suspected) using the Red/Yellow Flag System as indicated on the Eligibility Certification Checklist Form (CSB604).
- Generating a CLOUDS referral based on application information, as needed and clearly noting details of child's condition in Referral Observation/Comments.

Before enrollment, Comprehensive Services Assistant Managers are responsible for:

- Reviewing the application information/intake documents and ensuring referrals are generated and Red/Yellow Flags are in place if needed.
- Coordinating with the Site Supervisor to set up Family Meetings or interventions as appropriate.

Before enrollment, Site Supervisors are responsible for:

- Reviewing the application, Red/Yellow Flags, and referrals.
- Coordinating with the CSAM to set up Family Meeting or interventions as appropriate.
- Communicating child health status and needs with teaching staff.

### **2. Immunizations**

The State of California Immunization Branch requires that programs institute a “No Shots, No School” policy, however, medical providers may indicate that a child may not have any or all immunizations. In this case, the waiver on the back of the California School Immunization Record Card (blue card) must be completely filled out. Medical exemptions from a licensed physician (MD or DO) will continue to be permitted and require a written statement including which immunization(s) is to be exempted and the specific nature and probable duration of the medical condition. If the medical exemption is permanent, the requirement for the designated immunization(s) is met: check box A and box C on the front of the Blue Card. If the medical exemption is temporary, check box B and box D; this child requires follow-up. Per Senate Bill 277, immunization waivers based on personal beliefs is no longer permitted beginning January 1, 2016. A personal belief exemption submitted prior to January 1, 2016 will remain valid until the student enters kindergarten/transitional kindergarten.

Names of all exempt children will be maintained on an exempt roster for immediate identification in case of disease outbreak in the community. Immunization training, including the most current immunization schedule for children 0-5, is provided to staff annually. Children are tracked throughout their enrollment to ensure they remain up-to-date or in-series. Records are updated accordingly. Comprehensive Services staff completes the annual immunization report due to the local health department in September/October of each year.

**i. Responsibilities of Comprehensive Services Clerks**

Prior to enrollment Comprehensive Services Clerks are responsible for:

- Collecting valid immunization records from parent.
- Obtaining parent consent for use of California Immunization Registry - CAIR (CSB243) and requesting immunization registry search if parent is unable to provide immunization verification.
- Entering immunization data into CLOUDS, completing the results column on the right to indicate one of the following: In Compliance, In Series, Medical Waiver or Non Compliance and ensuring “Overall Immunization Status” below is correctly identified.
- Emailing the name of child exempt from immunizations to the Comprehensive Services Manager (Health Content Area) for placement on the exempt roster.
- Determining overall immunization status.
- Notifying parent of shots needed.
- Assisting the parent in obtaining a doctor office/clinic for immunizations needed.
- Using the Red/Yellow Flag system on the Eligibility Certification Checklist (CSB604) to indicate temp files as needing immunizations prior to start date.
- Printing the Immunization Blue Card from CLOUDS or manually filling in blanks, signing it, and placing it in the temporary file with documentation of a physician’s statement for medical exemptions.

On an ongoing basis, Comprehensive Services Clerks are responsible for:

- Obtaining immunization updates and entering the data on the Blue Card and in CLOUDS.
- Tracking in-series children and notifying the parent of the next dose due prior to the due date.

As needed, Comprehensive Services Clerks are responsible for:

- Assisting the parent in obtaining a doctor office/clinic for immunizations needed.
- Preparing exclusion letters if child fails to obtain shots on time.

Annually, Comprehensive Services Clerks are responsible for:

- Attending the annual immunization training.
- Reviewing and updating immunizations for the annual immunization report prior to submission each September/October.
- Assisting with the annual immunization report as needed.

**ii. Responsibilities of Comprehensive Services Assistant Managers**

Prior to enrollment, Comprehensive Services Assistant Managers are responsible for:

- Reviewing files to ensure up-to-date or in-series immunizations or waiver is in place before file is provided to Site Supervisor for placement.
- Conducting ongoing immunization registry searches as needed.

On an ongoing basis, Comprehensive Services Assistant Managers are responsible for:

- Ongoing monitoring of CLOUDS for immunization compliance.
- Tracking children with in-series immunizations.
- Supporting the parent by coordinating with the Site Supervisor to set up a Family Meeting as needed regarding immunizations.
- As needed, reviewing exclusion letters generated by clerk and verifying information, which is forwarded to the Site Supervisor for action.

Annually, Comprehensive Services Assistant Managers are responsible for:

- Reviewing annual immunization reports prepared by the clerk, to verify accuracy.
- Collaborating with the Comprehensive Services Manager (Health Content Area) prior to online submission each September/October and with the Site Supervisors after online submission is complete.
- Attending annual immunization training.

Site Supervisors are responsible for:

- Reviewing immunization compliance prior to enrollment.
- Returning the temporary file to the Comprehensive Services Assistant Manager if immunizations are not complete or required exemption documentation is missing.
- As needed, verifying, signing, dating and issuing exclusion letters prepared by the clerk and reviewed by the Comprehensive Services Assistant Manager.

Comprehensive Services Health Manager is responsible for:



- Providing immunization training annually.
- Overseeing the process and submission of the annual immunization report to the local health department by the September/October due date of each year.
- Conducting ongoing immunization registry (CAIR) searches.
- Obtaining access to CAIR for new team members.
- Maintaining a roster of children who are exempt from immunizations for immediate identification in case of disease outbreak in the community.

### **3. TB Clearance – CSB Center-Based**

#### **i. Program Comprehensive Services Clerks are responsible for**

- Informing parent of 30-day TB requirement and ongoing TB requirements per the EPSDT Schedule.
- Assisting parents with gaining access to TB testing.
- Collecting valid TB screening records from parents which include either a negative TB Skin Test or Chest X- Ray results, or a Physician's Clearance indicating "No Risk" on the Report of Health Examination - Well Child Check (CSB207) or other signed or stamped document from physician/clinic.
- Date stamping TB documentation upon receipt and review.
- Inputting TB screening data into CLOUDS upon receipt.
- Updating TB section of the Blue Card in child's file.
- Updating CLOUDS with referrals and case notes.
- As needed, preparing the exclusion letter if TB Clearance is not provided within 30 days of enrollment (TB Clearance: Negative TB skin test or Chest X-Ray results, or "No Risk" per medical provider).

Comprehensive Services Assistant Managers are responsible for:

- Tracking immunization compliance through CLOUDS Reports.
- Supporting the parent by coordinating with the Site Supervisor to set up the family meeting as needed.

Site Supervisors are responsible for:

- Notifying the parent of 30-day requirement at enrollment.
- Tracking receipt of TB screening records.
- Ensuring that no child is attending the program without TB Clearance beyond 30 days from enrollment.
- Coordinating with the Comprehensive Services Assistant Manager to set up family meetings as needed.
- Communicating with the Comprehensive Services Clerk to prepare exclusion letters.
- Reviewing, authorizing and signing all exclusion letters, and designating staff for distribution.

#### **ii. Health History (CSB217)**

Prior to enrollment, Comprehensive Services Clerks are responsible for:

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- Completing the Health History on CLOUDS.
- Printing a copy of the Health History for the child's file.
- Obtaining signatures on the Health History if possible.
- Placing a "sign here" sticker on the Health History document if the parent is not present to sign.
- Reviewing the Health History to determine whether each child has a medical/dental home and medical/dental insurance coverage within 30 days of enrollment. Such care is defined as 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 care or urgent care.
- Reviewing information and flagging any suspected or known special needs using the Red/Yellow Flag System on the Eligibility Certification Checklist Form (CSB-604).
- Generating a CLOUDS referral for any special needs noted on the Health History.
- Providing medical/dental home and insurance intervention with all families that indicate they have no medical / dental provider or coverage. Document intervention on the Health History in CLOUDS.

Prior to Enrollment, Comprehensive Services Assistant Managers are responsible for:

- Reviewing the child's Health History for completion and concerns.
- Ensuring proper Red/Yellow Flags are in place as appropriate with sufficient detail noted for the Site Supervisor.
- Reviewing CLOUDS referrals generated from the Health History.
- Meeting with parent to ensure understanding of the benefits of consenting for services, if parent has not given consents on the Health History.
- Contacting the Comprehensive Services Manager for guidance if unsure of how to proceed with any special needs.
- Coordinating with the Site Supervisor to set up a pre-enrollment family meeting as needed.

Site Supervisors are responsible for:

- Returning any file without a Health History.
- Reviewing the Health History, checking for Red/Yellow flags and referrals, coordinating with the Assistant Comprehensive Services Manager to set up a family meeting / intervention as appropriate.
- Acquiring a parent signature on the Health History, if necessary at enrollment.
- Ensuring that teaching staff has reviewed the Health History in order to address health conditions/needs and the completion of the consent section.
- Coordinating with Comprehensive Services Assistant Manager to set up pre-enrollment family meeting as needed.

Comprehensive Services Health Manager is responsible for:

- Providing and/or arranging training and technical assistance as necessary for special needs identified in the Health History.
- Attending family meetings for complex cases as needed.
- Tracking and providing follow-up as needed.

**iii. Physical Exam Report of Health Examination - Well Child Check**

Comprehensive Services Clerk is responsible for:

- Providing a physical exam - Report of Health Examination - Well Child Check (CSB207) to the parent and informing the parent of the 30-day requirement prior to enrollment.
- Educating the parent on the use and importance of the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) schedule copied on the back side of the Well Child Check (CSB207).
- Noting in the Child Case Notes in CLOUDS that the parent was given a physical form.
- Referring the parent to a medical provider/insurance and providing support as needed.
- Date stamping the physical exam upon receipt and review of the CSB207 form.
- Immediately notifying the Comprehensive Services Assistant Manager of any known or suspected health concerns or disabilities.
- Inputting the physical exam data into CLOUDS and documenting completion of data entry and staff follow-up by placing notes (as needed), clerk’s signature and date on the lower right hand side of the exam form in the “Staff Follow-up” box.
- Entering follow-up data on CLOUDS as needed.
- Generating referrals as needed.
- Collecting parental consents for health services and release/exchange of information.
- Contacting clinics, doctors’ offices, and laboratories to obtain missing results.
- Tracking physical exam due dates and sending reminder notices to parents as needed.
- Obtaining authorization from parents for health services administered by the program, or by agreement or contract with a partnering entity.
- Obtaining complete Parent Refusal of Health Services Form (CSB298) for those parents who refuse to give authorization for health services.
- Providing handouts for screening value results and guidelines as needed.
- Providing exclusion letters at the direction of the Site Supervisor.

**CHDP Assessment Guidelines for Blood Pressure Readings:**

Further evaluation or follow-up is indicated for a child who sustains a systolic or diastolic reading at or above the 95th percentile for age and gender (measured on at least 3 occasions and averaged together). If results are entered in CLOUDS as “Abnormal”, a CLOUDS health referral is generated and follow-up in completed as needed.

Age in Years	90 <sup>th</sup> and 95 <sup>th</sup> PERCENTILE BLOOD PRESSURE ACCORDING TO AGE and GENDER							
	Boys				Girls			
	Systolic		Diastolic		Systolic		Diastolic	
	90th%	95th%	90th%	95th%	95th%	95th%	95th%	95th%
3	107	111	68	73	73	73	73	73
4	108	112	69	73	73	73	73	73
5	109	113	69	74	74	74	74	74

**Blood Lead Levels:**

Provide nutrition resources and lead education materials if child's lead blood level is 4.5 or greater. If the

lead level is 9.5 or greater a referral must be made to the Comprehensive Services Health Manager.

Comprehensive Services Assistant Manager is responsible for:

- Tracking receipt of Well Child Check for children ages 0-5 years old on an ongoing basis, in accordance with the EPSDT Schedule and in collaboration with the Site Supervisor.
- Reviewing all physicals with known or suspected health conditions/disabilities immediately upon receipt of exam.
- Communicating with the parent immediately when problems are suspected or areas of concern arise.
- Tracking referrals and follow-up.
- Initiating care plans with providers as appropriate.
- Conducting follow-up with parents on an ongoing basis.
- Ensuring completion of parental consents and documentation of parent refusal of health services.
- Conducting follow-up with providers to obtain documentation to complete the exam per the EPSDT Schedule or to obtain follow-up information.
- Monitoring physical exam due dates to ensure compliance with the EPSDT Schedule.
- Coordinating with parent and Site Supervisor to set up family meetings as needed.

Site Supervisors are responsible for the following:

- Notifying the parent of the 30-day Well Child Check (CSB207) requirement at enrollment.
- Tracking receipt of the initial Well Child Check (CSB207) for children 0-5 years.
- Ongoing tracking receipt of Well Child Checks for children 0-5 years in accordance with the EPSDT Schedule.
- Ensuring that no child is in the program without a physical past 30 days (one extension allowed with documentation of a pending appointment).
- Directing clerks to prepare exclusion letters as necessary.
- Issuing Notice of Action (NOA) for children in state-funded programs that have not complied with requirements.
- Referring families who need assistance in accessing care to the Comprehensive Services Team.
- Reviewing the physical exam for each child and calling for a family meeting when appropriate.
- Working with teaching staff to ensure child's medical and developmental needs are addressed appropriately.
- Ensuring implementation of care plans.

Comprehensive Services Health Manager is responsible for the following:

- Supporting staff and families through the family meeting process for complex cases as needed.
- Interfacing with community partners to obtain health education, services, assistance and follow-up.
- Reviewing CLOUDS Reports to ensure compliance with health requirements.
- Maintaining a Health Services Advisory Committee that includes Head Start parents,

professionals and other volunteers from the community to address the health concerns impacting CSB's children and families and to gain knowledge of current health opportunities available to families and children in the community.

**iv. Dental Exam**

Comprehensive Services Clerks are responsible for:

- Informing parent of the 90 day dental exam requirement upon enrollment.
- Educating the parent about the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Schedule for Dental/Oral Health Care.
- Providing parent with the dental exam form (CSB-206).
- Providing a list of dental providers/insurance options to the parent and providing support as needed.
- Tracking dental exam due dates on an ongoing basis.
- Preparing reminder letters and contacting parents regarding dental exams and treatment needed.
- Date stamping the dental exam on the bottom right hand section under "Date Received", upon receipt and review of the form and entering "Date Obtained" on the Dental Tab in CLOUDS.
- Entering dental exam data into CLOUDS upon receipt and documenting data entry in CLOUDS by placing signature and date in the "CSB Staff Follow-up" section at the bottom of the exam.
- Collecting consents for release of information as needed.
- Generating referrals for children without dental care access, with treatment needed or with non-compliance issues as needed and documenting referral follow up under referral/ case notes.
- Tracking dental treatment follow-up on the Dental Exam (CSB206) and documenting "Receiving Treatment" and/or "Treatment Complete" in CLOUDS on the Dental Tab.
- Obtaining parental dental consents for release/exchange of information and onsite dental services and events.
- Obtaining complete Parent Refusal of Health Services Form (CSB298) for those parents who refuse to give authorization for oral health services

Comprehensive Services Assistant Managers are responsible for:

- Monitoring dental exam due dates on an ongoing basis.
- Following up to ensure treatment plans are in progress, ongoing or complete.
- Coordinating with the Site Supervisor and parent to schedule and attend family meetings for oral health education, dental access, non-compliance issues, etc.
- Assisting the Comprehensive Services Manager with coordination of exams by volunteer dentists/mobile dental care, and other oral health events/services.

Site Supervisors are responsible for:

- Collecting dental forms and forwarding them to Comprehensive Services Clerks.
- Coordinating with the Comprehensive Services Assistant Manager and parent to schedule and attend family meetings regarding oral health as needed and keeping teachers informed with

updates.

- Coordinating with Comprehensive Services and teaching staff to support onsite dental activities/trainings/events.

Comprehensive Services Health Manager is responsible for:

- Support staff and families through the family meeting process for complex oral health issues.
- Reviewing CLOUDS Reports to ensure compliance with oral health requirements.
- Coordinating volunteer dentists, mobile services and oral health events on an ongoing basis.
- Collaborating with the Children’s Oral Health Program, Contra Costa Dental Society and other community partners, for oral health education, services, assistance and follow-up.
- Ensuring Health Services Advisory Committee participation in addressing the oral health concerns currently impacting CSB’s children and families.

**v. Staff Protocol for Dental Referrals if Treatment is Needed**

Comprehensive Services Clerk is responsible for:

- Generating a dental referral and updating the status as needed in CLOUDS.
- Determining dental insurance status for treatment needed and providing contact information for local community dentists/clinics, the current schedule for mobile dental services in the community, and Covered California or other insurance resources to ensure treatment completion for all children including those in need of, or unable to obtain dental insurance and those with unaffordable co-pays.
- Providing the parent with “Dental Exam/Treatment” Form (CSB206).
- Obtaining parental consents as needed.
- Obtaining documentation of Parental Refusal of Health Services (CSB298) as needed.
- Entering contact information and date referral information was provided in CLOUDS Dental Referral Case Notes (indicating status “in progress”).
- Following-up with the parent (within 2 weeks) regarding the status of scheduled appointment and frequently thereafter until treatment is complete.
- Entering each follow-up activity in CLOUDS Dental Referral Case Notes and once treatment is finished enter status “complete”).
- Referring to the Comprehensive Services Assistant Manager if the family has exhausted all options without success.

Comprehensive Services Assistant Managers are responsible for:

- Monitoring CLOUDS reports to identify children in need of dental services, referrals and follow up.
- Communicating immediately with parent upon identification of oral health concerns.
- Following up with the Comprehensive Services Clerks and the parent to assist with extended “in progress” referrals.
- Coordinating with Site Supervisor and parent to schedule and attend family meetings regarding oral health as needed.
- In cases where the co-pay is unaffordable or the child is not eligible for insurance and parent cannot afford treatment, referring to providers such as local clinics, mobile dental services, the Children’s Oral Health Program, Give Kids a Smile dentist, and the Children's Dental Health

Foundation.

- Entering status/follow-up data in CLOUDS Dental Referral Case Notes.
- Referring to the Comprehensive Services Health Manager if services for treatment cannot be provided or treatment is unaffordable.

Comprehensive Services Health Manager is responsible for:

- Collaborating with community partners to provide services on site or through local dental offices, mobile dental vans and dental events.
- Initiating the request process for Head Start funds (last resort) - working with Comprehensive Services Assistant Manager to acquire treatment estimate, letter from parent, date of dental appointment and additional documents needed.
- Reviewing CLOUDS Reports to ensure compliance with dental treatment follow-up.
- Attending family meetings for complex cases.

**vi. Medical/Dental Home**

Comprehensive Services Clerks are responsible for:

- Consulting with parents through use of the Health History to determine within 30 days after child attends the program or, for the home-based program option, receives a home visit, whether or not each child has ongoing sources of health care provided by a health care professional that maintains the child's health records and is not primarily a source of emergency care.
- Assisting families with gaining access to a source of ongoing and continuous care and navigating the managed care system to access services as needed and as soon as possible.
- Documenting Medical/Dental interventions and health/oral health coverage in CLOUDS within 90 days of enrollment.
- Providing ongoing support for families in need of a medical/dental home.

Comprehensive Services Assistant Managers are responsible for:

- Supporting clerks with families that are facing barriers to medical/dental home access.
- Monitoring CLOUDS reports on an on-going basis to identify children in need of a medical/dental home.
- Coordinating with the Site Supervisor and parent to schedule and attend family meetings regarding medical/dental homes.

Comprehensive Services Health Manager is responsible for:

- Collaborating with community partners to obtain access to medical/dental homes for CSB families.
- Reviewing CLOUDS Reports to ensure compliance with medical and dental homes.
- Calling upon advocacy organizations to address any gaps in service or access.

**C. Developmental, Sensory, and Behavioral Screening**

All children are screened by the teaching staff in the areas of social emotional development and cognitive development including children with an IEP/IFSP, and as needed, by the Comprehensive Services Team for hearing, vision, and nutrition, within 45 days of class entry. Parents should be informed about all upcoming screenings and their purposes in advance. Results of the screenings are used as part of the individualization process for each child.

It is the Site Supervisor's responsibility to work with the teacher and Comprehensive Services Team to ensure that ASQ-SE and ASQ-3 screenings are completed within 45 days of class entry.

The teacher places completed ASQ-SE and ASQ-3 Screenings in the Education section of the child's file and enters screening data in CLOUDS. Teachers give each child time to adjust to the new environment before rescreening if necessary.

### **1. Protocols for Sensory (Vision and Hearing) Screening**

Evidence-based vision and hearing screenings are to be completed within 45 days after the child first attends the program or for home-based program option, receives a home visit, for children who do not have results as part of their Well Child Check and for returning children, as needed, based on the EPSDT schedule.

Comprehensive Services Assistant Manager is responsible for:

- Identifying those newly enrolled children in need of initial screenings, returning children in need of screenings based on the EPSDT schedule and re-screenings due within two weeks of the initial screening through use of CLOUDS Smart Reports.
- Coordinating screening team logistics for Comprehensive Services Clerks to administer screenings on an ongoing basis.
- Notifying the Site Supervisor of the upcoming screening schedule with a minimum one week notice. Note - One week notice may not apply for children absent on the initial screening date.
- Directing Comprehensive Services Clerks to input data results in CLOUDS, preparing referrals as needed and providing follow-up until treatment is established and complete.
- Communicating immediately with parent upon identification of screening concerns.
- Coordinating with the Site Supervisor and parent to schedule and attend family meetings regarding sensory screenings.
- Tracking referrals to physicians and providing ongoing assistance to clerks and parents until testing/treatment is established and the referral is complete.
- Ensuring the completion of the health section of the Screening Results Form (CSB212) within 75 days of enrollment.
- Completing vision and hearing screening certification courses as soon as possible after hire.

The Site Supervisor is responsible for the following:

- Obtaining a screening schedule from the Comprehensive Services Assistant Manager and providing a schedule for teaching staff.
- Providing teaching staff with the screening preparation curriculum.
- Monitoring the implementation of screening preparation in the classroom curriculum and on



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the lesson plan.

- Providing an appropriate screening area on site for the administration of screenings.
- Designating teaching staff to accompany children to and from designated screening location.
- Coordinating with Comprehensive Services Assistant Manager and parent to schedule and attend family meetings regarding screenings.
- Ensuring the completion of the education section of the Screening Results Form (CSB212) within 75 days of enrollment.

Teaching Staff is responsible for:

- Implementing screening preparation curriculum in the classroom.
- Including screening preparation on the lesson plan. Note – In an effort to complete all screenings within the 45-day deadline, it is important to include screening preparation into the lesson plan for the first week of school for part year programs and two weeks prior to July 1 for year round programs.
- Providing flexibility with the classroom schedule to support Comprehensive Services in completing the screenings.
- Introducing Comprehensive Services Staff to children on the screening day.
- Assisting Comprehensive Services with gathering children to be screened, tracking children as they are removed from and re-enter the classroom and accompanying children to and from the screenings as directed by Site Supervisor.
- Completing the educational areas of the Screening Results Form (CSB212) including the Behavioral Screening (ASQSE) and Cognitive and Language Screening (ASQ3) and signing in the designated area.
- Assisting with the distribution of Screening Results Forms (CSB212) to parents.

Comprehensive Services Clerks are responsible for:

- Engaging parents in conversation about the importance of screenings.
- Notifying parents of dates and screenings to take place through one-on-one conversation and by posting flyers on site, one week in advance of the screening days.
- Reviewing reports of children to identify those that need to be screened.
- Verifying consents for screenings on the Health History forms of those children to be screened.
- Obtaining additional consents for screening to be administered by collaborative agencies as needed.
- Obtaining documentation of Parent Refusal for Health Services (CSB298).
- Obtaining equipment needed and setting up screening tools on site.
- Introducing screening staff to the classroom teaching staff and allowing teaching staff the opportunity to introduce the screening staff to the children.
- Encouraging teachers to assist in choosing the order in which the children will be screened. Note: those children unwilling to participate will be given future opportunities and parents and/or staff may be encouraged to accompany the child to complete needed screenings within the 45-day deadline.
- Partnering with teaching staff and Site Supervisors to accompany children to and from the classroom and the location of the screening administration.
- Administering the vision and hearing screenings and, noting results on the Hearing and Vision Screening Tracking Form.
- Cleaning up the equipment and leaving the area as it was found.

- Maintaining sensory screening results on the Hearing and Vision Screening Tracking form in a binder onsite.
- Entering all screening data in CLOUDS and documenting screening results, re-screens and referrals.
- Informing the Comprehensive Services Assistant Manager and Site Supervisor of those children in need of re-screening.
- Administering re-screenings within two weeks of the initial screening and within 45 days of enrollment if the child did not pass or was unable to condition.
- Preparing referrals to physicians and in CLOUDS for those children identified as needing further evaluation.
- Contacting parents of children with referrals, offering resources for a medical/dental home/insurance and additional assistance as needed.
- Completing the Screening Results Form (CSB212) and ensuring that teaching staff has completed the education section of the form prior to making a copy for the file and distributing the original to the parent in a confidential manner within 75 days of the child's date of enrollment.
- Providing ongoing assistance for referrals and resources until each referral is complete.
- Completing vision and hearing screening certification courses as soon as possible after hire and prior to expiration of certification.

Comprehensive Services Health Manager is responsible for:

- Overseeing the monitoring of all sensory screenings, referrals and follow up.
- Coordinating annual Vision/Hearing Screening Trainings with CHDP.
- Attending family meetings for complex cases.
- Registering Comprehensive Services Staff in need of vision/hearing training and certification as soon as possible after hire and prior to expiration of certification.
- Coordinating screenings with collaborative agencies and notifying the Site Supervisor and Comprehensive Services Team of those screening dates and requirements.

#### **D. Exams, Follow-Up and Treatment**

Early medical/dental exams and other screenings enable parents and program staff to identify any concerns and respond in a timely manner. Whenever concerns are present the Comprehensive Services Team communicates with the parent immediately and works with the parent to obtain necessary follow-up services or treatment. Assistance is provided in the acquisition of equipment needed for medical/dental conditions and parents are educated regarding their child's specific condition and needs.

- Dental follow up/treatment includes preventive measures and further treatment as ordered by the dental professional.
- Medical Treatment includes treatment of any condition as identified on the physical exam, other health documentation from a health professional or the IFSP/IEP.
- Follow-up treatment for both medical and dental needs is tracked in the CLOUDS system using the referral feature and is referenced in the child's confidential file.

Where no resources exist in the community for follow-up and treatment, the program will pay for services as long as funds remain in the budget earmarked for this purpose. To access program funds, the

Comprehensive Services Team must document that all available resources have been exhausted and that program funds are being used as a last resort. This information, along with proof of need and the estimated cost for treatment, must be submitted to an Assistant Director for approval and submitted to the fiscal unit and the Bureau Director.

**The protocols for Referrals, Follow Up and Treatment are as follows:**

Comprehensive Services Clerk is responsible for:

- Generating a referral in CLOUDS as soon as a need is identified, with attention given to selecting the appropriate Referral Reason, Service Area and Status.
- Provide resources and referrals as needed.
- Assisting in collecting documentation needed for the referral.
- Entering related data into CLOUDS.
- Supporting parents throughout the referral process.
- Obtaining the Parent Refusal for Health Services (CS298) as needed.

Comprehensive Services Assistant Managers are responsible for:

- Monitoring CLOUDS reports and following up on referrals on a weekly basis.
- Coordinating with the Site Supervisor and parent to schedule and attend family meetings.
- Supporting families through the referral/family meeting process.
- Ensuring the updating of the status of the referral as it changes.
- Contacting the Comprehensive Services Manager for training or technical assistance as needed

Comprehensive Services Health Manager is responsible for:

- Providing training and technical assistance as needed.
- Supporting families and staff through the family meeting process for complex referrals.
- Providing reports and updates to the Assistant Directors as needed.

Assistant Directors are responsible for:

- Ensuring follow-up and corrective action plan completion.

## **E. Children with Disabilities- Screenings, Family Meeting and Referral Procedures**

Early childhood experiences are known to shape the developmental outcomes for children. Trauma during the early years also affects long-term outcomes by impacting brain development, cognitive, physical, and social/emotional functioning. The Community Services Bureau has systems in place to mitigate these factors which include early screenings/assessments, family meetings and linkage with appropriate agencies to provide any/all necessary comprehensive services the child and family might need. Parents need to agree and provide a written consent (CSB501) prior to receiving referrals or linkages to any other agencies. Agencies closely working with the Community Services Bureau are: the Regional Center of the East Bay, the Contra Costa School Districts, the Contra Costa Children and Family

Services Bureau among others.

## **1. Screenings**

The Community Services Bureau is committed to early identification of children at risk of developmental delays in order to provide the necessary early intervention that will lead to a better future for the child.

Prior to enrollment during the application period the child's file might be flagged using the Red and Yellow Flag System to alert the staff of known or suspected concerns based on the completed health history by the parent. The health history briefly screens children for possible health, nutrition, and socio-emotional and developmental risks.

Child's Physical Exams/Baby Well Checkups provide a great source of information and they are submitted by the parents within 30 days of enrollment and thereafter as required by the EPSDT schedule.

In addition, sensory and developmental screenings are provided to all enrolled children within 45 days of enrollment including children with an IEP/IFSP.

Children determined to be in need of further evaluation/assessment based on screening results, staff observations, and/or parent observation are referred to the appropriate agency with parental consent.

## **2. Data Gathering, Family Meeting and Referral**

The Community Services Bureau staff follows the next steps when referring a child for a diagnostic assessment and early intervention to an outside agency.

### **i. Data gathering by CSB staff prior to family meeting**

- The child's file and the CLOUDS system are reviewed to identify other related concerns.
- The developmental history taken at enrollment is reviewed. (It provides information regarding the child's history of exceptional items not normally occurring, i.e., low birth weight, allergies, premature and/or post-mature, difficult birth, accidents, eating behaviors, meeting milestones and/or other concerns).
- The medical records completed in the last 12 months are reviewed to identify health concerns or other relevant information given by the pediatrician.
- The sensory/cognitive screening and assessment results are reviewed and verified to ensure further evaluation if necessary.
- The Initial Home Visit form (CSB170) is reviewed to identify parent's concerns.
- The At Risk Referral Form (CSB622) is reviewed. CSB 622 form indicates that the child/family has as an open CFS case and is receiving Child Protective Services and childcare/development services are necessary component of the Child Protective Services Case Plan or the child/family has an At-Risk Case and is NOT receiving Child Protective Services, but is at risk of abuse, neglect or exploitation and childcare and development services are needed to reduce or eliminate the risk.
- Teacher/Site Supervisor/Disabilities Comprehensive Services Disabilities Manager observes the child in the classroom and produces written documentation about child's strengths and

challenges.

## **ii. Family Meeting**

After gathering data, the site supervisor, teacher and CSAM review the strategies that will be presented to the parent in a family meeting.

The Site Supervisor and/or CSAM invite the parent/s to a family meeting to be held at the parent's convenient time and to identify if the parent will need an interpreter.

The CSAM invites the additional team members in collaboration with the site supervisor. The family meeting team members include but are not limited to the class teacher, the Site Supervisor, the assistant manager, content area managers, the interpreter, any other family friend/relatives, the physical therapist, the occupational therapist, the speech/language therapist, CFS welfare social worker and any other professional involved with the child/family receiving services.

The meeting is facilitated by the CSAM but can be led by other agency staff. The meeting is documented in the family meeting Form (CSB514) and/or directly entered in CLOUDS under "Disabilities-Family Meeting Information" attached to the Meeting/Event sign-in Sheet Form (CSB905). All participants are required to sign the CSB 905 form. These original forms will be placed in the child's file under the Special Needs Section.

The purpose of the meeting is to open communication relevant to the individual needs of the child, to provide strategies for the parent and to place necessary referrals to outside agencies for further evaluations. The family meeting is dismissed after identifying actions, roles and responsibilities for each member and scheduling a follow up meeting if necessary.

## **iii. Referral**

The CSAM contacts the family for a follow-up within 30 and 60 days after submitting the referral to ensure proper evaluation meetings are in place, proper support is given to the parent in preparation of the diagnosis meeting, and ensure participation in the IEP/IFSP meeting.

Additional family meeting will follow up as needed and/or as determined in the initial meeting.

## **F. Parent Involvement in Health, Nutrition, and Mental Health Education**

- CHDP consultants train parents and staff on prevention of common childhood illnesses. (Contra Costa County Health Services) MediCal representatives provide education and information to parents and staff on MediCal application procedures and the Managed Care system.
- Dental representatives train parents and staff on dental hygiene.
- A Mental Health Consultant trains parents and staff on early prevention/intervention of children's Severe Emotional Disorder, Behavior Disorders, and stress related behavior.

## **G. Child and Family Mental Health Services**

### **1. Description**

The Community Services Bureau Mental Health Unit provides individual psychotherapeutic services to children enrolled in the Early Head Start and Head Start program. The staff provides individual and group consultation to parents and teaching staff on child abuse, parenting skills, parent advocacy, developmental and mental health issues impacting the 0-5 year-old population and their caregivers.

The Mental Health Unit operates a comprehensive Master's level Internship Program in collaboration with Contra Costa County Health Services Department, Mental Health Division on a year-round basis.

The Contra Costa County Community Services Bureau program staff, partners with parents and mental health professionals, to identify mental health concerns of children and parents in the program. The task of the family meeting team is to:

- Ensure parental consent for Mental Health Consultation is present
- Ensure the delivery of appropriate mental health services in a timely manner
- Assist in designing strategies to identify mental health concerns of children
- Recommend appropriate placement and/or program modifications to meet the individual needs of children
- Support and include parents in the decision making regarding mental health services for their child

Goals of the Mental Health Unit

- The goals of the prevention activities provided by the mental health unit address self-concept, building positive relationships among children, their peers and their caregivers; developing coping and problem solving skills, and stress management.

### **2. Mental Health Services**

The Mental Health Unit delivers the following services:

- Prevention, early identification and intervention in problems that may interfere with a child's development
- Developmental/Social and Emotional Screening (ASQ3 and ASQSE)
- Focus on early detection of concerns of caregivers, staff and children who may be in need of mental health services
- Mental health assessment
- Play Therapy (Individual Psychotherapy with children)
- Family Support
- Parent (Guardian) – Child Interaction Therapy
- Staff Training on mainstreaming and social integration techniques
- Parent Training on social, emotional and mental health development of children
- Parent Training on positive child rearing techniques and stress management
- Program evaluation and performance partnership review to ensure planning and delivery of excellent supports and services.

- Family Meeting
- Crisis Intervention
- Provide community resources to families
- Child Abuse and Domestic Violence awareness

The objectives of Mental Health treatment are to alleviate and resolve identified symptoms per a diagnosed mental health issue and medical necessity. The clinicians perform assessment and ongoing treatment based on a diagnosis by their licensed supervisor. The treatment is provided in accordance with the parent or legal guardian's consent; parents or guardians are encouraged to be active participants in the treatment planning process as outlined by the Head Start Performance Standards.

Services are individualized and are primarily provided at the preschool sites in dedicated play therapy rooms. The Clinical Team coordinates care of children, parents and families with other contracted and non-contracted county child and family service agencies while a child is enrolled in and transitioning out of Head Start. The hours of operation vary depending on the child's school program and individual needs. The clinicians provide some services in the early morning or evening to accommodate caretakers' work schedules. Additionally, all Mental Health staff is available via voicemail, and email through the Mental Health unit administrator.

### **3. Mental Health Referral Procedures**

#### **i. Mental Health Recommendations**

Mental Health Staff collaborate with CSB health, disabilities, nutrition, and education colleagues and CFS to determine a child's need for a diagnostic evaluation. Diagnostic evaluations are recommended for all children who present with symptomatic behavior indicating signs of severe stress, social, emotional, educational, developmental delays and/or physical concerns.

A referral for mental health services can be requested by parents, teachers, Site Supervisors, Ed managers, CSAMs and clinicians. If recommendation is for referral to Mental Health services within Head Start/Early Head Start or other agency, the Education Staff or Comprehensive Services member will follow this protocol:

- A child observation is not required if the parent initiates and asks for mental health services for her child and a referral will proceed immediately. "Ed manager may do observation on this child after the referral is submitted if s/he feels the reason for the referral may be due to teaching practice and/or classroom environment."
- If a teacher has a concern about a child's behavior, she/he will inform the site supervisor. Site Supervisor must explore with teacher to ensure best practices including a Positive Guidance Plan (CSB 134B), if appropriate, has been implemented for the child before moving process with MH referral. Site Supervisor has 48 hours to inform CSAM, Ed Manager and Clinician whether MH referral is considered or not, and if not, a reason shall be given.

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- Site Supervisor, Ed Manager or Clinician can provide the observation to help determine if referral to MH is needed. Once all observation is completed and MH referral is needed, CSAM will notify the family for a family meeting to move forward with MH referral.
- Based on the agency identified for referral, the CSAM will explain in detail the requirements for their referral process, their timelines, and provide copies of the parent rights and responsibilities under IDEA to the parent. It is crucial that this portion be clear to the parent and an interpreter assist the parent with any clarification.
- The parent is encouraged to sign the Child Referral and Parent Consents Form (CSB501), only after understanding the referral process and his/her parent rights under IDEA. The assistant manager assists the team by providing the copy CSB501 form to be signed.
- For Mental Health referrals, the medical provider information is completed on the referral form and a copy of the child's Medical card (if insured) is attached. When a child is on a Positive Guidance Policy Step Letter and has a Positive Guidance Plan, a copy of this plan, the child's Ages and Stages Questionnaire – Social Emotional (ASQ-SE) and Development Screening (ASQ-3) is included with the referral.
- The Child Referral and Parent Consents Form (CSB501), is reviewed to ensure the document is correctly filled out after acquiring parent signature. Additional signatures are obtained from the Site Supervisor, Education Manger, and the Comprehensive Services Assistant Manager. A copy of this form (CSB501), is given to the parent, one to the assistant manager to process the referral and the original is placed in the file.
- The CSAM reviews the signed CSB501 and processes it immediately. Once verified referral receipt by phone with the appropriate School District, Early Intervention Agency, or Mental Health Unit, the assistant manager completes the Response to Referral Form (CSB502).
- The original form (CSB502) is placed in the child's file while the copy is given to the parent attached to additional relevant informational resources.
- The CSAM opens a referral in CLOUDS and enters the referral notes in the "Disability Intervention Referral", "Intervention Notification" and "Family Meeting Information" under the disability tab in CLOUDS. Copy of the family meeting (CSB514) or family meeting CLOUD's print out form is placed in the child's file.
- Any clinician who provides the service for a child must share their strategies that are being used with the child's teacher so the teacher can support the implementation of the strategies in the classroom for consistency.
- A regular case meeting will occur monthly or bi-monthly depending on the need (case by case) with the site supervisor, child's teacher, the clinician to follow through on the child's progress and update.

CSAM is responsible for:

- Entering the referral in CLOUDS to include:
  - Entering the reason for the referral in the comment section
  - Entering the 'Parent Consent for Release of info' as "Received" and entering the date



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- that the parents signed the form
- Entering the child's Medi Cal number in CLOUDS
- Faxing referral with cover sheet to confidential fax at CSB Mental Health Unit at (510) 374-7023 and including the following documents:
  - Complete Referral Form
  - MediCal Card or other insurance documentation
  - Positive Guidance Policy Step Letter and Positive Guidance Plan if on file
  - ASQ-SE (as available)
- Sending email or calling Mental Health Clerk to advise that referral is being faxed. Include the following information:
  - The child CLOUDS ID
  - If it is a high priority case and needs immediate attention, such as a CFS At-Risk referral, use the High Priority Flag on the email, and write in, "High Priority Case-Please process ASAP".
  - Updating CLOUDS data entry Changing referral status from "New" to "In Process"
  - Changing the referral status in CLOUDS from "In Progress" to "On Going" when a clinician has been assigned
- Adding extra notes under Case Notes as applicable
- Scheduling family meeting as needed
- Creating a new Referral in CLOUDS if there are no available case openings, the child is not eligible for Medical Services, or the parent declines services and an outside provider is available
  - CSAM will follow-up with the parent to see if they are receiving services. Update in CLOUDS Referral section and note when the child is actually receiving outside services
  - CSAM will continue to communicate with Site Supervisor and the Mental Health team regarding services or for support in providing referrals
- If parent fails to obtain outside services, CSAM will assist in finding services and check back periodically with MH clerk to see if CSB MH has case openings and is able to serve the child, CSAM, updates CLOUDS to reflect status of referral (Complete, Parent Refused).
- Notify Disability MH Manager, if services are going to be provided on site by an outside agency.
  - Obtain outside agency documentation and email copies to Disability MH Manager for review and service delivery approval.
- Obtain signed parental consent to release child to intervention services. (CSB 505)
- File proper related documents under the Special Need section of the child's file.

Mental Health Clerk is responsible for:

- Verifying if the child qualifies for services
- Entering Case Notes under CLOUDS referral, beginning with the date, and ending with her first initial and last name.
- Confirming referral receipt by sending an email to CSAM and Site Supervisor. The referral will

be processed and assigned to a mental health clinician who will perform an assessment and provide ongoing services if the child symptomatic behaviors meet medical necessity for treatment.

- Emailing the CSAM and Site Supervisor with child's CLOUDS # with the child's MediCal eligibility status and advising if services can be provided or if an outside referral is needed.
- Entering in the Mental Health Section of CLOUDS "Facilitated Referral"
- Sending an email to CSAM and CSB Site Supervisor to inform that the child's case has been assigned to a clinician and when services will begin.
- Entering the clinician assignment in the Mental Health section and Case Notes of CLOUDS
- Emailing the CSAM and Site Supervisor when a referral is closed or returned.
- Advising CSAM and Site Supervisor if there are no available case openings, the child is not eligible for Medical Services, or the parent declines services

In this case a second family meeting may be held to communicate with parent/guardian, and to provide support/follow up, and/or additional resources, and/or recommend a referral for outside services if appropriate.

Clinicians are responsible for:

- Contacting the child's parents to obtain informed consent and to start services
- Consulting with CSAM to advise and/or coordinate first parent contact meeting as appropriate
- Participating in family meetings as needed

Mental Health Clerk will update CLOUDS in the Referral Section, change status of the original referral and select "Complete" from the drop down menu and provide a brief explanation in Observation Comments Section.

## **ii. Mental Health Emergency/Crisis Referral Procedures**

If a CSB Site Supervisor and/or CSAM believe that a child is experiencing and/or responding to an emotional crisis or emergency in their life and need urgent mental health intervention, the following people in this order should be notified before making a referral:

- Mental Health Clinical Supervisor East
- Mental Health Clinical Supervisor West
- Comprehensive Services Assistant Director
- Comprehensive Services Disability/MH Manager
- Cluster A Assistant Director
- Cluster B Assistant Director

The responding Mental Health Manager, Clinical Supervisor or Agency Manager will determine an appropriate intervention or course of action based on the level of crisis and an initial clinical assessment. If CSB Mental Health determines that the case needs specialized intervention that CSB cannot provide, the responding clinical supervisor/manager will assist site staff in the facilitation of an appropriate outside referral. If the CSB Mental Health team can provide treatment and the child is determined to be in crisis, a referral will be processed and treatment will be provided regardless of the child's MediCal eligibility.

The referral should be rushed through the current procedure; MediCal eligibility and/or health insurance information can be checked after the referral is faxed to the mental health unit

### **iii. Mental Health Professional Staff**

The Mental Health unit employs licensed Clinical Supervisors and unlicensed Master's level staff working towards Marriage Family Therapist or Clinical Social Worker licensure and who are educated in children and families Mental Health. The staff strives to provide excellent early intervention to children and support services to parents that are designed to meet their specific needs.

The Mental Health unit attempts to employ staff to accommodate the linguistic and cultural needs of a diverse Head Start population. The unit is supported by a senior clerk and a team of CSB Comprehensive Services Assistant Managers CSAMs. The CSAMs facilitate the family meeting that might lead to child referrals for play therapy services.

To promote children's mental wellness, CSB develops collaborative relationships with local mental health agencies for the purpose of securing ongoing prevention, intervention, consultation, and direct services to the program's children and their families.

### **iv. Mental Health Services & Special Education Services Sign-In Protocol:**

Mental Health and Special Education professionals must sign-in the visitor log at all CSB sites. Mental Health Clinicians and intervention professionals are responsible for:

- Signing the Site visitor log at each site when visiting and providing services to a child or attending a meeting. Only sign name/agency and do not identify self as a Mental Health provider to ensure client confidentiality and comply with HIPAA regulations.
- Adhering to appropriate classroom protocols when removing/returning child from/to classroom for play therapy services.

Site Front Desk Staff is responsible for:

- Ensuring that MH or other Early Intervention professional sign in the Site Visitor Log prior to providing services to the children on site.

Outside agency providing services at CSB sites:

- When an outside agency professional is going to provide services at a CSB site, the Disabilities- MH Comprehensive Services Manager must be informed immediately. Outside agency Professionals needs to be informed about Head Start and CSB Policies and Protocols prior to providing services at CSB sites.
- Site Supervisor or CSAM must obtain the following documentation from the outside agency professional.
  - Copy of Parental Consent to Child Release to Early Intervention Services (CSB 505)

- Copy of Parent Consent to exchange information with CSB Staff (CSB 503)
- Copy of Personal ID, work ID and Business card
- These documents need to be filed under the Special Needs Section of the child's file and copies submitted to the Disabilities-MH Comprehensive Services Manager for review and approval or service delivery.

CSAMs are responsible for:

- Informing Disability- MH Comprehensive Services Manager if an outside agency professional is going to provide services at a CSB site and professional's contact information for review.
- Collect copies of required consents and documents prior to allowing services delivered at CSB site.
- Communicate Site Supervisor of new professional providing services on site and coordinate safe and appropriate space for delivery of services
- Entering all Special Services in CLOUDS

#### **v. Policy Regarding Response to Legal Situations**

Description of CSB Policy Regarding Involvement in Custody Disputes by Treating Mental Health Clinical Staff:

- If there is a custody dispute involving the child who is receiving Mental Health services from CSB's Mental Health unit, it is the policy of this agency that the treating clinician or Mental Health Clinical Staff not get involved in such a custody dispute. This dispute may be between the parent and the system or between Social Services and the parent(s).
- Mental Health Clinical Staff are discouraged from writing letter or reports in support of either side in such a dispute. The treating clinician will serve their client best by staying neutral in a custody dispute. Taking sides opens the door for the clinician to be asked to testify in a court of law and expose confidential client information.
- If a parent (or Social Services) requests a written report about the child's treatment, and after a Release form has been signed by the parent, a short treatment summary should be composed and – upon approval by the supervisor – mailed to the child's parent ONLY.

#### **vi. Description of CSB Policy Regarding Subpoenas**

- Subpoena of Records: If a subpoena for records is served to the treating clinician, the clinician must attempt to have the child's parent sign a release form permitting the release of a treatment summary. If such a release cannot be acquired, the clinician must claim the Psychotherapist/Patient privilege. The court will then have to override the privilege and request the records.
- Subpoena to Appear in Person: If a subpoena to appear in person is served to the treating clinician, the clinician, upon consultation with his/her supervisor must also claim the Psychotherapist/Patient privilege. The clinician must not respond to or talk to any court

representative, serving officer, or lawyer for any party, without the special written permission of the child's parent(s) (or Social Worker for Social Services). If a Mental Health Intern gets served with a subpoena, he/she should contact his/her supervisor immediately for a consultation.

#### **vii. On- Site Mental Health Consultation**

The Mental Health Clinical Supervisor and Comprehensive Services Assistant Managers facilitate and make referrals for psychological assessments for children having potential emotional or behavioral problems with written parental consent.

The Mental Health Clinical Supervisor and Comprehensive Services Assistant Managers utilize the Directory of County Mental Health Providers to make referrals when appropriate and work with parents to obtain information on available school resources and services in the area of mental health, locating placement for individual children including securing psychological services.

Parents and staff collaborate in the planning of all mental health and educational services.

The Mental Health Supervisor, clinical staff and Comprehensive Services Assistant Managers advise the site supervisor and educational staff on integrating mental health activities into the curriculum. Mental Health clinical staff collaborates with site supervisor and classroom teachers to implement strategies and plans related to social emotional curriculum. Periodic observation of children's behavior and classroom learning environment is performed. Family meetings are held to discuss the observations with education staff, parents and/or Comprehensive Services Managers.

The Mental Health Clinical Supervisor and clinical staff provide workshops to staff and parents on topics relating to child mental health, such as childhood depression, management of difficult childhood behaviors, stress management, recognition of child abuse, increasing children's self-esteem, and play therapy and positive parenting. Information is also provided to staff on identifying mental health needs, making mental health referrals and utilizing family meeting to facilitate a referral. The Mental Health Clinical Supervisor and clinical staff provide consultation at family meeting to discuss children who exhibit a typical behavior or emotional/behavioral needs.

#### **viii. Additional Mental Health Supports**

Staff and parent support group meetings are held to discuss child mental health parenting and caregiver issues and challenges. Family meetings are conducted a minimum of twice per year depending on the needs of the family.

## H. Strategies for Behavior Management

The teaching staff must utilize positive guidance techniques and developmentally appropriate practices in managing children’s behavior. Children respond differently to various intervention approaches, and have individual temperaments that staff must consider in behavior management. To help support positive guidance techniques, teachers will utilize the Early Childhood Teacher Self-Reflection Tool. Upon completion, teachers can continue to reflect on their own thoughts and teaching practices to support the classroom. In the fall, teachers will update and refresh their own self-reflection tool, as needed.

- At CSB any form of discipline or punishment that violates a child’s personal rights is not permitted.
- “Time out” for children is not accepted as a strategy for dealing with inappropriate behavior.
- CSB will not expel or unenroll any child due to behavior. A temporary suspension may be implemented as a last resort in extraordinary situations. In such cases, CSB will provide the necessary resources to the family to assist the child in returning to full participation in the program.
- Incidents that include challenging and/or unsafe behavior are: aggressiveness, defiance, unexpected extreme emotional outbursts, or other sudden changes in behavior.

To support a positive behavior development, CSB implements the following strategies:

**STRATEGY A-**Teaching staff implement best practices including CSB’s social-emotional curriculum for all children, Second Step.

**STRATEGY B-**Create Positive Guidance Plan with parent and site staff during a family meeting. If behavior continues, review and update the Individualized Positive Guidance Plan with parent and site staff in an additional family meeting.

**STRATEGY C-**When strategies A to B have not been successful; the Positive Guidance Policy Step Letter to Parents is implemented. Apply only when Strategies A and B have been implemented.

### 1. STRATEGY A-Implement Best Practices

Challenging or unsafe behavior is discouraged. The following strategies reflect best practices for responding to inappropriate behavior:

- Anticipate/eliminate potential problems
- Evaluate and adjust the environment
- Redirect child away from conflict or negative events to more positive activity
- Offer choices to child
- Assist child to learn logical and natural consequences of their actions
- Encourage respect for the feelings/right of others
- Encourage identification and healthy and socially acceptable ways to express emotion

- Encourage development of self-regulation and behavior control through positive reinforcement of prosocial behavior
- Maintain open communication with children’s care givers

Additional behavior management strategies include:

- Let children know what is expected and why – Inform children what the rules are, and the reasons for these rules. Let children help create classroom rules.
- Model and encourage expected behavior – Show children, with actions and words, what is expected. Praise children’s actions when appropriate.
- Respect children’s developing capacities – Ensure that expectations match/respect children’s developing capacities.
- Talk to children about their behavior on their level; listen and communicate caring concern about them as individuals.
- Review the classroom rules with the children or with an individual child and explain that they are important to keep everyone safe.
- Allow someone else to step in and help – If a teacher becomes frustrated, immediately ask another teacher/supervisor to help. (It is best to request another adult to take over until you can return to the classroom.)
- Observe/record behavior - especially recurring behavior – to determine factors involved in the behavior. Maintain a positive/loving attitude – Keep your sense of humor, do not focus on the difficult behavior. View the behavior and responses as opportunities to help children grow/learn.
- Discuss with children healthy ways to deal with anger, stress, and frustration.
- Invite the Education Manager to do an observation of the classroom and provide feedback in an effort to support the teachers work.
- Consider repeating a certain unit of the Second Step Curriculum that relates to the current concerns in the classroom.
- If little or no progress is made within two weeks of implementing these best practices, proceed to Strategy B. *However, if child demonstrates extreme, challenging or unsafe behavior, document outcome of the consultation with Education Manager in the child case notes section under the Positive Guidance category in CLOUDS. The education manager will assist in determining next steps.*

## 2. STRATEGY B - Positive Guidance Plan

When the above listed strategies are ineffective, the next step is for the Site Supervisor, with teacher support, to conduct a family meeting and develop an individualized Positive Guidance Plan (CSB134B). The Positive Guidance Plan, specifically areas 3 and 4 of the plan, will be created with the parent/family member during the family meeting. Steps include:

- Prior to the family meeting, consult with all key stakeholders
- Define the child’s strengths
- Define the child’s challenging/unsafe behavior concerns
- Partner with parent/caregiver through a mutual decision-making process to define how the family will be involved in guidance plan
- Develop strategies to redirect the behavior that include a timeline for behavior change,

classroom strategies and family involvement plans

- Develop strategies to reinforce the child’s positive behavior
- Discuss other resources if necessary. For example: referral for mental health services, referral to school district or other local support for assessment and services
- Set timelines for plan implementation and progress
- If little or no progress is made within two to four weeks of implementing the Positive Guidance Plan, notify your Assistant Director and proceed to Strategy C, Positive Guidance Policy Step Letter to Parents. *However, if child demonstrates extreme, challenging or unsafe behavior, document outcome of the consultation with Education Manager in the child case notes section under the Positive Guidance category in CLOUDS. The Education Manager will assist in determining next steps.*

### **3. STRATEGY C- Positive Guidance Policy Step Letter**

In compliance with Section #101223 of the Licensing Code, and in support of children’s right to be treated with dignity and respect, the following covers our philosophy and methods for handling behavior of young children. Examples of incidents that include challenging and/or unsafe behavior are aggressiveness, defiance, unexpected extreme emotional outbursts, or other sudden changes in behavior.

If a child continues to display inappropriate behavior and previous interventions (Strategies A and B) have proven ineffective, CSB staff will implement the following four step Positive Guidance Policy (After each step, staff and parents are required to sign that each step has occurred). Ensure that your Assistant Director is informed throughout the process:

STEP 1: If the child continues to show challenging or unsafe behavior, the parent will receive an injury/incident report. The Site Supervisor will meet with parent during a family meeting to review the Injury/Incident report, review the Positive Guidance Plan that was previously created, offer resources as needed to help support your child at home and school.

At the Family Meeting:

- Review and sign Injury/Accident report if not done previously.
- Review and sign step one of the Positive Guidance Policy Step Letter to Parents form (CSB521).
- Review the previously created Positive Guidance Plan.
- If not previously offered, provide parent resources and/or linkages to consultation.
- Discuss if additional resources are needed.

STEP 2: If the child continues to show challenging or unsafe behavior, the parent will receive an injury/incident report. The Site Supervisor will meet with parent for an additional family meeting to review the child’s Positive Guidance Plan and determine if changes or additional resources are needed. Referrals to a confidential consultation and support services will be offered.

At the Family Meeting:



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- Review and sign Injury/Accident report if not done previously.
- Review and sign step two of the Positive Guidance Policy Step Letter to Parents form. (CSB521)
- Review the previously created Positive Guidance Plan and provide resources and make adjustments as needed.
- Offer parent linkage to confidential consultation and support services

STEP 3: If the child continues to show challenging or unsafe behavior and the two previous steps are proving to be ineffective, the parent will receive an injury/incident report and additional strategies will be reviewed. Family support for the child in the classroom is now necessary. The Site Supervisor will immediately discuss the amount of family support needed during the day and how many days. An additional family meeting will be scheduled to discuss more permanent solutions.

At the Family Meeting:

- Review and sign the Injury/Accident report if not done previously.
- Review and sign step three of the Positive Guidance Policy Step Letter to Parents (CSB521)
- Discuss the family support in the classroom
- Discuss more permanent solutions, if needed

STEP 4: If the child continues to show challenging or unsafe behavior and the three previous steps are proving to be ineffective, the parent will receive an injury/incident report and a temporary suspension is necessary while additional supports are put in place. Educational materials will be given to the child to use at home during this time. CSB will support the family and child to return to the program as quickly as possible. Following the temporary suspension, and upon return to the classroom, an additional family meeting will be scheduled. Should the child continue to show challenging or unsafe behavior, CSB will support the family to transition to a program that better meets the child's needs. The length of the temporary suspension will be determined by the Site Supervisor and Assistant Director.

At the Family Meeting:

- Discuss transitioning the child back into the classroom
- Discuss the possible transition to program that better meets the child's needs

#### **4. Behavior Management Tracking**

- A running log is kept to strengthen the tracking ability by SS, AD, and CSB of each child's challenging behaviors and to ensure staff and children receive needed support timely. The log can be found on the Document Library under Education Documents and Resources.
- SS maintains log daily as needed in addition to making detailed case notes in child's file in CLOUDS.
- SS analyzes the log regularly for trends and checks that a *tiered approach* to address challenging behaviors was followed in accordance with "Strategies for Behavior Management" protocols, and address accordingly.
- SS submits the running log to their AD monthly with their monthly report.

- AD reviews logs monthly for trends and to ensure adherence with protocols, and submits log quarterly to Division Manager.
- Division Manger reviews quarterly log for trends and ensure adherence with protocols, and submits log quarterly to Bureau Director.

## **5. Family Meeting**

### **i. Description**

Family Meeting is a collaborative process involving parents, CSB staff, and other professionals for the purpose of developing, implementing, coordinating, monitoring and evaluating available and/or required services to meet children and family's needs. Open communication and promotion of the family and child's strengths are key elements to the Family Meeting process and essential to quality outcomes.

Family Meetings are not specific to support only children with disabilities or with social emotional behaviors but as comprehensive way of communicating with families as needs or concerns arise. These meetings are conducted to exchange information and to mutually develop the most appropriate action plan to support the family and the child.

These plans may include, but are not limited to, development of a Strength Building-Family Partnership Agreement (SB-FPA) with the parent(s), home visits, referrals to outside agencies or professionals, requests for additional information from outside agencies or professionals, and classroom placement decisions or modifications.

### **ii. Family Meeting Purpose**

Family Meeting at CSB is strengths-based; enhances access to care and improves the continuity and efficiency of services. Depending on the specific setting and location, Comprehensive Services Managers are responsible for a variety of tasks, ranging from linking clients to services to providing the services themselves. Other core functions include outreach to engage clients in services, assess individual's needs, and arrange requisite support services (such as housing, benefit programs, job training, and advocating for parents rights and entitlements).

Family meetings can be called any time the need arises. However, to provide continuity of care to children receiving MH or disability interventions services, family meetings are conducted as a minimum twice a year.

### **iii. Family Meeting Facilitator Role**

A family meeting facilitator serves as a liaison between the family and the service providers (other professional services including classroom staff. The case manager could meet with parents individually or as a multidisciplinary team; often at their respective sites, via telephone, or even in a casual environment, all for the purpose of enhancing communication between the present parties.

Family Meetings are best offered in a climate that allows direct communication between the family meeting facilitator, the parent, and appropriate program staff in order to optimize the outcome for all concerned. These meetings are always facilitated in a manner that is sensitive to the parent, child and family's needs, allowing the parent maximum opportunity for expression of their concerns, and help the parent develop advocacy skills. All concerns, agreements and process of the meeting are documented in

the Family Meeting Report (CSB514). At the end of the family meeting, necessary and appropriate resources are provided, as well as a copy of meeting decisions such as “Actions and Responsibilities” that parents and staff will implement to support the child. To support monolingual families, efforts are made to provide a prompt written interpretation of meeting Actions and Responsibilities.

Family meeting facilitators are knowledgeable about a variety of community services providers and are able to identify those providers and facilities that can best serve the family’s needs throughout the continuum of services, while ensuring that available resources are being used in a timely and effective manner for families. For example, parents in need of health-related support and services receive assistance in navigating the healthcare system and working with other outside agencies.

## I. Family Meeting Team Members

It is essential not to overwhelm parents by inviting too many individuals to the meeting or having too many agenda items to discuss. Many issues being discussed at these meetings are complicated and can be emotionally difficult for parents. It is important to encourage the parent to bring an advocate if they feel it will help them better understand the information being discussed, or make important decisions. While starting the meeting, it is recommended to explain the meeting purpose and go over staff introductions including their roles and responsibilities, in an effort for the family to meet the staff and understand their roles.

### 1. The Family Meeting Team may include:

- Parent/s
- Teachers
- Site Supervisors
- Education Manager
- Disabilities Manager
- Mental Health Supervisor/Clinician
- Content Area Managers
- Comprehensive Services Assistant Manager
- Other community professionals such as a Pediatric Nurse, Psychologist, Speech Therapist, Resource Specialist, CFS Child Welfare/Social Worker, Public Health Nurse, Special Education Teacher, and/or Mental Health professional

### 2. Family Meeting Team Responsibilities as applicable to each meeting:

- Review staff introductions and purpose of the meeting
- To respect the civil rights of the parents, children and families involved.
- To provide a confidential and safe place for the child/family information to be discussed.
- To ensure that the child/family’s private information is protected and managed in accordance with all state and federal laws.
- To review and discuss assessment, evaluation results, placement and outcomes for children.
- Review and discuss appropriate placement or action to be taken.

- Establish time lines and types of service delivery.
- Develop and implement Strength Building-Family Partnership Agreements with parents.
- Meet on an ongoing basis to review and discuss progress of child.
- Review and evaluate Individualized Positive Guidance Plan.
- Ensure that a family-focused approach is taken to ensure service delivery
- Develop and implementing transition plans for children.
- Ensure that strengths of children and families are encouraged and considered in identifying expected outcomes for children.
- Ensure that family priorities, concerns, and resources are recognized and are part of the Strength Building-Family Partnership Agreement.
- Ensure that Actions and responsibilities are well documented and shared with the family.

**3. Family Meeting process:**

- Concerns are reported to the Site Supervisor
- Prior to the family meeting the Site Supervisors and teachers review the child's information in CLOUDS and file. Notes will be taken but will not be limited to health, dental, nutrition, screening results, disabilities, mental health, family services and parent involvement. All confidential mental health or other health records are stored in accordance with HIPAA.
- After files have been reviewed and the Site Supervisor considers the need for Family Meeting, the SS will inform the Comprehensive Services unit about the concerns.
- The Comprehensive Services Assistant Managers with the support of the SS arranges for a family meeting with the families to address concerns.
- Meeting team participation and meeting notes will be documented on CSB905 and CSB 514
- Meeting decisions such as actions and responsibilities will be shared so parent and staff will implement the items for follow up.

**4. Referral for Inappropriate Behavior:**

If a teacher is concerned about a child's consistent display of inappropriate behavior, the Site Supervisor should be informed.

The Site Supervisor, teaching staff, and Education Manager will observe the child in the classroom and complete documentation on their observations for use at a Family Meeting. A Family Meeting Team meeting must be scheduled to plan strategies on how to effectively meet the child's needs.

**5. The Site Supervisor is responsible for:**

- Requesting assistance from Education Managers to observe the classroom.
- Reviewing classroom observations and Individualized Positive Guidance Plan with the teaching staff prior to a Family Meeting Team.
- Discussing strategies/intervention techniques with teaching staff prior to the Family Meeting Team.

- Coordinating meeting with Comprehensive Services staff so key stakeholders could attend (CSB staff as well as any other professional involved with the child/family).
- During the Family Meeting, discuss intervention techniques and strategies to support the child's positive behavior. As needed, recommend mental health consultation/referral or referral for further evaluations under Local Education Areas LEAs.
- Support the team following the Family Meeting agreements.

**6. If Applicable, the Nutritionist and Health Services Manager are responsible for:**

- Gathering relevant information before the meeting.
- Writing nutritional plans for children and families

**7. The Comprehensive Services Manager/Assistant Manager will be responsible for:**

Gathering relevant information before the meeting: Inviting all applicable parties or individual advocates working on behalf of or providing services for child/parent (with parent consent), including but not limited to legal guardian, CFS Worker, Speech/language Therapist, Occupation Therapist, and Mental Health Therapist.

- Coordinating and gathering relevant information before the meeting. Including file review and classroom observations.
  - Creating an agenda to provide to all participants and keeping the meeting on time/track and have all participants sign-in.
  - Facilitating the meeting by supporting positive outcomes, facilitating referral as needed, sharing next step including roles and responsibility of the participants.
  - Keeping meeting documentation on child's file: Meeting Signing Sheet (CSB-905), Family Meeting (CSB 514) and if applicable consent for referrals (CSB 501).
  - Schedule a follow up meeting if needed to track team meeting agreement progress.

## **J. Child Abuse Reporting Policies**

**1. All CSB and Delegates Agencies will adhere to the following policies:**

Children who are identified by Child family Services (CFS) as at-risk will be given the highest priority for intervention and placement in the school program; and make every effort to retain abused and neglected children and/or admit allegedly abused and neglected children referred by Child Protective Services (if the families are income-eligible)

- CSB and Delegates agencies will maintain secure and confidential records regarding child abuse and neglect in accordance with state laws and Head Start Performance Standards.
- All CSB, Sub-contractors, and Delegate Agency staff must adhere to Mandated Reporters Law- Child Abuse and Neglect Reporting Act as delineated under the Penal Code Section 11164- 11174.3

**2. Child Abuse and Neglect Reporting Act- Penal Code Section 11164-11174.3 (Amended**

***Effective January 1, 2016.)***

**11164. (b)** “The intent and purpose of this article is to protect children from abuse and neglect” and “to prevent psychological harm to the child victim”.

**11164.** As used in this article “child” means a person under the age of 18 years.

**11165.2 -11165.6** These articles include all instances of child abuse such as: neglect, physical, sexual and emotional abuse.

**11166. (a)** a mandated reporter shall make a report to an agency specified in Section **11165.9**, whenever the mandated reporter, in his or her professional capacity or within the scope of his or her employment, has knowledge of or observes a child whom the mandated reporter knows or reasonably suspects has been the victim of child abuse or neglect. The mandated reporter shall make an initial report by telephone to the agency immediately or as soon as is practicably possible, and shall prepare and send, fax, or electronically transmit a written follow up report within 36 hours of receiving the information concerning the incident.

In compliance with penal code **11165.9** CSB, Sub-contractors and Delegate agency staff report reasonable suspect of abuse to the county Welfare department.

**11166. (1)** For purposes of this article, “reasonable suspicion” means that it is objectively reasonable for a person to entertain a suspicion. “Reasonable suspicion” does not require certainty that child abuse or neglect has occurred nor does it require a specific medical indication of child abuse or neglect; any “reasonable suspicion” is sufficient.

**11166. (2)** The agency shall be notified and a report shall be prepared and sent, faxed, or electronically transmitted even if the child has expired, regardless of whether or not the possible abuse was a factor contributing to the death, and even if suspected child abuse was discovered during an autopsy.

**11166. (c)** A mandated reporter who fails to report an incident of known or reasonably suspected child abuse or neglect as required by this section is guilty of a misdemeanor punishable by up to six months confinement in a county jail or by a fine of one thousand dollars (\$1,000) or by both that imprisonment and fine.

**11166. (h)** When two or more persons, who are required to report, jointly have knowledge of a known or suspected instance of child abuse or neglect, and when there is agreement among them, the telephone report may be made by a member of the team selected by mutual agreement and a single report may be made and signed by the selected member of the reporting team. Any member who has knowledge that the member designated to report has failed to do so shall thereafter make the report.

**11166. (i) (1)** The reporting duties under this section are individual, and no supervisor or administrator may impede or inhibit the reporting duties, and no person making a report shall be subject to any sanction for making the report. However, internal procedures to facilitate reporting and apprise supervisors and administrators of reports may be established provided that they are not inconsistent with this article.

**11166.01** Subdivision (c) of Section 11166, any mandated reporter who willfully fails to report abuse or neglect, or any person who impedes or inhibits a report of abuse or neglect, in violation of this article, where that abuse or neglect results in death or great bodily injury, shall be punished by not more than one year in a county jail, by a fine of not more than five thousand dollars (\$5,000), or by both that fine and imprisonment. *\*(Amended. Effective January 1, 2007.)*

### **3. Procedures for Reporting Suspected child Abuse**

- i. CSB staff in all divisions MUST report suspected child abuse or neglect IF:

- They have knowledge of it, or
  - They have observed it, or
  - They have reasonable suspicion of its occurrence or
  - They receive second-hand information of the suspected abuse
- ii. The report must be made as soon as the suspected abuse is noticed. Report of child abuse takes priority over other matters. In Contra Costa County, it is the responsibility of the local Welfare Department and the police to assess whether or not abuse has occurred.
- iii. CSB staff is encouraged to consult with their immediate supervisor for guidance and support prior to reporting. Staff may also call the Mental Health Unit for additional support at the following number: 925-890-7540 or 925-305-3564. However, reporting duties under this section are individual and no supervisor or administrator may impede or inhibit such reporting duties and no person reporting shall be subject to any sanction for making such report.
- iv. For the purposes of reporting, staff is encouraged to review the child’s file and data entered in CLOUDS. Particular attention should be made to Health History, physical exam, and Strength Building-Family Partnership Agreement (to become familiar with any details that may provide further explanation for the incident prompting suspicion of abuse or neglect).
- v. Reporting suspect of child abuse:
- In accordance with mandated reporting responsibilities and laws call:

Contra Costa Children & Family (Protective) Services Hotline Numbers	Hot Line (24 hours) 877-881-1116
	West 510-374-3324
	Central 925-646-1680
	East 925-427-8311

- Complete a “Suspected Child Abuse Report” (CSB-510 or Form STAR SS 8572) within 36 hours after the report was made. The Person Making the report must sign the written report and provide the report to their site supervisor for filing.
- Mail or Fax the completed report (CSB 510 or Form STAR SS 8572) to:  
 Children and Family Services  
 400 Ellinwood Way  
 Concord, Ca 94523  
 Fax: 925-602-6981

Site Supervisor is responsible for:

- Maintaining and storing all CFS reports in a locked confidential file, which is separate from the child’s cumulative/educational file.
- Communicating with cluster AD and completing an Unusual Incident

Report to Community Care Licensing within 24 hours of the initial CFS call.

**vi. Feedback to Reporter:**

- A CFS investigation will be open. CSB staff is encouraged to participate in the process.
- After investigation is completed, the CFS will inform the mandated report of the result of the investigation. At the end, the reporting person's name will be kept confidential. Unless, legal actions are taken when the name will be revealed and the person might be called as a witness.

**vii. CSB Mental Health staff is responsible for:**

- Informing and consulting with their clinical supervisor.
- Providing a copy of the CFS report to the Mental Health Clerk and filing a report in the child's mental health file.
- Actively collaborating with Children and Family Services to coordinate delivery of necessary services to children and families to support family preservation, reunification and child/family mental health.

**viii. The Comprehensive Services Managers, Health, Disabilities-Mental Health and Family Engagement will coordinate activities regarding the issues of child abuse/neglect. Their responsibilities are to:**

- Provide training and consultation for staff and parents regarding identification/reporting of child abuse. The purpose of this training will be to educate participants that the abusing parents or caretakers need help and support - not punishment.
- Provide support and educational services to parents as a preventive measure to reduce the likelihood of an additional abuse/neglect occurrence.
- Provide training to parents and staff yearly on the significant aspects of abuse/neglect. Comprehensive Services Disabilities/Mental Health Manager will maintain documentation of such training.
- Establish liaison with Child Protective Services (which has legal responsibility for receiving reports of abuse and neglect).
- Collaborate with Human Resources to ensure that program staff is properly informed/trained on procedures for identifying/reporting suspected child abuse and neglect.
- Collaborate with Human Resources to ensure there is a signed document in each CSB program personnel file acknowledging that the person has been trained regarding child abuse and neglect.
- Ensure that information/training is provided for parents and staff on the legal requirements regarding reporting of abuse/neglect.
- Provide written explanation of the legal requirements of reporting (given to every parent when he/she enrolls in the program). Obtain a signed acknowledgment from the parent that he/she has received and understands



- the information. (CSB-360)
- Review annually child abuse reporting laws and update all employees on new requirements. Obtain signed Acknowledgement of review from each staff. (CSB- 508 )
- Ensure that parents are provided ongoing educational opportunities to learn about positive parenting and child abuse prevention techniques.

## Sub Part II. Child Nutrition

### A. General Description-Identifying Children’s Needs

A comprehensive system of services are implemented to help prevent health problems and intervene promptly when they exist. Comprehensive services are responsible for identifying cases for nutrition referral, follow-up and arranging family meetings.

### B. Nutrition Referral

#### 1. Comprehensive Services Assistant Managers and Clerks perform the following:

- Review medical records, health histories and growth assessments.
- Identify nutrition risks following the guidelines listed below in the table.
- Initiate nutrition referral in CLOUDS.
- Update existing referrals in CLOUDS.
- Use the “What To Say and What To Do” protocol (see CSB Resource Center > Document Library > Comprehensive Services Documents and Training Resources > Nutrition) based on the specific nutrition risk when speaking with parents.
- Complete WIC/Food Stamp screening form with parent, and provide other nutrition resources as appropriate (weight, iron-rich foods, picky eater, lead poisoning, and other areas of concern).
- Encourage parents to attend nutrition presentations, such as at parent meetings.
- Document in CLOUDS all actions/services provided to parent.
- Initial and date all documentation.

#### 2. Guidelines for Identification of Nutritional Risk:

##### i. Iron Deficiency Anemia – Criteria

Criteria for Providing Nutrition Information to Child’s Parent			
Age / Years	Sex	Hgb	Hct
0 to 5	Both	11.0 – 11.5	33.0 – 34.0
Criteria for Initiating Nutrition Referral and MD Referral			
Age / Years	Sex	Hgb	Hct
0 to 5	Both	10.9 or less	32.9 or less

##### ii. Diabetes

- If child has been diagnosed with diabetes, obtain “Child Diabetes Care Plan” from child’s MD.
- If child requires blood glucose testing or glucagon for emergency life saving measure, Community Care Licensing requirements must be met prior to enrollment.

### iii. Underweight

Input child’s height and weight under Growth Assessment in CLOUDS to determine nutritional status. Refer any child with considerable underweight status.

If child’s status is slightly underweight and there is a family history of small stature, a nutrition referral should not be made. If CLOUDS triggers an automatic referral, click “no referral needed,” and explain why under comments, unless there are additional concerns such as:

- Failure to thrive
- Developmental disabilities
- Anemia

For infants, initiate nutrition referral if following values are determined after plotting on the growth chart:

- Weight-for-age < 3-5%
- Weight-for-length < 5%
- Head circumference < 5%

### iv. Overweight & Obese

To effectively manage children’s nutritional concerns follow-up must be monitored through resolution of the problem. Assigned staff is responsible for the following.

- Comprehensive Services Clerks:
  - Hand out resources and enter resource titles in CLOUDS
  - Follow steps as indicated on the “What To Say and What To Do” protocol (see CSB Resource Center > Document Library > Comprehensive Services Documents and Training Resources > Nutrition).
- Comprehensive Services Assistant Managers:
  - Monitor to make sure follow-up is completed.
- Site Supervisor and Partner Agency Staff:
  - Obtain updated list of Overweight and Obese children from Comprehensive Services Clerks.
- Teachers:
  - Model correct portion sizes of food for children, i.e., teachers do not serve themselves adult sized portions.
  - Monitor children's food consumption during meal time and assist children in making healthier choices if needed.
  - If a child is extremely underweight or obese, staff will follow policies and

procedures related to reporting suspected child abuse and neglect. Nutrition Manager and Health Services Managers are available for consultation as needed.

#### **v. Picky Eaters**

When picky eaters are identified, Comprehensive Services Assistant Managers and/or Clerks are responsible for providing the nutrition handout to parents, and for documenting actions and parent conversations in CLOUDS in the comment section under Health History. No referral is needed.

However, if child is identified as a picky eater and there is another nutrition issue then a referral is needed.

- **Comprehensive Services Clerks:** Inform CSAM that a family meeting is needed due to child being a picky eater and having another nutrition issue such as obesity, overweight, or anemia.
- **Comprehensive Services Assistant Manager:** Schedules family meeting with Nutrition Manager and any other managers who may be needed.
- **Site Supervisors:** Inform CSAM so that a family meeting may be called, once site supervisor is aware that child is a picky eater and has another nutrition issue such as obesity, overweight or anemia.
- **Teachers:** Inform Site Supervisor, Comprehensive Services clerks or CSAMs.

#### **vi. Tube Feeding**

If child requires gastrostomy-tube care Community Care Licensing requirements must be met prior to enrollment. A family meeting takes place prior to Community Care Licensing notification and prior to enrollment into a CSB program.

#### **vii. Special Meals and/or Accommodations**

If dietary modifications are indicated based on a child's medical or special dietary needs and/or religious/personal/cultural belief, the Nutrition Manager will modify or supplement the child's diet on a case-by-case basis, in consultation with parents and the child's medical provider.

#### **viii. CSB is a Peanut-Free Program**

Each CSB center is designated a Peanut-Free Zone. CSB does not serve foods that contain peanuts due to their increasing health risk for young children. Peanuts are currently the leading food-related cause of severe life-threatening allergic reactions.

#### **ix. Food Allergies and Special Diets**

When food allergies and special diets are identified, the following will apply to Comprehensive Services Assistant Managers, Clerks, Site Supervisors, and Site-Based Clerks:

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- Identify food allergy/intolerance or need for special diet if any.
- Immediately give parent a “Medical Statement to Request Special Meals and/or Accommodations” (CSB401). This form is to be used only for food allergies and/or intolerances, and is not complete without the designated healthcare provider’s signature.
  - Use "Request for Special Meals Due to Cultural, Religious, and/or Personal Beliefs" form for non-medical special diets (CSB403). This form is not to be used for personal food preferences.
  - Submit completed forms to Nutrition Office two business days prior to child’s first day. Original to be kept in child’s file, with a copy sent to Nutrition Office.
  - All parties will communicate directly with others involved to keep them informed
- 3. Schedule family meeting before child starts in the program if food allergy is life-threatening or if several different food items are restricted so that meal pattern becomes unbalanced.

Site Supervisor or assigned staff must:

- Check latest meal modification to confirm accuracy.
- Post meal modification weekly in each centers kitchen and classrooms, with names covered for privacy.
- Review meal modifications and address any questions to the Nutrition Office.
- Immediately inform the Nutrition Office when children who need meals modified have left the program or have moved to another classroom.

Teaching staff must:

- Check latest meal modification daily to confirm accurate food preparation and delivery.

Comprehensive Services Assistant Manager must:

- Write family meeting case notes in CLOUDS so that all relevant parties will be informed.

Nutrition Clerk is responsible for:

- Adding and maintaining each center’s records of children in the Food Allergy or Food Restriction List.
- Forwarding copy of list to center.
- Updating list as information is received from Site Supervisor or Comprehensive Services for children who are enrolled or dropped from program.
- Updating and keeping Meal Modifications on file.
- Sends out weekly Meal Modifications to centers.

The Nutrition Manager is responsible for making any food modifications/substitutions.

When a recommended food item is not available:

- The Nutrition Manager will be immediately notified by FS Worker III, Food Operations Supervisor, or AD. The Nutrition Manager will provide an alternate food substitute.

- If the Nutrition Manager is not available, the Food Operations Supervisor will check past meal modifications to determine appropriate substitution. The Food Operations Supervisor will inform kitchen staff of change.
- The Food Operations Supervisor will also inform the Nutrition Manager when substitutions have been made.
- If the Food Operations Supervisor is also not available, the Supervising AD will check past meal modifications to determine appropriate substitution. The Supervising AD will then inform kitchen staff of change.
- The Supervising AD will also inform the Food Operations Supervisor and Nutrition Manager when substitutions have been made.
- The Nutrition Office will inform Site Supervisor or assigned staff of food substitutes.
- Kitchen staff is not to make any substitutions without approval from Nutrition Manager, Food Operations Supervisor, or Supervising AD.

#### Heights and Weights:

As part of nutrition screening, heights and weights must be taken regularly by designated staff to determine the nutritional status of each child.

The Child's Teacher is responsible for:

- Taking heights and weights every March and November of all preschool children currently enrolled.
- Following height and weight protocol when filling out Height & Weight Log (CSB430).
- Using Height & Weight Log to monitor and ensure healthy growth of all children.
- Comprehensive Services Clerks are responsible for:
  - Taking heights and weights of all newly enrolled preschool children within their first 30 days of enrollment.
  - Promptly recording heights and weights in CLOUDS from the Height & Weight Log completed by the teachers.
  - Returning Height & Weight Log to Site Supervisors for grantee and Site Directors for the partners.
  - Plotting Early Head Start length-for-age, weight-for-age, and head circumference-for-age on growth chart whenever information is available on well baby exam based on periodicity schedule.

### C. Child Adult Care Food Program (CACFP)

#### 1. General Description

To ensure our participation in the USDA Child Nutrition Program, the following must be accomplished by assigned staff:

- The Food Operations Supervisor (or designee) will be a second eye in checking to ensure accuracy after receiving original enrollment rosters from site supervisor (or designee).

The Nutrition Clerk or designee is responsible for:

- Verifying in CLOUDS that the current enrollment rosters are correct. The clerk will send the enrollment roster to site supervisors for verification.

The Site Supervisor or designee is responsible for ensuring enrollment totals are correctly calculated and entered into the claim for reimbursement:

- Completing CACFP form (s) before child attends school, or upon enrollment.
- Completing CACFP enrollment document.
- Filling in days and hours child attends and types of meals served to child while in attendance.
- Ensuring enrollment document is signed and dated by the parent.
- Parent's completion of Meal Benefit form for child(ren) being enrolled, and for signing Meal Benefit form.
- Determining eligibility using current eligibility guidelines.
- Collecting enrollment document and meal benefit form from July 1st to October 31st.
- Sending CACFP form (s) and CACFP enrollment document to the Nutrition Office.
- Checking the enrollment roster to make sure the correct entry of names and numbers of children are on the list, i.e., the names and numbers of the children currently enrolled has been certified.
  - Sending checked enrollment roster to the Nutrition Clerk by the expected due date.
- Completing Enrollment Eligibility Roster each month, which includes:
  - Listing new children for the current month.
  - Determining whether child is free, reduced or base.
  - Marking whether child is in Head Start.
  - Listing child's certification date.
  - Listing children who have dropped for the current month and the drop dates.
  - Sending monthly Enrollment Eligibility Roster to Nutrition Office by the 5th of each month.

## **2. Nondiscrimination in Child Adult Care Food Program Services**

Community Services Bureau Head Start will comply with Title VI and Title VII of the Civil Rights Act of 1964. Title XI of the Educational Amendments of 1972, Title II of the Americans with Disabilities Act of 1990 and Section 504 of the Rehabilitation Act of 1973.

Each center will prominently display the And Justice for All poster. Staff will receive annual training on Civil Rights requirements and on handling Civil Rights Complaints. Nutrition Office will monitor and oversee training.

The most current version of the nondiscrimination statement will be used on all CSB forms of communication made available to the public regarding program availability, except for menus. The appropriate nondiscrimination statement is to be used and it must be prominently displayed on the document and be the same text size.

The short statement “This institution is an equal opportunity provider.” can be used on flyers, posters, or documents that are one page by nature, in a font size no smaller than the text size.

#### **D. Child Adult Care Food Program (CACFP) Monitoring**

To ensure compliance and meet CACFP requirements, all grantee sites must be monitored three times a year.

Nutrition Manager's responsibility:

- Unannounced monitoring of mealtimes.
- Conducting CACFP Facility Reviews at each center three times per academic year.
- Using CACFP Centers Facility Review form (see Form CSB440).
- Reporting findings to Site Supervisor or designee immediately after monitoring.
- Sending findings to the Assistant Directors.
- Filing CACFP Center Monitoring Review Report form at Nutrition Office.
- Following up to confirm completion of corrective action within 60 days of findings.
- Completing CACFP 5-day reconciliation to ensure accuracy of meal claims by each site.

Site Supervisors responsibility:

- Implementing corrective actions and/or responding to monitoring report within 2 weeks.
- Sending the Nutrition Manger documentation of the corrective action plan and date of completion, e.g. Individual/Small Group Conference form or agenda and sign-in sheet for verification of corrective action completion.
- Writing corrective action plan based on recent findings.

### **Sub Part III. Child Health and Safety**

#### **A. Daily Health Inspection**

The teacher is mandated by Community Care Licensing to perform a daily health check of each child. The daily health check is performed when greeting the child and parent as they arrive. Parents are requested to remain present while the teacher performs this assessment. The Daily Health Inspection is a head-to-toe check of emotional and physical well-being. This is an effective tool to develop a baseline of what is normal for each child. This exercise helps the teaching staff reduce the spread of illness and establish rapport with the child and parent each day. It is important that this health check be conducted in the form of a greeting and that no invasive inspection, such as lifting clothing, or discussing findings out loud in front of others, should take place. For preschool classrooms, teaching staff will complete in CLOUDS use the Daily Health Check log (CSB230) to document completion of the Health Check for each child in attendance. For infants, the daily health inspection includes a diaper change and is documented on the Daily Communication Form (CSB155). Teachers must also observe the child throughout the day.

To complete a daily health inspection, the teacher will do the following:

1. Listen: Greet the child and parent.

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- Ask child the following question: “How are you today?”
  - Ask parent the following questions: “How’s (name of child)?”
2. “Was there anything different last night?”
  3. “How did he/she sleep?”
  4. Listen to what the child and parent tell you about how the child is feeling. If the child can talk, is he/she complaining of anything? Is he/she hoarse or wheezing?
  5. Look: Get down to the child’s level so you can see him/her clearly. Observe signs of health or illness:
    - General appearance (e.g., comfort, mood, behavior, and activity level)
    - Is the child’s behavior unusual for this time of day?
    - Is the child clinging to the parent, acting cranky, crying, or fussing?
    - Does he/she appear listless, in pain, or have difficulty moving?
    - Is the child coughing, breathing fast, or having difficulty breathing?
    - Does the child look pale or flushed?
    - Do you see a rash, sores, swelling, or bruising?
    - Is the child scratching his/her skin or scalp?
    - Do the child’s eyes look red, crusty, goopy, or watery?
    - Is there a runny nose?
    - Is he/she pulling at his ears?
    - Are there mouth sores, excessive drooling, or difficulty swallowing?
  6. Feel: Gently run the back of your hand over the child’s cheek, forehead, or neck.
    - Does the child feel unusually warm, or cold and clammy?
    - Does the skin feel bumpy?
  7. Smell: Be aware of unusual odors.
    - Does the child’s breath smell foul or fruity?
    - Is there an unusual or foul smell to the child’s stools?
    - Pay particular attention to a child who has been absent or exposed to contagious disease.

After doing the health check, teacher must now use findings to determine if the child looks healthy or sick. Use this chart to identify signs of health and illness:

	Looking Healthy	Looking Sick
General Appearance	Comfortable Cheerful, responsive Active, playing Behavior appropriate for child and time of day	Excessive crying, clinginess, fussiness Doubled over in pain, unable to move Listless, lethargic, unresponsive No appetite Vomiting, diarrhea



Breathing	Breathing slowly Relaxed Quiet	Breathing fast Difficulty breathing Sucking in around ribs Flaring nostrils Persistent Cough Wheezing
Skin	Normal skin color and texture for child Normal skin temperature No rashes, sores, swelling, or bruising No scratching at skin or scalp	Pale, grayish, flushed, yellowish Hot or cold and clammy skin Skin rash, sores, swelling or bruising Scratching at skin or scalp Skin doesn't spring back when pinched
Eyes, nose, ears, and mouth	Eyes bright and clear Nose clean Ears clean Mouth without sores, swallowing comfortably	Eyes swollen, red, crusty, goopy, watery, yellowish, or sunken Nose congested or runny Ears draining pus or blood Pulling at ears Mouth or lips with sores, excessive drooling, difficulty swallowing
Odors	No odor or normal odor for child	Breath smells foul or fruity Stool smells foul

## B. Hand Washing

Hand washing is the single most important routine in disease prevention. Both children and staff are required to wash hands upon arriving to work or school, before eating, before/after preparing or serving food, and after outdoor play, after wiping noses or using the bathroom, after handling animals/pets, before and after medication administration, and before and after gloving.

All adults and children in the classroom should follow the procedures for proper hand washing:

- Use soap and running water
- Scrub hands vigorously for at least 20 seconds
- Wash all surfaces, including:
  - Backs of hands
  - Wrists
  - Between fingers
  - Under fingernails
  - Under and around rings

- Rinse well
- Dry hands with a paper towel
- Turn off water using paper towel instead of bare hands

### C. Infection Control in the Classroom

In addition to Standard Precautions, the following measures are recommended for infection control in the classroom. It is the teacher's responsibility to insure that simple routine practices which reduce disease risks in the group setting are implemented in the classroom. These practices include:

- Hand washing
- General environmental sanitation
- Sanitary food service
- Good personal hygiene
- Careful diapering procedures
- Prompt exclusion of children and adults who have signs and symptoms of communicable disease
- Placement of cribs at least 3 feet apart and cots at least 18" apart

#### 1. Hygiene – Standard Precautions

##### i. Training

All teachers, site supervisors, managers and food service staff will be trained annually on food sanitation and safety. At least one employee in the Central Kitchen must be trained and must hold a current Food Safety Manager certificate.

##### ii. Tuberculosis (TB) Tests/SB 792 Immunization Requirements

Licensing requires that proof of a negative TB test or chest x-ray of staff and volunteers (except student volunteers under the age of 18) must be kept in the center Licensing Folder. Resources for obtaining a TB test are available for parents and other volunteers in need. All teachers and volunteers supervising children must comply with immunization requirements of SB 792. Volunteer immunization records will be kept in the Volunteer Binder on site. Please refer to the Volunteer Policy under Human Resources of the Policies and Procedures for more information on CSB Volunteer Policy.

##### iii. Standard Precautions

Precautions should be used at all times to protect staff and volunteers from the risk of being exposed to blood, fecal material, vomit, urine, or other potentially infectious materials.

CSB Standard Precautions procedures apply to all program staff and volunteers maximize worker protection from the spread of communicable disease resulting from occupational exposures to blood or other potentially infectious materials. Staff will take the same precautions (hand washing, use of gloves, disinfecting, and other safety measures) when dealing with the blood or body fluids of all children and adults, whether or not they appear sick.

CSB supplies Blood Borne Pathogen Kits in each classroom to ensure staff has access to appropriate

standard precaution personal protective equipment including gloves, aprons, mouthpieces for CPR, etc. Blood Borne Pathogen Kits can be located in the classroom by Bloodborne Pathogen Kit signage and will be replaced immediately after a single use. The program will ensure that all program staff receives training in the use of this equipment.

CSB trains staff in standard precautions through annual trainings and as a function of the American Red Cross First Aid certification course. American Red Cross First Aid re-certification is required every two years.

Anyone who has questions regarding the appropriate use of this protective equipment should call the Comprehensive Services Health Manager. If personal protective equipment becomes damaged or lost, ask for a replacement immediately.

## **2. Diapering and Toileting Procedure**

### **i. Description**

Since diapering and toileting are every day procedures for staff, and are a way that infectious diseases can be spread, it is extremely important that proper techniques be used at all times. It should also be noted that no child may be denied the opportunity to participate in any program on the basis of toilet training. The program does not make successful toilet training a condition of enrollment.

The center staff must ensure that there are sufficient changes of clothing and diapers. Each child's clothing and/or diapers must be changed as often as necessary to ensure that the child is clean and dry at all times.

### **ii. Diapering**

Proper Diapering Procedure

- Get organized. Assemble supplies in the changing area within reach, (disposable diaper, wipes, gloves, non-absorbent paper liner, clean clothing and plastic bag if needed). Cover the entire changing surface or table with paper. Wash hands thoroughly with soap and warm running water.
- Place child on paper covered changing surface or table. Never leave child unattended during diapering processes.
- Remove child's clothing and put soiled clothing aside. Put on gloves using posted procedure.
- Unfasten diaper and leave soiled diaper under child. Lift the child's legs and use disposable wipes to clean skin creases, genitalia, and bottom. Thoroughly as needed, wipe front to back using a clean wipe each time. Place used wipes in dirty diaper.
- Remove soiled diaper. Fold diaper inward and place in covered, hands-free, plastic-lined container. Fold back paper liner if a clean surface is needed. Remove gloves.
- Clean your hands with a disposable wipe and then clean the child's hands with another fresh wipe.
- Put clean diaper on child. (Put ointment provided by parents following CSB Policies and Procedures for over-the-counter medication.)
- Dress the child. Change the child's clothing if wet or soiled.

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- Wash the child's hands with soap and water. Put child safely in supervised area.
- Clean and sanitize the changing surface or table. Throw away the paper liner in covered, hands-free, plastic lined container. Clean any visible soil with detergent and water. Wet the entire changing surface with sanitizing solution.
- Wash your hands with soap and water.

**iii. Toileting**

The following procedure should be followed when toileting a child:

- Have all materials at hand before starting procedures.
- Never leave a child unattended; visual supervision is required.
- Have child sit on potty, but never longer than 5 minutes.
- After child has finished, teach child how to wipe self from front to back.
- Before child leaves bathroom, the child is to wash hands properly.
- Staff member washes hands when done.

**D. Napping Policy**

To promote safe sleep practices and reduce the risk of Sudden Infant Death Syndrome (SIDS):

- Infants, unless otherwise ordered by the physician, are placed on their backs to sleep on a firm surface manufactured for sale as infant sleeping equipment that meets the standards of the United States Consumers Product Safety Commission.
- Pillows, quilts, comforters, sheepskins, stuffed toys, and other soft items are not allowed in cribs or rest equipment.
- Blankets are not used in cribs or with sleeping babies however Sleep Sacks are available as needed to ensure appropriate temperature for sleeping babies.
- The infants head must remain uncovered during sleep.
- After being placed down for sleep on their backs, infants may then be allowed to assume any comfortable sleep position when they can easily turn themselves from the back position.

**E. Dental Hygiene**

All children with teeth shall brush or have their teeth brushed with fluoride toothpaste once a day during the hours the child is in care. If possible, for full day and family child care programs, children will brush their teeth after lunch, part day morning program children will brush their teeth after breakfast and part day afternoon program children will brush their teeth after lunch.

Size appropriate toothbrushes, tenders and fluoride toothpaste will be obtained through the health supply ordering process and will be use as follows:

Children age three and older - Once daily and in conjunction with a meal as noted above, staff should either brush the child's teeth (for those lacking the motor skills to brush themselves) or supervise as the child brushes his/her own teeth. Fluoride toothpaste, not larger than the size of a pea should be placed on a disposable cup for each child.

Children under three years old - Once daily and in conjunction with a meal as noted above, staff should either brush the child's teeth (for those lacking the motor skills to brush themselves) or supervise as the child brushes his/her own teeth. Fluoride toothpaste, the size of a grain of rice should be placed on a disposable cup for each child.

All children without teeth shall have their gums wiped with a moist cloth or a product called "Tenders" (a soft, single finger swab ordered and provided by the Health Content Area Manager) to remove any remaining food/liquid that coats the teeth and gums at least once a day and after a feeding. By doing this, caregivers are breaking up plaque in order to create a much healthier environment for the teeth that will be coming in later.

Follow these steps when caring for infants without teeth:

- Wash hands thoroughly and slip "Tenders" onto your index finger
- Moisten slightly with cool water. Do not use toothpaste
- Carefully swab infant's gums using a gentle circular motion
- Place used "Tender" in garment bag to be washed prior to next use

#### F. Health Issues in the Classroom

- Call your assigned Site Supervisor when a health concern is identified. It is crucial to provide appropriate intervention or resolution. Any unusual behavior, any injury or any signs of illness requiring assessment and/or administration of first aid by staff must be reported to the parent and documented in the child's confidential file.
- Health issues include, but are not limited to rash, high fever, head lice, signs of conjunctivitis ("pink eye"), diarrhea, intestinal problems, vomiting and nutritional problems.

The Site Supervisor, Comprehensive Services Staff or Health Manager must follow up with the parent and medical provider(s) to confirm any diagnosis given by the parent or family member. The information will be evaluated, and a decision made as to whether the child can attend school at that time. The Site Supervisor and the teaching staff will be kept abreast of the health considerations that impact this decision.

#### G. Child Safety and Supervision

Visiting/socializing on the playground or the premises of a child care facility while on duty is prohibited. Visiting/socializing with fellow employees, who are still on duty regarding non-classroom activities, during break times, is not allowed. All visitors, former employees and relatives must report and sign in at the main office of each center before entering program areas. Information on the nature of the visit will be required.

Children must be visually supervised at all times indoor and outdoor, including while toileting and napping. Essential practices indoors and outdoors include, but are not limited to, active supervision, "zoning" and strong team communication.

##### 1. Playground safety and supervision

Yard staffing must support visual supervision at all times. Staff must “sweep” the yard by walking and visually scanning all areas before leaving.

## **2. Morning outdoor time and field trips**

Whenever the classroom is outside on the yard in the morning or on a field trip, all members of the teaching team must be present to ensure the health and safety of children. No scheduled prep time or breaks are permitted during field trips or morning outside time.

## **3. Afternoon outdoor time**

During the afternoon outdoor time, staffing must meet required teacher-child ratios, and the Lead Teacher must accompany the class and other staff in transitioning the children to and from the yard. If a low ratio allows only one staff person on the yard, that person must be at least an Associate Teacher level staff. Scheduled outdoor time must be approved by Site Supervisor with consideration of approved prep-time and break schedule.

## **4. Preschool outdoor safety**

- No more than two (2) preschool classrooms shall be outside on the playground at any time.
- This policy may be waived with written approval from the Assistant Director. If approval is granted, a written plan must be developed by the Site Supervisor and approved by the Assistant Director outlining additional safety measures that will be established, including but not limited to safe transitions and staff knowing all children on the yard.

## **5. Infant and toddler outdoor safety**

- Infant and Toddler classrooms shall have no more than eight (8) children present for any activity, including outdoor time.

## **6. Semi-Annual Child Safety Check**

Semi-annually, during the first month of the Program Year (when all programs are in session) and in March, each Site Supervisor will complete and submit to their Assistant Director the Semi-Annual Child Safety Checklist (CSB form 751). This checklist will be used to confirm that the following has occurred as required:

- Annual review of Ready To Learn Curriculum safety considerations;
- Annual review of Pedestrian Safety Training for parents and children;
- Semi-annual review of outdoor schedule against staff breaks and prep time and against peak pick-up/drop-off times to ensure no overlap in the morning and limited overlap in the afternoon;
- Semi-annual review of schedule and plan of class consolidations in early morning and late afternoon;
- Semi-annual meeting with staff to review child safety, visual supervision, staff placement , and

- safe transitions;
- Semi-annual completion of Transition Observation Checklist (CSB form 750) in each classroom;
- Semi-annual review of center documentation that all volunteers and substitutes have received an on-site orientation and have reviewed *CSB Substitute and Volunteer Handbook* with a signed *Handbook* receipt on file at the center;
- Semi-annual meeting with front desk/lobby/entrance/exit staff to review procedures to ensure Child Safety at all times; and
- Semi-annual meeting with parents to review Child Safety procedures, facility security, and handout *Parent Guidance for Keeping Children Safe*.

## H. Child Illness Procedures

### 1. Admission and Exclusion

The decision to admit or exclude a child with an illness is the responsibility of the Site Supervisor and will be based on whether there are adequate facilities and staff able to care for the ill child and the other children in the group. The Site Supervisor, not the child's family, makes the final determination about whether the ill child can receive care in the childcare program. Children will be excluded if:

- The child's illness prevents the child from participating in activities that the facility routinely offers for well children or mildly ill children.
- The illness requires more care than the childcare staff is able to provide without compromising the needs of that particular child or of the other children in the group.
- Keeping the child in care poses an increased risk to the child or other children or adults with whom the child will come in contact.
- The childcare staff is uncertain about whether the child's illness poses an increased risk to others. The child will be excluded until a physician or nurse practitioner notifies the child care program that the child may attend. A child whose illness does not meet any of these conditions listed above does not need to be excluded.

### 2. Admission and Permitted Attendance

Specific conditions that do not require exclusion are:

- Children who are carriers of an infectious disease agent in their bowel movement or urine that can cause illness, but who have no symptoms of illness themselves.
- Children with conjunctivitis (pink eye) who have a clear, watery eye discharge and do not have any fever, eye pain, or eyelid redness.
- Children with a rash, but no fever or change in behavior.
- Children with cytomegalovirus infection, HIV or carriers of hepatitis B.

### 3. Procedure for Management of Short-Term Illness

The behavior and health of each child must be continually observed during the course of the day, and should a child become ill, the following steps must be taken:

- The ill infant, toddler or child must be isolated on a cot/crib in an area, which is easily supervised

and away from the kitchen, bathroom and any other area used by the other children. Infants, toddlers and children in isolation must be under constant visual observation by designated staff.

- Children ill enough to require isolation may not use the same toilets as other children. One toilet and sink must be designated exclusively for the ill child's use. The other children must be prevented from using that toilet and sink until the sick child has been picked up, and those facilities have been thoroughly disinfected.
- The Site Supervisor or designee will call the parent or other emergency numbers to arrange to have the child picked up. If no one can be contacted, the child must remain on the cot/mat under close supervision and staff will continue to try to reach the parents or emergency numbers.
- If the child's condition worsens and becomes life threatening, the teaching staff must call 911. Notification of parents must be noted in the child's file. The Assistant Director must be notified immediately.

#### **4. Short-Term Exclusion and Admittance**

As the program is not set up to care for ill children, staff and parents should use the following three criteria to exclude children with short-term illnesses from the group care setting:

- The child does not feel well enough to participate comfortably in the usual activities of the program.
- The staff cannot care for the sick child without interfering with the care of the other children.
- The child has any of the following that indicate a contagious disease or an immediate need for medical evaluation:
  - Fever and behavior changes or other signs or symptoms, until the child's inclusion is checked with a health professional who determines that the child may be in child care.
  - Signs or symptoms of a possible serious condition, such as those defined below under "Conditions that Require Immediate Medical Attention", until the child is checked by a health professional who determines that the child may be in child care.

An ill child may only be excluded for the period of time when he or she poses a significant risk to the health and safety of anyone in contact with the child and until the child meets the criteria for re-admission.

#### **5. Conditions that Require Immediate Medical Attention**

Get help immediately for a child with any of the following conditions:

- Specific fevers:
  - A baby less than 4 months of age has a temperature of 101° F rectally or 100° F axillaries (armpit).
  - A temperature of 105° F or higher in a child of any age.
- For infants under 4 months, forceful vomiting more than once.
- Looking or acting very ill or getting worse quickly.
- Neck pain when the child's head is moved or touched.



- A stiff neck or severe headache and looking very sick.
- A seizure for the first time.
- Acting unusually confused.
- Unequal pupils (black centers of the eyes).
- A blood-red or purple rash made up of pinhead sized spots or bruises that are not associated with injury.
- A rash of hives or welts that appears and spreads quickly.
- Breathing so fast or so hard that the child cannot play, talk, cry, or drink.
- A severe stomachache without vomiting or diarrhea after a recent injury, blow to the abdomen, or hard fall.
- Stools that are black or have blood mixed in them.
- Not urinating at least once in 8 hours, a dry mouth, no tears, or sunken eyes.
- Continuous clear drainage from the nose after a hard blow to the head.

### I. Return to School After Illness

Children who have been excluded from the classroom should not return until:

- A physician has certified that the symptoms are not associated with an infectious agent or the child's symptoms do not threaten the health of other children.
- The child has received treatment following a head lice infestation.
- The child has an axillary or oral temperature of less than 100°F, and does not have symptoms such as:
  - Sore throat
  - Vomiting
  - Diarrhea
  - Headache and stiff neck
  - Undiagnosed rash
- The child has no respiratory problems, such as:
  - Difficult/rapid breathing, severe coughing or a high-pitched croup or whooping sound while coughing.
  - Inability to lie down comfortably, due to continuous coughing.
- No Diarrhea (an increased number of abnormally loose stools in the previous 24 hours), observe the child for other symptoms such as fever, abdominal pain, or vomiting.
- No Vomiting (two or more episodes of vomiting within the previous 24 hours).
- No Eye/Nose Drainage (thick green or yellow mucous from the eye or nose).
- No Sore Throat, especially with fever or swollen glands in the neck.
- No Skin Rash (undiagnosed or contagious), infected sores; sores with crusty, yellow, or green drainage which cannot be covered by clothing or bandages.
- No Persistent Itching (or scratching) of body or scalp.

## J. Medical Alerts

Medical Alerts need to be posted by the teacher after the Site Supervisor has investigated and determined that there was exposure to a communicable disease.

In some cases, the teaching staff may be notified by the parent regarding a confirmed diagnosis (i.e., a child with Chickenpox). In this event, the Medical Alert may be posted immediately. The Site Supervisor, Comprehensive Services Team member, and Health Manager must still be notified about the illness.

After two weeks, the Medical Alert must be taken down from the classroom where it has been posted. (CSB221 to CSB238.)

## K. Children Injured at the Center

### 1. Professional Medical Treatment

- All head injuries require an immediate call to the parent. Parents can make the determination to pick up their child or not based on the staff report and advice as to the seriousness of the injury. The Injury / Incident Report (CSB245) must be completed.
- In the event that medical treatment is required, the center staff will instruct the parent to take their child to the doctor. If the parent cannot be contacted and a child needs to be transported by ambulance to the hospital, the teacher will accompany the child. The teacher will notify the Site Supervisor if a child needs professional medical treatment.
- The parents will be responsible for any medical expenses incurred. If the parent feels that it is the responsibility of the program to pay for these expenses, they must file a claim against the program. Contact the Health Manager for details regarding submission of claims.

### 2. Student Injury / Incident Report

- Whenever a member of the center staff uses first aid or informs a parent that a child has been hurt, the Site Supervisor or Teacher will call the Assistant Director to report the incident. If necessary, immediate arrangements for obtaining medical treatment will be made.
- The teacher is required to complete an Injury / Incident Report (CSB245). This report is also used for minor injuries such as scrapes or small cuts that require minor first aid. A copy of completed form is to be shared with the parent on the same day as the injury/incident occurred and the original is kept on site.
- If the incident involves more than 1 child, a report must be done for each child. The information as to who was involved is written and kept confidential, but not given in the report the parents receive. To maintain confidentiality, the names of other children involved in the incident should not be written on the Injury / Incident Report (CSB245).
- Depending on the nature of the injury / incident, Site Supervisor may need to follow-up with the appropriate CSM (Education, Health & Nutrition, Mental Health/Disability) and/or Business Systems Unit after the injury/incident occurred.
- The Assistant Director should be notified immediately of all injuries/incidents. If the Assistant Director notices that an elevated amount of incidents are occurring, he/she should call the Site

Supervisor/Teacher to discuss the situation and develop a plan/solution to prevent further incidents.

- Site Supervisors must maintain a Site Injury/Incident Log for each injury / incident at all times.

## L. Blood Protocol

### 1. Description

This protocol is used to prevent the remote and unlikely possibility of the spread of blood and blood diseases in the school setting and applies to all site personnel who have direct contact with children and custodial personnel as necessary. Bloodborne Pathogen Training is provided annually.

### 2. General Information

- The so-called blood-to-blood diseases (AIDS, Hepatitis B, etc.) are spread by an organism's travel from the blood of an infected person to the blood of a non-infected person.
- Blood and semen are the only body fluids that have been demonstrated to be capable of transmitting AIDS (Acquired Immune Deficiency Syndrome).

### 3. Supplies needed

- Blood Borne Pathogen Kits are available in each classroom with signage to designate storage location and to ensure staff has access to appropriate standard precaution personal protective equipment including gloves, aprons, mouthpieces for CPR, plastic bags, etc. Blood Borne Pathogen Kits will be replaced immediately after a single use. Additional gloves, CPR mouthpieces, etc., are located in the First Aid Kits in classrooms and in the office.

### 4. Procedure

Wash hands and put on gloves when having any contact with blood or bodily fluids. Use gloves one time and only on one student.

- After completing the necessary task, remove gloves by grasping the cuff and then stripping it off by turning it inside out. Be careful not to touch the contaminated surfaces of the gloves.
- Dispose of glove in a disposable plastic bag. See "Disposal of Blood/Body Fluid" below.
- Wash hands after de-gloving. This is necessary because bacteria multiply rapidly inside a glove.
- Fill out Injury/Incident Report (CSB245) as applicable.

### 5. Disposal of Blood / Body Fluid

- Put all blood/body fluid disposals in clearly marked garbage containers. Examples: soiled wet diapers, used gloves, wipes, vomit, blood products, and all other contaminated materials/supplies.
- Close the bag and tie it, then double bag, and dispose of it in a separate container marked for such disposals. Make sure this container is not used for trash, and that is out of children's reach and can be easily moved around.
- Be safe - always wear gloves. Questions should be directed to the Health Manager.

## M. Medication Administration

In compliance with Community Care Licensing, Community Services Bureau sites maintain an Incidental Medical Service Plan of Operation. CSB supports and provides incidental medical services to children with all medical conditions per CCL regulations including, but not limited to, the administration of medical services for asthma, allergic reactions, and G-tubes.

### 1. Administering Medication

Because the administration of medication poses an extra burden for staff, and having medication in the facility is a safety hazard, families must check with the child's physician to see if a dose schedule can be arranged that does not involve the hours the child is in the child care facility. Whenever possible, the first dose of medication should be given at home to see if the child has any type of reaction. Parents may administer medication to their own child during the child care day.

### 2. Procedure

Staff, designated by the Site Supervisor, will administer medication only if the parent has provided written consent, the unexpired medication is in an appropriately labeled and stored container, and the facility has on file the written instructions of a licensed physician to administer the specific medication as needed and the appropriate forms/care plans such as CSB280, CSB282, CSB219, CSB219A, and the CSB213 have been completed.

For prescription medications, parents will provide caregivers with the medication in the original, child-resistant container that is labeled by a pharmacist with the child's name, the name of the medication, the date the prescription was filled; the name of the health care provider who wrote the prescription; the medication's expiration date; the administration, storage and disposal instructions. Instructions for the dose, frequency, method to be used, and duration of administration will be provided to the child care staff on the prescription label and on CSB forms by a licensed physician or other person legally authorized to prescribe medications.

Over-the-counter medications are treated in the same manner as prescription medications. For administration of over-the-counter (non-prescription) medications, (including diaper cream and sunscreen) parents will provide the unexpired medication in an original child-resistant container that is labeled with the child's first and last names and instructions for storage supplied by the manufacturer. Over-the-counter medications shall be administered only if the facility has on file the written orders (ex: CSB280 and CSB828.) from a physician including the signature or stamp of the physician or other person legally authorized to prescribe medications and in accordance with the instructions of the physician for the dose, frequency, method to be used and duration of administration.

A physician may state that a certain medication may be given for a recurring problem, emergency situation, or chronic condition. The instructions should include the child's name, the name of the medication, the dose of the medication, how often the medication may be given, the conditions for use, and any precautions to follow. Example: children may use sunscreen to prevent sunburn; children who wheeze with vigorous exercise may take one dose of asthma medicine before vigorous activity (large muscle) play; children who weigh between 25-35 pounds may be given 1 teaspoon of acetaminophen for up to two doses every four hours for fever. A child with a known serious allergic reaction to a specific substance who develops symptoms after exposure to that substance may receive epinephrine from a

staff member who has received training in how to use an auto-injection device prescribed for that child (e.g., EpiPen®). A child may only receive medication with the permission of the child's parent and when the staff person who will give the medication has the skills required. All documentation regarding a child's medication and its administration shall be kept in the child's confidential file.

Prescription and over-the-counter medications cannot be administered without the appropriate documents in the child's confidential file.

### **3. Storage**

- Medications will be kept at the temperature recommended for that type of medication in a locked container that is inaccessible to children, separate from any other hazardous material storage. An example of an acceptable location is at the back of a locked file cabinet that is not used to store any other hazardous products or materials. Medications that do not require refrigeration, such as inhalers for asthma, should not be placed in the refrigerator. This can damage them and render them ineffective.
- Medications that require refrigeration must be stored in the designated locked refrigerator medication boxes supplied to each center.
- EpiPen Auto-injectors must be stored in a designated EpiPen box and should be out of reach of children in an easy and quick to access area with EpiPen signage posted. EpiPens should not be stored in extreme heat or cold and should be protected from light.
- When the child no longer needs the medication or the child drops from the center, the medication must be returned to the parent or disposed of if the parent cannot be reached.
- Medication will not be used beyond the date of expiration on the container or beyond any expiration of the instructions provided by the physician or other person legally permitted to prescribe medication. Instructions which state that the medication may be used whenever needed will be renewed by the physician at least annually.

### **4. Medication Log Documentation**

A medication log will be maintained by the classroom staff to record the instructions for giving the medication, consent obtained from the parent, name of medication, dose, date, and time of administration, and the signature of the person who administered each dose of medication. Spills, reactions, and refusal to take medication will be noted on this log. All records of any changes in the child's behavior, as documented on the Medication Log, will be communicated to the parent. Parents will be assisted in communicating these incidences to the physician as necessary. (CSB213-Medication Form) Parents will be informed as to when authorized medications have been given via this log.

### **5. Asthma Protocol**

Asthma is a common health condition and one that typically requires medication. Teachers will receive training regarding asthma, its symptoms, and treatment procedures and the following protocol will assist the teaching staff:

- The Comprehensive Services Assistant Manager, upon review of the child's Health History form, will contact both the parent and medical provider(s) to clarify the current status of the asthma

condition. It is the responsibility of the Comprehensive Services team to obtain confirmation of the diagnosis and any current treatment using the Asthma Action Plan (See Form CSB219).

- Subsequent to the initial health review by the Site Supervisor and Comprehensive Services team, if the teacher becomes aware of a possible asthma condition, previously unknown to staff, she must call the Comprehensive Services team assigned to the classroom. The Comprehensive Services team will then follow the procedures described above.
- Once all relevant information is obtained, a meeting will be held with the Comprehensive Services team, Site Supervisor, parent, and teacher to ensure teaching staff have the training to carry out the action plan for the child and to review the following:
  - Asthma Action Plan from the doctor.
  - Medication form (See Form CSB213) completed by parent.
  - Inhaled Medication – Nebulizer Consent forms (See Form CSB219a) completed by the parent for each teacher/staff administering the medication.
- Copies of the Asthma Action Plan will be kept by the center staff, parent, with the medication and in the child's main file. If the plan indicates medication is used routinely or "as needed," CSB must have medication on site before the child can attend class.
- Until complete physician's instructions are provided, medications to treat asthma symptoms will be given according to the prescription labels. Medication will be dispensed outside of center hours whenever possible.
- When asthma symptoms occur during center hours, the teaching staff will call the parent to alert them about the child's condition. The child will be sent home if the asthma symptoms interfere with the child's ability to fully participate in the program. In the event that the parent cannot be contacted, the teaching staff will call 911 (if the asthma appears life threatening).

#### **6. Training of Caregivers to Administer Medication**

Medication Administration Training is provided annually and any caregiver who administers medications shall be trained to:

- Read and understand the Asthma Action Plan, the Medication Form and the Inhaled Medication- Consent Form;
- Check that the name of the child on the medication and the child receiving the medication are the same;
- Read and understand the label/prescription directions in relation to the measured dose, frequency, and other circumstances relative to administration (such as in relation to meals);
- Administer the medication (including inhalers and EpiPens) according to the prescribed methods and the prescribed dose;
- Observe and report any side effects from medications;
- Document the administration of each dose by the time and the amount given;
- Store and handle medication appropriately;
- Record changes in child's behavior and help parents communicate observations to their provider;
- Demonstrate ability to comply with medication policy.

#### **7. Inhaled Medications**

An Inhaled Medication-Consent Form (See LIC 9166 and Form CSB219A) must be filled out and signed

by the parent before staff administers inhaled medications. A copy of the completed form must be kept in the child's file. A separate form must be filled out for each person (staff member) who administers inhaled medication to the child. This requirement includes all inhaled medications.

### **8. EpiPens**

EpiPen Training is provided annually, and in addition staff is trained through CPR/1st Aid Training and on-line EpiPen training under the direction of the Site Supervisor when a child with an EpiPen is identified onsite.

### **9. Sun Protection Policy**

Sun protection routines in childhood can establish lifelong preventive habits. At CSB, shade is provided at all sites, infants under six months of age are not exposed to direct sunlight, children are encouraged to wear light colored, loose fitting clothing that covers as much skin as possible, parents are encouraged to apply sunscreen to their child's exposed skin as part of their school drop off routine and following the procedure for the over-the-counter medications sunscreen provided by the parent will be applied by teaching staff. Drinking water is available to children during outdoor play.

## **N. Incomplete Health Records**

1. The Site Supervisor and/or Comprehensive Services team will notify parents and teaching staff if a child is to be excluded from the classroom due to incomplete health records.
2. Exclusions due to unmet health requirements: Children must be excluded for immunizations that are not up-to-date or a physical or TB clearance that is not received within 30 days of enrollment. Parents are allowed a onetime extension beyond the 30 day requirement for a physical exam with proof of an appointment on file however this extension does not apply to the TB clearance. Children excluded for unmet health requirements are permitted up to three days of excused absences. After that, a Notice of Action (as applicable) will be issued for termination from the program.
3. Parents will be informed during enrollment and at parent conferences that the health requirements are the following: up-to-date immunizations, physical and dental exams, follow-up and required TB Clearance. Parents will be assisted in identifying and accessing a source of care/insurance coverage and family meeting will take place as needed to make every possible effort to meet the health requirements for the child. If, after these notifications and assistance, the child has not obtained the needed services, the parents will be informed that they need to schedule an appointment that day and notify the Site Supervisor or Comprehensive Services Team of the appointment date and time.
4. When the parent has no phone, contact will be made by the Site Supervisor or Comprehensive Services team through the center. The center staff will be asked to have the parent contact the Site Supervisor or Comprehensive Services team the same day. In all cases, teachers will be notified and asked to reinforce the request made by the Site Supervisor or Comprehensive Services Team regarding health requirements.
5. Children may be excluded from the program for missing or incomplete initial physical exam, incomplete immunizations, and lack of a TB Clearance only.
6. For all other health requirements that are incomplete, the Comprehensive Services Team will

request updated information from the parent with a Health Records Update Form (See Form CSB242). As needed, family meeting will take place with the site staff, Comprehensive Services and parents and a plan will be implemented.

## O. Health and Safety Training for Center Staff and Parents

### 1. Staff

- The Site Supervisor of each center must ensure that each of his/her staff members has current CPR / First Aid Certification in the following: Adult / Child/Infant CPR Training and First Aid Training (good for two years from date of issue). Staff can be sent to training via a request by the Site Supervisor to the Training Coordinator. The Site Supervisor is responsible for maintaining the personnel records of staff at his/her site to ensure that staff is certified in CPR / First Aid at all times. CPR / First Aid certified staff must be available at all times when children are present at the facility, or when children are offsite for facility activities.
- In addition to the CPR / First Aid training, one staff person or Director at each day care center must have at least 15 hours in preventive health practices. This training must include, but is not limited to, pediatric cardiopulmonary resuscitation; pediatric first aid; recognition, management, and prevention of infectious diseases, including immunizations; and prevention of childhood injuries and at least 1 hour of child nutrition education, with content to include age- appropriate meal patterns based on the most current Dietary Guidelines for Americans. The training may include sanitary food handling, child nutrition, emergency preparedness and evacuation, caring for children with disabilities and identification and reporting of signs and symptoms of child abuse. The supervisor makes requests for such training to the Personnel Unit.

### 2. Parents

- Site Supervisors will share the policies for health emergencies that require rapid response on the part of staff or immediate medical attention at the time of completing the Classroom Orientation (CSB112) with parents.
- Through collaboration with parents to promote children's health and well-being, CSB staff provides medical, oral health, nutrition and mental health educational support services. Opportunities for parent education include, but are not limited to: medical and oral health, emergency first aid, environmental hazards, health and safety practices for the home including safe sleep, lead exposure and tobacco use, healthy eating, physical exercise and vehicle/pedestrian safety. In addition, pregnant women and families are provided educational opportunities to learn about pregnancy and postpartum care including breastfeeding, parental mental health, substance abuse, and perinatal depression.



## P. Posting of Documents (Health Emergency Procedures)

CSB conforms to all Federal, State, and local regulations by posting or having on file at each facility: mandated notices, licenses, and permits.

- Site Supervisors and teachers are required to post mandated facility compliance documents on bulletin boards, which are attractive, neat, updated, and highly visible. Signage guidance can be found as follows: CSB Resource Center>Document Library>Comprehensive Services Documents and Training Resources>Signage>Signage Guidance.
- The Site Supervisor is responsible for routinely monitoring bulletin boards and classroom files for compliance with this standard. The Comprehensive Services Managers/Assistant Directors are responsible for monitoring all compliance documents.

## Q. Pet Protocol

- Animals can bring joy to the classroom while offering children the opportunity to be responsible for another living creature.
- When an animal is being considered for inclusion in the classroom, child and staff allergies and fears must be considered. The animal must be tame and classroom staff must agree to accept responsibility for the care of the pet. Assistant Director's approval must be obtained.
- Turtles and other reptiles are not allowed in the classroom because they are potential carriers of salmonella bacteria.
- Before the animal is included in the classroom, children will be instructed on the proper care and handling of the animal and the importance of proper hand washing.
- When the animal arrives in the classroom, the animal must be provided an appropriate habitat and space with opportunities to exercise, appropriate temperature, and all other natural conditions and activities.

A Pet Care Plan must be posted to designate care needed to provide quality care to the animal. The Pet Care Plan will include details specific to that particular pet and will inform staff and parents about the pet, and noting the specifics required to provide quality care to the animal. The Pet Care Plan must include:

- Name of animal
- Description of the animal - example: rat - nocturnal, affectionate and playful pets
- Description of appropriate housing/cage/bedding and recommended cleaning pattern
- Description of food needed to provide a healthy diet including portion size and frequency
- Explanation of exercise needed
- Explanation of proper handling practices
- List of vaccines needed (if any), date when administered and future due dates
- The name and phone number of a veterinarian in case of emergency- Site Supervisors will be contacted for veterinarian visits approval.

A log must be posted for staff to initial and date as animal care and related duties are completed. The log must include:

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Policies and Procedures  
Section 2: Program Operations

- Daily feeding (food and water) schedule
- Daily exercise
- Cage cleaning schedule

Accommodations must be made for:

- Scheduling weekend, holiday, and vacation care
- Maintaining care in the case of an emergency (natural disaster, animal illness, bites, and other similar situations)

Responsibility of the teaching staff:

- Review each child's Health History to identify children with allergies to specific animals.
- Complete the Pet Care Plan.
- Maintain the overall care of the animal.
- Initial the log noting responsibilities completed.
- To report any bites or scratches to the Site Supervisor and complete health documentation as required.

Responsibility of the Site Supervisor:

- Submit a request to the AD for classroom pet approval.
- Oversee the health and well-being of children, staff and animals as they interact in the classroom.
- Report bites or scratches immediately the Comprehensive Services Health Manager and the Assistant Director.

Responsibility of Assistant Director:

- Provide pet approval for a classroom on an individual basis.

### R. Safety / Sanitation Procedures

- Facilities have available first-aid kits readily accessible/clearly marked for emergency use.
- Facilities are equipped with a fire extinguisher securely mounted and readily accessible.
- Employees are trained in the use and type of fire extinguishers available.
- All fire extinguishers are tagged, noting months/years/dates of inspections/annual maintenance, and identified use (class of fire).
- Facility exits are clearly marked with visible, approved EXIT signs. Aisles, hallways, and other exits are kept free of obstacles, including furniture and equipment.
- All materials and surfaces accessible to children, including toys, shall be free of toxic substances.
- All plants must be non-toxic.
- Air fresheners will not be allowed in any space accessible to children and families.
- Baby walkers shall not be used or kept on the premises.
- Playground equipment shall be securely anchored to the ground unless it is portable by design.
- Equipment and furniture shall be maintained in a safe condition, free of sharp, loose or pointed parts.

- Equipment and furniture shall be age and size appropriate so as to allow children present to fully participate in planned activities.
- All items on shelves above three feet tall (plants, sculptures, books, and other items) shall be secured with museum putty, safety latches, barriers, or other similar items to prevent items from falling onto children.
- Open shelves and cabinets over three feet tall shall be free of heavy objects.
- Tall furniture over four feet tall shall be braced to the wall or floor.
- Cots shall be maintained in safe condition and bedding shall not be shared by different children without first laundering the bedding.
- Floor mats are constructed of foam at least  $\frac{3}{4}$  inch thick and covered with vinyl, with no exposed foam. Floor side must be marked so that it can be distinguished from the sleeping side.
- Aisles and trafficked areas are kept free of obstacles and obstructions, with empty food containers promptly removed.
- Cots shall be arranged so that each child has access to a walkway without having to walk on or over the cots or mats of other children.
- Safe stools/ladders are available and used for reaching shelved items.
- Employees are trained in the proper use of equipment that their duties require them to use. Employees who have not been trained in the proper use of equipment may not operate such equipment.
- Employees are required to be attentive to their tasks, especially when cooking or operating moving equipment.
- Smoking is prohibited in all areas.
- All employees must consume food only in designated areas.
- All employees are required to adhere to procedures for kitchen sanitation and the cleaning schedule.
- Firearms and other weapons shall not be allowed on or stored on the premises of a child care center.

## S. Safety Surveillance

### 1. Identification and Correction

The Health and Safety Officer will conduct monthly inspections of the facility for hazards using the Health and Safety Checklist on CLOUDS. The Site Supervisor will review the result of the site inspections and will submit a Track-it request for correcting hazardous conditions identified.

### 2. Escape Hazards

The Site Supervisor will maintain and review with the staff annually a list of potential high-risk locations/situations where a child might escape unnoticed from the group. Staff will use this list to plan increased supervision in these high-risk locations and situations. If such a high-risk escape hazard is identified between annual reviews, staff will take action immediately.

### 3. Evacuation Hazards

The Site Supervisor will be responsible for establishing and updating a checklist of locations to be

assessed during evacuation to assure complete surveillance of the building before and after evacuation is declared complete. The checklist will identify usual and likely-to-be-forgotten locations such as: under a cot, behind a sofa, in a toy bin, in a closet, kitchen, or toilet room.

#### **4. Injury Prevention**

Whenever an injury occurs, a copy of a completed Incident/Accident Report (CSB245) will be filed in an injury log. The injury log will be reviewed every three months by the Site Supervisor or Assistant Director to identify hazards in need of corrective action.

- Staff and volunteers must be able to demonstrate safety procedures. Both staff and volunteers will review safety procedures with the Site Supervisor prior to working in the classroom. Emergency procedures, the Health and Safety Checklist, and playground safety shall be reviewed with each staff person and volunteer before any interaction with children may occur.
- Child and parent activities must include safety awareness for the home and in the program. Videos, brochures, newsletter articles, and parent training will be used to foster safety awareness for the home and in the program.

#### **T. First Aid Kits**

All centers should have a first-aid kit and manual that is easily accessible (location should be marked by “First Aid Kit” signage), available to staff, and out of reach of children. The following items should be in the first-aid kit:

- CPR Mask (inside or outside in conjunction with the first aid kit)
- Disposable, nonporous gloves
- Scissors
- Tweezers
- Thermometer
- Adhesive tape
- Sterile first aid dressings
- Bandages or roller bandages
- Pen/pencil and note pad
- Antiseptic solution
- Cold pack
- First aid manual
- Poison Control number

The Health and Safety Officer, using the Health and Safety Checklist, will inventory the First Aid Kit monthly. Orders for restocking the kits are placed with designated staff. The First Aid Kits are only to be used in an emergency. Everyday health and safety supplies such as Band-Aids, cold packs and gloves are stocked separately in designated locations within each center, inaccessible to children.

## U. Preparing For Emergencies

Each classroom has a disaster preparedness plan in case of fire, earthquake, or other emergency. Children and staff must be prepared to execute the plan in the event of such emergency. Regular drills are an essential element in strong preparation.

### 1. Operations Procedure

- Staff receives training on the disaster preparedness plan from their supervisor during their initial work orientation, and at subsequent staff development training. Such training is filed and documented with training records.
- All CSB centers post evacuation plans and documentation of completing required monthly drills (Disaster Drill Log CSB117) in location visible to families, staff and regulatory agencies.
- Classroom teachers provide an orientation to children on how to respond to an emergency as part of the ongoing curriculum.
- Drills shall be conducted as a whole center as to simulate a real emergency.
- Drills can be planned or unplanned. Periodic unannounced drills coordinated by the Site Supervisor are encouraged.
- Fire and Earthquake drills are held at least once per month, and Shelter-in-Place drills are held on the first Wednesday of each month.
- When a Fire drill takes place and the building is being evacuated, teachers must bring the following items outside with them:
  - Emergency cards
  - Inhalers and Epi-Pens for applicable children
- After each drill:
  - The Site Supervisor or designee shall complete the Disaster Drill Report form CSB116 and maintain documentation of reports at the center.
  - The Site Supervisor or designee documents the drill on the Disaster Drill Log form CSB117. When log is full, logs shall be filed with the Disaster Drill Report forms CSB116 at the center and a new log will be started and be posted.
- The Site Supervisor shall submit a copy of the Disaster Drill Log form CSB117 monthly to the Assistant Director with the monthly report.
- The Assistant Director shall review logs monthly to ensure drills are conducted regularly.
- The Assistant Director shall periodically review the Disaster Drill Report form CSB116 documentation on file at the center.
- The results of the Disaster Drill Reports shall be reviewed at least annually with staff and parents.
- In the event of an actual emergency,
  - When children are moved to another location, medications and related supplies, equipment and documentation for children with health conditions that may require incidental medical services must be transported with the child by the Lead Teacher or designee who is designated to administer the medication.

- Site Supervisor shall ensure s/he has possession of the two-way emergency radio at all times.

Contra Costa County maintains an Office of Emergency Services (OES) Plan, which is activated during major disasters. The functions performed at the OES include gathering and evaluating damage information, determining emergency response priorities, obtaining necessary resources (materials, supplies, equipment, and personnel) and providing information to the news media. Community Services Bureau staff will provide information to the County OES on the status of the department’s staff, buildings and equipment, including vehicles.

A verbal report to Community Care Licensing must be made within 24 hours and a written report must be submitted to the licensing agency within seven days of the occurrence of any of the following events:

- Death of any child from any cause
- Any injury to any child requiring medical attention
- Any unusual incident or child absence which threatens the physical or emotional health or safety of any child
- Any suspected physical or psychological abuse of any child
- Epidemic outbreak
- Poisoning
- Catastrophe
- Fire or explosion occurring in/on the premises

Reports must be made in writing to the funding sources as soon as possible after any of the above.

**2. Emergency Disaster / Earthquake Supplies**

All sites have emergency/disaster supply containers that are easily accessible. The sealed containers hold the following items appropriate to the number of adults, children and infants at the site. The inventory with the expiration date of the contents is listed on the outside of the container.

First Aid Supplies	Food Bars	Formula	Formula Bottles	Bottle Bags	Bottle Nipples
Pliers	Crow bar	Water	Latex Free Gloves	Hand Sanitizer	Trash bags
Multi-purpose Tool	Shovel	Radio	Safety Goggles	Solar Blankets	Work Gloves
Gas Shut off Tool	Scissors	Dust Masks	Zip Lock bags	Masking Tape	Duct Tape
Fleece Blankets	Batteries	Whistles	Toilet Paper	Rope	Adult Vests
Germicidal Tablets	Wrench	Buckets	Flashlight	Soap	Cold Packs
Antiseptic Wash	Hammer	Lanterns	Shovel	Eye Wash	Vinyl Tarp

Toilet Bags	Toilet Chemicals	Bucket Toilet Seats	Dust Masks	Hard Hat	
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### 3. Meal Delivery-Emergency

Each center should have the items listed below available when food cannot be transported to the centers due to unforeseen circumstances such as traffic, breakdown of van, or breakdown of equipment in kitchen. All of these food items should be stored and marked “Emergency Food”. The requisite amount of milk (two half-gallon jugs for preschool and one half-gallon jug for toddlers per classroom, per meal) and fluid milk substitutions if needed for milk intolerances are to be on hand at all times.

- Infant food:
  - Meats, fruits and vegetables
  - Dry cereal
  - Formula
  
- Breakfast food:
  - Dry cereal
  - Canned fruit
  - Milk
  
- Lunch food:
  - Sun butter
  - String cheese
  - WW crackers
  - 1 can of fruit and 1 can of vegetables
  - Milk
  
- Afternoon snack:
  - Graham crackers
  - Milk

## V. Classroom Sanitation

### 1. General Description

Each classroom is responsible for preparing the spray bottle of sanitizing solution on a daily basis.

- The proportions of bleach to water are: three quarters ( $\frac{3}{4}$ ) teaspoon of chlorine bleach to two (2) cups of water or one (1) tablespoon of chlorine bleach to one (1) quart of water. Other disinfectants may be used with the approval of the Assistant Director for that site.
- Classroom staff is instructed to clean off any visible soil with soap and water prior to spraying each table lightly with the bleach solution, to wipe it with paper towels and air dry. This is to be done before and after each meal service.
- The bleach solution, as well as any other disinfectants, cleaning solutions, poisons and other items that could pose a danger to children, should be placed in a locked cabinet after each use

to prevent children from reaching.

- Warning Signs and Mixture instruction posters should be posted on the cabinet door where the solution is stored (See CSB Forms for forms “Warning Sign Poster” and “Warning Mixture Instruction Poster” in English and Spanish).
- Tabletops and eating surfaces must be cleaned/sanitized before and after each meal, counter tops are cleaned between preparation of different food items, and can openers are cleaned/sanitized after each use. Classroom staff is responsible for sanitizing toys weekly, as well as cleaning shelves and all areas of the classroom where toys are stored.
- In classrooms that have kitchen equipment, the teaching staff will ensure that, on a weekly basis and as needed, the pantry is swept, and ovens and refrigerators are cleaned. The building service worker washes trashcans as needed.

## **2. Classroom Sanitation in Infant Care Centers:**

Particular emphasis on classroom sanitation for infant centers is critically important in ensuring the health of the children and staff and in preventing the spread of communicable disease. Keep the classroom sanitized by adhering to these activities:

- All items used by pets and animals shall be kept out of the reach of infants.
- Before walking on surfaces that infants use specifically for play, adults and children shall remove, replace, or cover with clean foot coverings any shoes/socks they have worn outside of that play area.
- Each caregiver shall wash his/her hands with soap and water before each feeding and after each diaper change.
- Only dispenser soap, such as liquid or powder in an appropriate dispenser shall be used.
- Only disposable paper towels in an appropriate holder or dispenser shall be used for hand drying.
- Washing, cleaning and sanitizing requirements for areas used by staff with infants or for areas that infants have access to, are as follows:
- Floors, except those carpeted, shall be vacuumed or swept and mopped with a disinfecting solution at least daily, or more often if necessary.
- Carpeted floors and large throw rugs that cannot be washed shall be vacuumed at least daily and cleaned quarterly, or more often if necessary.
- Small rugs that can be washed shall be shaken or vacuumed at least daily and washed at least weekly, or more often if necessary.
- Walls and portable partitions shall be washed with a disinfecting solution at least weekly, or more often if necessary.
- The diaper-changing area, where residue is splashed from soiled diapers and items and surfaces are touched by staff during the diaper-changing process, shall be washed and disinfected after each diaper change. Such areas, items and surfaces shall include but not be limited to:
  - Walls and floors surrounding the immediate diaper-changing area.
  - Dispensers for lotion, soap and paper towels.
  - Countertops, sinks, drawers and cabinets.
  - Sinks used to wash infants, or to rinse soiled clothing or diapers shall be disinfected after each use
- Objects used by infants that have been placed in the child’s mouth or that are otherwise



contaminated by body secretion or excretion are either to be (a) washed by hand using water and detergent, then rinsed, sanitized, and air dried, or (b) washed in a mechanical dishwasher before use by another child. A container will be placed in the infant room to collect these objects which shall be washed and disinfected at least daily, or more often if necessary. Such objects shall include, but not be limited to toys and blankets.

- Linens laundered by the center shall be washed and sanitized at least daily, or more often if necessary. Such linens shall include, but not be limited to, bedding, towels and washcloths used on or by infants.
- A disinfecting solution, which shall be used after surfaces and objects have been cleaned with a detergent or other cleaner, shall be freshly prepared each day using 1/4 cup of bleach per gallon of water or other approved disinfectant . Commercial disinfecting solutions, including one-step cleaning/disinfecting solutions, may be used in accordance with label directions.
- All disinfectants, cleaning solutions and other hazardous materials must be approved for use at CSB and shall be placed in a locked storage area.

### W. Kitchen Sanitation

- All kitchen staff will follow Contra Costa County's Environmental Health rules and regulations for Retail Food Facilities.
- Cleaning/sanitizing may be done by correct spraying and wiping, or by using a dish washing machine, or any other type of machine (if demonstrated thoroughly to cleanse/sanitize equipment and utensils). The dishwashing machine must reach a temperature of 165 °F (74 °C) during washing and 180 °F during rinsing.
- All dishes and utensils used for food preparation, eating and drinking must be cleaned and sanitized after each use. If a dishwasher is not used, the manual 3-compartment sink method must be followed.
- Toxic materials must not be stored in food storerooms, kitchen areas, food preparation areas, or areas where kitchen equipment or utensils are stored.
- Soaps, detergents, cleaning compounds or similar substances must be stored in areas separate from food supplies.

### X. Food Safety and Sanitation

#### 1. Personal Hygiene for Food Service Staff and Classroom Staff

No person is allowed to work in a food service facility or a food serving area if he/she:

- Is infected with a communicable disease that can be transmitted by food.
- Is a carrier of organisms that can cause disease.
- Has a boil, infected wound, or acute respiratory infection.

Employees must thoroughly wash their hands and exposed portions of their arms with soap and warm water:

- Before starting work
- Before serving food
- During work

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- After diapering
- After smoking
- After eating
- After drinking
- After using the toilet
- As often as otherwise necessary

Employees must take off their apron:

- When exiting building
- When going to use the bathroom
- As often as otherwise necessary

Employees must maintain a high degree of personal cleanliness, and conform to good hygienic practices:

- Minor cuts or scrapes should be thoroughly cleaned, and covered with a clean bandage. If the affected area is on a hand, food service gloves should be worn until the area has healed.
- While engaged in food preparation or service or while in areas used for equipment washing, utensil washing, or food preparation, employees must not use tobacco in any form, eat food, chew gum, or wear earphones. Employees may eat and drink in designated areas only, and shall follow Contra Costa County's tobacco product control ordinance.
- Potentially hazardous food must be kept at an internal temperature below 40°F or above 140°F. Hot foods that fall below 140°F must be reheated to at least 165°F.
- Gloves are to be used when either hand comes into contact with food such as when cutting food. Gloves do not need to be used when serving food with a utensil so there is no hand contact.
- Each serving bowl on the table must have a separate serving utensil.
- Leftovers may not be sent home with children, staff, or adults - due to the hazards of bacterial growth.
- Employees may not have their own food such as sandwiches, (coffee, soda, chips or candy in front of children.
- To help maintain kitchen sanitation, all non-kitchen staff shall not enter the kitchen except as required for work duties.

## **2. Policies for Food Sanitation / Safety**

### **i. Mealtime Sanitation Procedures**

- Before and after each meal time, tables must be cleaned with the registered disinfectant/cleaner approved for food prep surfaces
  - Children should not return to the table with books, toys, etc. until after the table has been cleaned and sanitized.
- Teachers and children must wash hands before setting table or sitting down at table.
- The assigned staff must take temperatures of foods before serving, and food must be warmed up to 165°F if temperature falls below 140°F.
- Serving temperature and the time when temperature was taken must be recorded on transport sheet.

## **ii. Food Utensils, Dishes and Food Containers**

- Each center must ensure that all serving bowls and other tableware items have been properly sanitized before each use.
- All dishes, utensils, and food containers are the property of Contra Costa County Community Services Bureau, and should not be taken off the premises.
- All food and utensils must be kept in their proper storage cabinet.
- Non-perishable food and food-related products must be stored at least six inches off the ground at all times.

## **iii. Refrigerators**

Thermometers inside freezers and refrigerators must be checked daily. It is the Site Supervisor's responsibility to:

- Monitor the daily temperature check and keep the Refrigerator/Freezer Log (CSB455) accessible.
- Order a new thermometer when needed.
- Ensure that refrigerator is cleared of perishable food items and is cleaned and sanitized on the last day of the week.
- Ensure that staff food is stored only in produce drawers labeled "Staff Food" in CACFP refrigerators.
- No open containers are allowed in the produce drawers.
- Stored containers must not have any exposed straw or spout

## **iv. Food storage**

Leftover fruit (except for bananas) and bread shall be stored in the refrigerator for later use and bread in the freezer for later use.

- Leftover milk and cold foods shall be rotated so they do not become outdated.
  - Use FIFO (First In, First Out) method
- Milk that has been poured into small containers should not be poured back into the milk carton.
- All foods shall be marked with their date of delivery.
- Opened food that must be stored shall be labeled with name and date of opening.
- All containers shall be labeled with name of food and date when packed.

## **v. Disposal of Leftover Food**

Serious health problems can be caused by leftovers that are held too long at an improper temperature. Teaching staff is required to dispose of all un-served cooked foods. At the end of each meal they are thrown into the garbage can.

- Food may not be kept after it has been put on the table for children.
- Leftover (un-served) food can never be taken home.
- Leftover fresh fruits, vegetables, cereals, breads and milk should be stored properly and used

for snacks or breakfast. Unsafe perishables shall be disposed of daily.

- The central kitchen will create a sample lunch plate and hold it for seven days. This food will be used for analysis in the event of a food-borne illness outbreak.

## Y. Procedures for Using Transport Units

Food cambros are insulated to help maintain the temperature of hot food or cold food. Cambros and containers shall be washed and sanitized daily.

- Cambros shall not be stacked more than four high.
- Broken cambros shall not be used to transport foods.
- Cambros and containers are opened just before serving food.
- All food containers shall be rinsed before being returned to central kitchen.
- Food shall not be left at room temperature in an open cambro.

## Z. Food for Infants

### 1. General Description

- Infants from birth through 11 months participating in the program will be offered an infant meal. Under the infant meal pattern, infant formula is a required component and, as such, must always be offered unless the infant's mother provides breast milk. CSB encourages breast-feeding. Infants and mothers benefit when infants are breastfed. Facilities are available for mothers to comfortably and discreetly breastfeed infants. Alternatively, staff can feed infants expressed breast milk left by their mothers.
- The decision regarding which infant formula to feed a baby should be made jointly by the infant's doctor and parents. CSB provides one house formula: Enfamil Infant. Any parent who wishes to decline this formula must document this declination using the form "Parent's Form for Declining a Provider's Formula" (See Form CSB404). Such parents will furnish a formula which meets the CACFP requirements for iron fortification and nutritional content, unless the doctor has prescribed a special formula. If the doctor-prescribed formula does not meet the CACFP requirements, parent and MD will need to complete a medical statement in addition to the declination form (CSB404).
- Infants are to be held while being fed, and must never be laid down to sleep with a bottle.
- An infant's developmental readiness is assessed to determine the foods to be provided, the texture of the foods, and the feeding styles to use. For complete guidelines, refer to the training manual Feeding Infants: A Guide for Use in the Child Nutrition Programs.

### 2. Feeding Infants:

- The introduction of solid foods is usually started around six months of age, depending upon each infant's nutritional and developmental needs. The decision to introduce solid foods should always be made in consultation with the parents. New foods are introduced one at a time, up to one week apart to make it easier to identify food allergies or intolerances. Infants will be offered single-ingredient commercial baby food when appropriate.
- As infants grow older, they may prefer to hold their own bottles, and may do so while being held in an adult's arms or lap.

- Dental problems, such as tooth decay, may result from children using bottles as pacifiers. For this reason, children are not allowed to carry bottles.
- Cereal or any other solid food may not be served from a bottle. A spoon is to be used instead. Baby food shall not be served from jars. Before feeding, the approximate amount of food that infant might consume shall be taken from the jar and placed into a small dish. Solid foods must not be put in bottles. Babies fed such food in a bottle can choke and may not learn to eat foods properly.
- Any parent who chooses to decline the center's offered food and instead furnishes one or more food items that meet Child Nutrition Program (CNP) nutritional content requirements, must document this declination using the Parent's Form for Declining a Center's Food For Infants, (Form CSB405) unless the doctor has prescribed special food. Any food items provided by the parent must be in compliance with local health codes, Head Start Performance Standards and CACFP regulations. If the doctor's prescribed food item(s) does not meet the CNP requirements, the doctor will need to complete the Physician's Letter for Declining a Center's Food (CSB405a), return the original to the Nutrition Office, and retain a copy in the child's file.

### **3. Food to Avoid with Infants:**

Infants are at risk of choking on food due to their poor chewing and swallowing abilities. For a complete list of foods to avoid for infants and toddlers, please refer to the training manual, "Feeding Infants: A Guide for Use in Child Nutrition Programs."

#### **AA. Food for Toddlers**

Toddlers will be served food from the regular Child Nutrition Toddler menu. Foods should be served family style and prepared so they are easy to eat (small pieces, or thin slices, no bones).

#### **BB. Potlucks**

Potlucks have historically been an integral part of CSB. They have provided parents with opportunities to share part of their family traditions, culture, personal interests, and strengths with other parents and staff in an economic and enriching manner. As the program has grown, concerns have been raised in relation to sanitation, safety, and nutrition. This is partly due to the common practice in our community of celebrations being built around a shared food experience, often with participants bringing their choice of food.

- Potlucks are discouraged during class hours as the children have their planned menus.
- If a potluck is held during a classroom event, it shall be held in a separate room such as a teacher's lounge or conference room. If a separate room is not available, potlucks shall be held after class hours.
- If a potluck is held during a classroom event, enrolled children will first be served the food provided by Child Nutrition Services.
- Parents may prepare a plate of potluck food for their own children only, and enrolled children may not be served the food in lieu of the food provided by the program.
- If after hours, parents may serve their children alternate food from whatever source they choose at that time.
- Parents who choose to contribute food should be encouraged to bring foods that are

economical, healthy, and prepared in sanitary conditions. See section CC below for restrictions and suggested healthy alternatives.

- The food may be either homemade or purchased.
- Cultural foods are encouraged.

### CC. Food for Children, Parent, Staff Meetings and Events

In March 1993, in an effort to reduce chronic disease, the Board of Supervisors adopted the Contra Costa County Food Policy developed by the Contra Costa County Food and Nutrition Policy Consortium, of which CSB is a member. The policy states that food provided at staff meetings, parties and other types of County social events should include choices that meet U.S. Dietary Guidelines. All foods served to people or provided through food assistance programs should reflect current standards of good nutrition.

In 2012, the Board of Supervisors and the Policy Council approved a Healthy Food & Beverage Policy. This policy states that Community Services Bureau recognizes frequent consumption of non-nutritious foods and beverages as a significant risk to the health of the children being served, and is taking a preventive approach. The role of CSB in serving families includes consistently modeling the behavior we wish to encourage. Therefore, at all CSB meetings, events, activities, or celebrations which include children:

- Sugar (or corn syrup) sweetened beverages and 100% fruit juice will not be served
- Caffeinated drinks, including teas, will not be served
- Foods containing large amounts of sugar and/or solid fats (candy, donuts, cakes, cookies, chips, etc.) will not be served

Instead, CSB will provide or require healthy alternatives such as:

- Unsweetened carbonated water (flavored or unflavored)
- Water, perhaps flavored with a slice of lemon or other fresh fruit (and preferably served in non-plastic containers)
- Non-fat or 1% milk (plain)
- Coffee and/or tea (for adults)
- Fresh fruit
- Whole-grain snacks (crackers, etc.)
- Raw vegetables and dipping sauce

At all facilities directly operated by CSB, the CSB Healthy Food and Beverage policy will be implemented for any meal or special event that includes children.

### DD. Nutrition Services

- The Nutrition Office works with staff, professionals and parents to meet the nutritional needs of children with disabilities, and to help prevent disabilities that have a nutrition-related basis
- The Comprehensive Services Health, Disabilities and Mental Health Managers work with the

Nutrition Manager to ensure that provisions to meet special needs are incorporated into the nutrition program.

- Appropriate professionals shall be consulted when determining ways to assist Head Start staff and parents with regard to children who have severe disabilities and/or problems with eating. The Nutrition Manager will plan and implement activities to help children with disabilities participate at mealtime, and to help prevent nutrition-related disabilities.

## **EE. Food Defense**

Security measures in the central kitchen area will be followed by limiting access to the food production area and storage area to authorized personnel only.

When not in use:

- Freezers shall be kept locked.
- Walk in refrigerators shall be kept locked.
- Storage room shall be kept locked.
- Access to ice machine shall be controlled.
- Food shipments shall be accepted only if products are secured and sealed.
- Incoming food shipments shall be examined for potential tampering.

## **PART V. FAMILY & COMMUNITY ENGAGEMENT PROGRAM SERVICES**

### **SUBPART I. Strength Building-Family Partnership Agreement**

#### **A. Purpose**

Parent and family engagement in Head Start/Early Head Start (HS/EHS) is about building relationships with families that support family well-being, strong relationships between parents and their children, and ongoing learning and development for both parents and children. The partnership between parents and HS/EHS staff is fundamental to children's current and future success and their readiness to school. At CSB, parents and family engagement activities are grounded in positive, ongoing, and goal-oriented relationships with families. The Strength Building-Family Partnership Agreement process begins at the first point of contact with the families. This may occur through a phone call to the enrollment line, an intake appointment, an enrollment clinic or a walk-in at one of our centers. Upon enrollment staff and families build ongoing, respectful, and goal oriented relationships. As needed, the staff is ready to link families with community resources and referrals to promote progress on family and child development goals.

The Strength Building-Family Partnership Agreement is further strengthened by parents completing the Parent Volunteer Survey, Parent Interest Survey, and engaging in the day to day program activities for families and children.

## B. Building Strength Building-Family Partnership Agreement (SB-FPA)

The SB-FPA aligns with the HS Parent and Community Engagement Framework and family outcomes. Through the SB-FPA, families work with staff to identify and achieve their goals and aspirations. The SB-FPA is a strength-based practice and is completed twice each program year. In both cases, parents and co-parents are encouraged to participate based on their readiness/willingness.

The Strength Building-Family Partnership Agreement has three layers of engagement:

- Strength Building Family assessment
- Family Goal Setting
- Referral and Resources

### 1. Family Assessment

Through the family assessment process, families meet with staff to share their unique strengths, inspirations, goals and challenges. They also discuss various dimensions of the HS/EHS Parent Family Community Engagement (PFCE) Framework:

- Family's well-being (Parent/family Health and safety, financial security, Shelter)
- Positive Parent Relationships (Parents developing warm relationships that nurture their child's learning and development).
- Family as a Lifelong Educator (Parent as the first teacher, participates and support their children learning, partner with school teachers and community).
- Family as Learners (Parents advance their own learning through educations, training, to support parenting, career and life goals).
- Family Engagement in Transitions (Parents support children learning and development as they transition to new learning environments such as EHS to HS or HS to Kinder and Elementary School).
- Family Connections to Peer and Community (Parent is connected with peers to build networks that are supportive and educational to enhance social well-being and community life).
- Family as Advocates and Leaders (Parent participates in leadership development at site level, community or state level to improve advocate for high quality children' learning experiences).

The key points of this conversation are objectively documented in CLOUDS using the Family Partnership Assessment Indicators, Comprehensive Services staff will assign one of the indicators to the dimension (T: thriving, S: stable, or IN: in-crisis).

### 2. Goal Setting

Based on the information gathered through the Strength Building-Family Partnership Agreement-Assessment, and based on what families consider it is important to them, the staff encourages and assists parents in setting personal or family oriented goals. If the family has a pre-existing goal, CSB staff will support the family as requested. Through the goal setting, families are educated on setting SMART goals



and planning the steps and support needed to achieve their aspirations. The family-goals are documented in CLOUDS-Family Goals, using the family's own words. (Family SMART Goal are: Specific, Measurable, Achievable, Realistic/relevant, and Timely)

### **3. Accessing Resources and Services**

Upon identification of the family SMART goal, the family defines achievable short steps, identifies resources/referrals they might need to successfully reach those goals, and commits to its completion. Staff assistance and support, nurture the family as they go through this process, building their knowledge and confidence accessing community resources. Referrals and Services are documented in CLOUDS Referral/Services tab.

### **4. CSB Strength Building-Family Partnership Agreement Process**

The initial SB-FPA is completed within 60 days of family enrollment; the second one is a follow-up of the initial SB-FPA and is completed 30 days prior to the end of their program year. This applies to Part day/Part Year Programs and Full Day/Full Year Programs. The SB-FPA is a fluid process, depending on individual family's circumstances; staff will support their interest and needs regularly.

#### **i. Within 60 days of Enrollment**

Comprehensive Services Clerks are responsible for the following:

- Completing family Assessment:
  - Meet with parents to complete the first SB-FPA as early in enrollment as possible. Document family strengths and areas in need of further information/referral in the CLOUDS system. Use key-words to describe and validate the selected indicator under each of the eight sections.
  - Avoid keeping assessments as new or in progress.
  - Families may decline the completion of the SB-FPA, if this happens, staff documents parent "declined" in CLOUDS SB-FPA Form.
- Completing Goal Setting:
  - Assist family on setting personal or family oriented goals to be completed within the program year, to describe what step will be taken to complete the desired goal, what support will be needed and when the goal will be achieved. Educate family in using the SMART Goal format and encourage to write them in their own words. (Specific, Measurable, Achievable, Relevant and Timely). If a family doesn't identify specific family goals, suggest the family develop a goal that supports their child's educational goal or development. (Staff can refer families to their parent-teacher conference goals if needed).
- Document family goal in CLOUDS by indicating:
  - Goal category based on PFCE frame work.
  - Goal description, enter the family's own words. Include pre-existing goals if

- applicable.
  - Goal steps, what is needed to achieve the goal(s) including a back plan. (The parent's responsibility for the action)
  - Goal support, what will be done by other than the parent to assist in achieving the goal. (Staff/other commitment to the action)
  - Expected completion date. (Within the program year)
  - Goal follow up, provide immediate support/resource and referrals to families that identified themselves as "in need" or requested additional information. All actions, resources, referrals and results of follow-ups are documented in under Goal Follow-up and in the Resources Referral Section in CLOUDS.
- Entering Referral and Services:
    - Families are provided with resources as requested or if staff consider the family will benefit from a community resource. Referral and Services are documented in CLOUDS. As needed families are contacted to determine if resources or referrals were appropriate and adequate for the family.
    - Document contact on Family Referrals and Services-Notifications in CLOUDS (enter dates and CS staff initials) indicating if the resource(s) met the family's needs and if the family was satisfied with the referral/resource. Resources and referral status in CLOUDS need to be marked as "Completed" by the end of the program year. Avoid leaving pending referrals, as in progress or new.

**ii. By January**

- Mid-year Goal follow-up. All family goals must be followed and documented in CLOUDS family goals section.

**iii. 30 days before the end of the Program Year (Part Day Programs and Full Day Programs)**

Comprehensive Services Clerks are responsible for the following:

- Complete the second SB-FPA, by reviewing the initial SB-FPA with parents. Staff communicates with families to discuss and document the second assessment in CLOUDS
- Follow on family goal progress. All family goals need to be closed at this time. Staff document on CLOUDS, the status of goal completion (Accomplished, Not accomplished). If any barriers were impeding the goal completion, staff document the goal status as "Not Achieved" and enter comments explaining the barriers under "End of the Year Comments" section of Goal in CLOUDS. Avoid leaving goals in progress or as new.
- As needed assist families in utilizing provided resources/referrals immediately, especially for families identified as in need.
- As needed contact families to determine if resources or referrals were appropriate and adequate for the family. Document notes in CLOUDS under Referral and Resources and Services-Notifications. At the end of the program year, all referral and resources status in CLOUDS need to be marked as "Complete", avoid leaving pending referrals as "In progress" or as "New".

**iv. On an Ongoing Basis:**

Site Supervisors are responsible for the following:

- Review individual SB-FPA's and Family Goals for their sites.
- Review CLOUDS custom report for Family Performance and Outcome by Measure by selecting your site.
- Maintain communication with CS Staff, especially for families they might consider themselves as in need.
- Should the family situation change and site staff is aware, notify comprehensive services staff to update Strength Building-Family Partnership Agreement assessment if needed, and provide support or resources as needed.
- As applicable, provide Comprehensive Services staff with updates to Referrals and Services as parents inform so that CLOUDS is maintained accurate and support is provided as needed.

Comprehensive Services Assistant Managers are responsible for the following:

- Monitor the completion and accuracy of SB-FPA data entry in CLOUDS.
- Following through CLOUDS reports to ensure family's referral and services are properly followed up and resources, referrals are in place.
- End of year SB-FPA reached closure. All assessments completed, all goals completed (achieve or not achieved or declined), all referral and services (Completed).
- Ensure that adequate follow-up and resources were provided promptly by CS Staff.
- Provide support and assistance to Site Supervisors and CS Clerk in obtaining resources if requested.
- Provide support and assistance to the family when needed.
- Hold Family Meeting for referrals that require multiple steps and planning.
- Hold Family Meeting to comprehensively support families who requested additional assistance or identify themselves as been vulnerable or in need.
- Work with Comprehensive Services Clerks to strategize timely completion of SB-FPAs.

Comprehensive Services Clerks:

- Build positive goal oriented relationships with the families as early in enrollment as possible.
- Complete Family Assessment, Goal setting, Referral and Resources.
  - Complete initial SB-FPA within 60 days of enrollment.
  - Complete end of the program year SB-FPAs 30 days before the end of the program year, review goal achievements, and request family feedback about community resources provided. If the family has not achieved their goal from the previous year and would like to continue working towards the same goal, staff may open a new goal format in CLOUDS and enter the same goal for the following year.
- Maintain open communication with families and follow on their goal process. As needed provides support.
- Partner with families to educate, support and build skills in accessing community resources and referral. If families identify themselves as in need, a week follow up is required to review if families accessed the community resources provided.
- Document all entries and follow up in CLOUDS data system.

## 5. Desired Outcomes of Family Partnership Process

- Families achieve an enhanced quality of life by engaging in a Strength Building-Family Partnership Agreement. Families are provided community resources such as adult education classes, financial literacy assistance programs, employment counseling, school lunch programs, health resources, and other community services. Such efforts are coordinated with the Comprehensive Services staff via the Strength Building-Family Partnership Agreement process and through on-going interactions with site or comprehensive services staff at the parent's discretion and need. By assisting families to identify their own supports and strengths, development of skills, tools, and resources, families can use this process to further develop their goals for their families beyond Head Start.
- Families feel empowered and have gained life skills to be self-reliant by learning about and accessing community resources to support their family.
- Families' attainment of goals will be identified.
- Families attain and accomplish pre-existing goals if identified.

The Comprehensive Services staff provides guidance, support, and resources to the family, moving them toward successful completion of their family goal(s) and aspirations. Documentation of support can be found in CLOUDS, Strength Building-Family Partnership Agreement, Family Goal, Referrals and Services, and the Family Case History.

When the family does not meet the timeline to accomplish their Family Goal, the Comprehensive Services staff will provide additional support and guidance, by reviewing/discussing all obstacles which prevented the family from meeting the time line. Families have a choice to continue moving toward meeting their goal(s) or establishing a new goal. If a family chooses to set a new goal, Comprehensive Services staff will assist the family in identifying an area to set a goal, and follow the goal setting procedures as listed under Goal Setting. Comprehensive Services staff will provide support and resources for the family to work towards achieving the newly identified goal.

Families may refuse to participate in the assessment, goal development or resources/referrals services. Staff document their attempts at explaining the benefits of the process, and note on CLOUDS that parent refused.

## 6. Parent Volunteer Survey

During the enrollment appointment, Comprehensive Services staff asks parents to complete a Volunteer Survey (See Form CSB300). This survey includes ways for parents to be engaged at the site level such as: helping in the classroom, preparing materials, and sharing their talents. It also offers opportunities to volunteer on a larger scale such as the Policy Council, Health & Nutrition Services Advisory Committee, , and Interview Panels.

The following is the protocol for implementation and completion of the Volunteer Surveys:

### i. Upon Enrollment

CS Clerks are responsible for:

- Educating parent about CSB volunteer opportunities and encouraging parents to complete the

CSB300 Volunteer Survey Form.

- Collecting completed forms and tallying a list of volunteers by site.
- Inputting names of parents indicating interest in an Advisory Committee (Policy Council, Health & Nutrition Services, Interview Panel, etc.) into the Volunteers for Advisory Committees folder on the Shared drive.

**ii. By September 30<sup>th</sup>**

Site Supervisors are responsible for:

- Compiling a list of site volunteers from Volunteer Survey results.
- Utilizing the list of volunteers when needed for parent meetings.

Comprehensive Services Assistant Managers are responsible for:

- Working with Comprehensive Services Clerks to ensure Parent Interest Survey and Volunteer Survey are completed within the timeline with the parents.

**iii. Ongoing**

- Should parents indicate interest in volunteering at a later date, they can inform site staff or CS staff about volunteer opportunities. (Volunteer Interest Survey is used upon enrollment as a means to discuss various engagement opportunities; however, families can participate in a volunteer activity at any point of enrollment).

**7. Parent Interest Survey**

The Parent Interest Survey is aligned with the Head Start Program Performance Standard (HSPPS) and the Parent Family and Community Engagement Family Outcomes. Parents complete this survey upon enrollment; results from the survey allow staff to identify the top topics of parents' interests to provide training at parent meetings or to provide family resources. The list of the top ten results is kept in the Parent Committee Meeting and Policy Council binder. Family resources are shared via written materials, newsletter articles, speakers, and other forms of media. The categories for topics include:

- Health/safety
- Nutrition
- Mental health
- Child development/transitions/
- Parenting/child-parent relationships
- Literacy /adult education
- Employment /job training/asset building
- Connecting to community resources, leadership/advocacy

The following is the protocol for implementation, timeline, distribution, and follow up for the Parent Interest Survey (See Form CSB300):

- Upon enrollment Comprehensive Services Clerks are responsible for the following:

- Completing the surveys with Parent after introducing the purpose of its completion.
  - Entering data in the Survey Monkey for a tally of completed surveys.
  - Collecting Survey Monkey tallies from PFCE staff and providing sites with completed CSB304 Forms Parent Meeting Training Schedule top ten interests.
- By October/November of each year Site Supervisors are responsible for the following:
    - Present the top ten parent interest results at next scheduled parent meeting.
    - Work with parents to develop a calendar/schedule for topic presentations.
    - Request support from Comprehensive Services as needed in obtaining or identifying speakers.

Based on the results of the Survey and Performance Standard requirements, parent education workshops are planned by Site Supervisors/Head Teachers, and Comprehensive Services team members throughout the school year.

### C. Accessing Community Services and Resources

In order to best support and provide needed resources and referrals to registered families, CSB collaborates with members of the community agencies that are a part of our Health-Nutrition Advisory Committee. Community agencies support our work in the areas of health, behavioral health, nutrition support, education programs, disabilities/services agencies, social services, local Food Banks, financial literacy education, asset development programs, and domestic violence prevention programs and substance abuse prevention/intervention.

### D. Supporting Families in Crisis-(Emergency and Crisis assistance)

When a family experiences a crisis, the stress disrupts the family's usual pattern of functioning and family well-being. Families sometimes find that their usual ways of coping or problem solving do not work; as a result, they feel vulnerable, anxious, and overwhelmed. Sensitivity, empathy, and care are taken to assess the nature and scope of the crisis in order to work with the family to discuss the level of support that is adequate yet comfortable for the family. The role of Head Start staff is to recognize and assess the crisis situation, listen mindfully, provide assurance, and help the family use specialized resources in the broader community. Whether staff provide the needed assistance or intervention or refer families to community resources, they are key sources of support to the family.

- In an event of a crisis, the Site Supervisors and Comprehensive Services staff assigned to each site should always be the first contact.
- Comprehensive Services and site staff will conduct a comprehensive review of the immediate crisis that the family has.
- Consult the Service Area Manager(s) most connected to the crisis as needed for case review assessment and ensure comprehensive services support has been considered, and track crisis until stabilized.
- As needed, contact the Mental Health unit for support. Report the situation and advise of the potential need for crisis intervention or consultation.
- The Parent, Family and Community Engagement Manager should also be notified regardless of

the crisis area.

- Comprehensive Services Assistant Manager supporting the site creates, reviews and updates documentation of events in CLOUDS.

## E. Accessing Mental Health Services: Prevention Identification, Intervention, Program for Families

CSB supports the social-emotional health and well-being of both the child and the family. Opportunities for parents are provided to discuss concerns regarding their child or family and seek/assess support/treatment options with CSB mental health unit clinicians. Goals of the mental health prevention program are to:

- Improve self-concept
- Build positive goal-oriented relationships
- Develop coping skills for problem-solving
- Manage stress effectively

Family Meetings are offered to families as needed to identify and address child or family issues so that Comprehensive Services staff can provide information or additional resources to the family. Staff can assist families in obtaining appropriate referrals to address individualized family needs or concerns.

Child Abuse Prevention training for parents is scheduled annually at the site level during parent meetings. Additional resources are available to site and parents upon request.

## F. Family Resources

### 1. Resource Guides:

Several community resource guides are used by Comprehensive Services staff, and many are posted on Parent Boards including:

- “Surviving Parenthood,” published by the Child Abuse Prevention Council 925-798-0546 or access the link: <https://www.capc-coco.org/>
- “Resources Guides” published by Contra Costa Crisis Center (Toll-Free 800-830-5380 or 925-939-1916, and Crisis line 800-833-2900 or [http://cccc.bowmansystems.com./](http://cccc.bowmansystems.com/)) and the guide provides an at a glance perspective of what resources are available to assist with families' basic needs. It is easy to reproduce, is available in English and Spanish, and is published for East, Central, and West Contra Costa County.
- CSB Friday Flyer: A source of county wide community resources/events, that are distributed twice a month to all CSB staff, in an effort to support their work linking families with valuable community resources. The Friday Flyer is distributed in English/Spanish and contains up to date information regarding county wide training and job opportunities, community events such family recreational activities, as well a variety of community learning opportunities.

Other community resources list that are frequently distributed to CSB staff and parents include:

- One Stop Career Center monthly calendars

- First 5 Center monthly calendars
- Local Library calendars
- Latina Center calendars
- Spark Point calendars
- Family Law workshops

## **2. Internet Database**

For individualized resources customized to fit particular needs, Comprehensive Services staff and other staff can access 211 Online Database via the Internet at [www.crisis-center.org](http://www.crisis-center.org). This up-to-date system allows staff to search for resources by name, need, and geographical area. It has the capability of translating the resource information into 12 different languages and has a map feature allowing the user to create a map to and from the resource location. Parents are encouraged to use this resource from CSB computers, or if available, from their personal computer.

## **3. Other Methods of Access**

Parents are also given access to information about community services by posting information on parent bulletin boards at sites and Wellness Center Displays in the classrooms. Additionally parents receive, educational booklets, pamphlets, CSB Family newsletters, flyers of program events during parent orientation and/or other parent meetings/trainings.

## **4. Site Based Resources and Referrals**

Each Site Supervisor must make available the Resource Guides for the appropriate region of the county to assist families in accessing frequently used or needed resources. Copies of these Resource Guides should be posted on the Site Parent Board and also be distributed to each family so that it is easily accessible should they need it at a later time. Additional copies for photocopying and updated versions can be found at **211 Contra Costa**: <http://ccc.bowmansystems.com/> Resource boxes are also available at each site with additional resources and handouts that relate to topics from the Parent Interest Surveys. Each site has a Wellness Center (self-help) that will assist those families that don't ask for resources directly. The Wellness Centers contain information in the areas of: CSB's health, disabilities, nutrition, mental health, parent/family involvement, among other flyers. The Site Supervisors update the wellness centers quarterly basis.

## **G. Services to Pregnant Women Enrolled in the Program**

Staff engages enrolled pregnant women and other relevant family members such as fathers, in family partnership services focused on factors that influence prenatal and postpartum maternal and infant health. Staff provides support throughout the transition process with program options and transition to program enrollment, as appropriate.

The Strength Building-Family Partnership Agreements will address:

- Early and continuing risk assessments, which include assessment for nutritional status as well as nutrition counseling and food assistance, if necessary.
- Health/oral promotion and treatment, including medical and dental exams, on a schedule



- deemed appropriate by attending health care providers as early in the pregnancy as possible.
- Mental health interventions and follow-up, including substance abuse prevention and treatment services as needed.
  - Pre-natal education on fetal development, labor and delivery, and postpartum recovery
  - Benefits of breastfeeding and accommodation of breastfeeding in the program.
  - Health staff will visit the newborn within two weeks after birth to ensure the well-being of both mother and child.

## **SUBPART II. Parent Engagement**

### **A. General Description**

Parents are the first and most important educators of their child. Parent Engagement in CSB is integrated into the classroom and in the administration, by then, it is imperative that the parents become engaged in their children educational program, and in all aspects of the program. Parents are encouraged to participate in policy-making groups at the center, agency, and grantee levels. Participation of parents is voluntary and is not required as a condition of the child's enrollment. Four ways have been designed to provide the parents and/or families of the program to actively participate in the following:

- Engage in the decision-making process
- Engage as paid employees
- Engage as volunteers
- Engage as observers in their child's classroom

Families can also expect to be offered the opportunity to be engaged in the program as equal partners in their child's education, learning, and development in these ways and more:

- Participates in the Home Visit
- Attend an orientation to the program and the classroom
- Attend two Parent/Teacher conferences per year
- Attend Parent Meetings and parent trainings
- Participate as a volunteer, staff, or observer
- Participate in the Male Involvement and Engagement Program
- Participate in Policy Council and other advisory bodies
- Participate in the Strength Building-Family Partnership Agreement

### **B. Engagement in the Decision-Making Process**

Participation in the process of making decisions about the nature and operation of the programs (as well as decision-making in the Contra Costa County Community Services Bureau Grantee-Operated Program and the Policy Council) occurs on two levels, Site Parent Committee and Policy Council:

- 1. Site Parent Committee Meetings:** comprised exclusively of the parents of children currently enrolled at each center or within a program option such as the Home-based option.

The Site Parent Committee carries out at a minimum, the following responsibilities:

- Collaborates with staff in developing and implementing local program policies, events, and services (including but not limited to classroom curriculum and activities, and center-wide activities).
- Plan, conduct, and participate in informal as well as formal programs and activities for parents and staff (including but not limited to parent training, special events, and parent/child activities).
- Within the guidelines established by the governing body, Policy Council, or Policy Committee, participate in the recruitment and screening of Early Head Start and Head Start employees.

The following is the staff protocol for implementation of parent meetings as family engagement:

- In September Comprehensive Services Clerks, Comprehensive Services Assistant Managers and CS Managers provide support at 1st parent meeting to establish Policy Council representative and Parent Committee officers.
- As needed Comprehensive Services staff assists in providing resources for speakers at Parent Meeting upon request by Site Supervisor.
- Monthly one week before meeting, Site Parent Meeting Chair:
  - Announces upcoming meeting
  - Prepares agenda, make copies, prepare minutes
  - Copies minutes from prior month
  - Copies PC minutes to share with parents
  - Posts agenda on Parent Board
  - Secures training/guest speakers (with Site Supervisor assistance)
- Monthly Site Supervisor (with the support of Comprehensive Services staff as needed):
  - Supports Site Parent Committee Meeting Chair with monthly duties assigned.
  - Provides support for translation of minutes/agendas if needed.
  - Provides staff report for meeting.
  - Ensures parent committee meeting binder is current for the school year with training tally, training evaluations, meeting agendas, meeting minutes, sign-in sheets and copies of handouts given to parents.
  - Attends Parent Meeting or provide staff support to parent officers.
- Within school year Site Supervisor (with the support of Comprehensive Services staff as needed) ensures that required trainings are provided at the site, including:
  - Pedestrian Safety (By September 30th)
  - Child Abuse Prevention (By April 30th)
  - Kindergarten Transition (January to May depending on school district)

## **2. Policy Council**

The Policy Council operates in under Internal Operational Procedures of the County Board of Supervisors,

the Brown Act, Simplified Roberts Rules of Order, Head Start Program Performance Standards (HSPPS), and Better Governance Ordinance. The Policy Council By-Laws, which are reviewed and approved annually by the PC, contains detailed information including but not limited to the following:

- Purpose of the Policy Council and composition information
- Procedures for handling business
- Duties and Responsibilities of members
- Membership and Meeting information
- Standards of Conduct requirements

For more information regarding the roles and responsibilities of the Policy Council, refer to the Program Governance under Section 1 of the Policies and Procedures.

The following is the staff protocol for implementation of the Policy Council as an opportunity for Parent Engagement:

**i. Site Supervisors with the support of designated Comprehensive Services staff is responsible for the following:**

- September:
  - Attend 1st Parent Meeting at each site where there is Head Start or Early Head Start enrolled families as assigned.
  - Assist in establishing site officers and Policy Council Rep(s). Refer to Initial Parent Meeting-Election Packet that outline general duties of policy council representatives:
    - Initial Parent Meeting-Election CSB 330
    - Initial Parent Meeting-Election Agenda CSB 330A
    - Initial Parent Meeting-Election Minutes CSB 330B
    - Parent Committee HS Requirements CSB 330C
    - Functions of the Parent Committee Officer CSB 330D
    - Policy Council Representative Overview CSB 330E
    - Policy Council Representative Information CSB330F
    - Roster of Parent Committee -Policy Council Officers CSB 330G
    - Provide new Policy Council representative with Policy Council Representative Changes (CSB-330F) form to complete and forward to Policy Council Staff and CC PC Manager

**ii. Site Policy Council Representative with the support of site staff:**

- Monthly:
  - Ensures posting of upcoming Policy Council Agenda on Parent Board before the Policy Council meeting.
  - File Policy Council Agendas in site Parent Meeting Binder.
  - Prepare monthly Site Report to present to the Policy Council.
  - Share and distribute flyers and information received at the Policy Council Meeting to parents at the monthly site committee meeting.
  - Attend Policy Council meeting and take back information and resources to the next Parent meeting at their site.

**iii. Site Supervisor:**

- Monthly-week of PC:
  - Confirm representation for the site. If rep(s) cannot attend, secure an alternate.
  - West Co. sites only: Confirm if Policy Council rep(s) needs transportation and inform PFCE staff to arrange transportation for the respective month.
  - Facilitate election of new Policy Council representative if replacement is needed.
- As needed:
  - If the elected Policy Council Representative is unable to fulfill his/her duties, he or she submits a letter of resignation to site or comprehensive services staff to be forwarded to the clerk or manager of PC.
  - Site conducts an election for replacement Policy Council representative at the next Parent Committee meeting.
  - Provide new Policy Council representative with Policy Council Representative Information (CSB-330F) form to complete and forward to the clerk of the Policy Council.

**iv. Comprehensive Services Manager Assigned to Policy Council:**

- Monthly-after PC:
  - Provide Policy Council meeting minutes to sites for Policy Council representative to report at next parent committee meeting.
  - Post minutes and agenda on EHSD, CSB and Contra Costa County public websites, in both English and Spanish.

**C. Parent Engagement in the Classroom as Paid Employees, Volunteers, or Observers**

**1. As Paid Employees:**

Contra Costa County CSB defines “paid employees” as currently-enrolled parents who have qualified for an employee position. Preference will be given to parents of children formerly or currently enrolled in CSB’s programs. Parents who become paid employees of Contra Costa County may not participate on the Policy Council.

**2. As Volunteers:**

To be considered for volunteering, a currently enrolled parent must comply with CSB and Licensing requirements, take part in an orientation about the program and the specific aspects of being a volunteer. Parents and family members are encouraged to participate in the classroom as frequently as their schedule permits. Please refer to the Volunteer Policy under Human Resources of the Policies and Procedures for more information on CSB Volunteer Policy.

If parents are unable to volunteer at the center, the following home activities are suggested:

- Assisting the children extend their experience in the classroom
- Assisting the children to use materials in different ways, providing children with appropriate work and strategies to help them solve problems

- Encouraging children to communicate with one another so that they can help themselves work out problems and explore alternatives
- Organizing, fixing, making toys or sewing/repair of dramatic play clothes
- Participating in story-telling activities with children
- Making observations of their child
- Making flannel board stories
- Going to the library to check out books for the classroom
- Translating written materials

### **3. As Observers:**

Parents of currently enrolled children may observe in their child's classroom or during the Home-based socialization time at any point during program operations.

Depending on circumstances, other observers and professionals will need to obtain permission from the Site Supervisor/Early Childhood Home Educator and or parental consent release for observations by indicating the purpose of the visit, and how long they plan to visit.

Parents and other family members have a responsibility to treat staff and other program participants with courtesy. Aggressive or abusive actions towards any staff members, parent, or another child by a parent is unacceptable and may result in the parent being barred from the center grounds and or a child/family being withdrawn from the program. If this should occur, CSB will work with the parent to provide resources for alternative placement.

### **4. Male Involvement Program:**

CSB supports the engagement of both parents in their children's educational experience that will ultimately help the children to reach better outcomes. Regardless of living arrangements, it is our goal to include both parents, (co-parents) to the maximum extent possible in the family partnership process and have ongoing communication with the child's teacher as co-partners in their child's education, learning and development.

CSB makes fathers feel welcome and supported at our sites and offer activities that will be meaningful to both father and mother. The goal of male involvement is to provide fathers and other significant males with opportunities to build parent to parent network that is supportive and/or educational, to enhance social well-being and community life. Activities and support for fathers and engaged men are determined locally through a variety of ways such as ongoing communication as a result of a parent-teacher conference, home visit, other means with a teacher or site supervisor, and fatherhood support groups (24/7 Dad).

## **D. Family Engagement in the Program**

Staff members have a significant role in providing opportunities for parents/families to become engaged. Site staff and Comprehensive Services staff have the responsibility of ensuring that parents of children currently enrolled and/or family members have the opportunity to be engaged in all aspects of the program. CSB defines opportunity as the staff's willingness to assist families in removing barriers to their involvement.

### **1. Parent Orientation:**

CSB staff ensures that parents have the opportunity to be engaged in the program by providing a Parent orientation at the time of placement. Once a child is ready to be placed at a site, comprehensive services, or site staff meets with the family to complete the placement process. This includes the Parent Interest Survey and a review of the Family Handbook which provides an overview of our CSB program, family parent engagement opportunities, and its service models & areas. The Family Handbook is updated annually in conjunction with the annual review of CSB Policies and Procedures. Contents of the Handbook are limited to appropriate content regarding program information, school readiness, staff professional development, parent, family, and community engagement, health and safety requirements, nutrition information, social services and more.

Please refer to the current Family Handbook for more details.

Site staff and Early Childhood Home Educators work with parents to plan classroom activities, field trips, socializations and home-based activities. Planning with parents at the site level occurs at parent meetings and individually through parent conferences twice a year. Child care and transportation are scheduled and provided when needed to allow for maximum family engagement.

### **2. Family Information Sharing:**

All centers are required to have a Parent Information Board, located in a visible and accessible place all parents visiting the facility. For centers with several buildings, a Parent Information Board should be included at each building. These boards are used to communicate with families and should contain Center Licensing regulations, CSB and Community current events, parent committee meeting agendas and minutes, Policy Council agendas and minutes, job announcements, site special events, and parent engagement opportunities such as Male Involvement, parenting classes, financial literacy classes and other CSB and community learning opportunities. Materials should be posted in English and Spanish whenever possible.

CSB monitors both Delegate Agencies and subcontractors, and the directly operated program to determine the extent of parent engagement, giving technical assistance to programs as needed.

### **E. Development of Activities for All Parents**

To gain an understanding about families are encouraged to fill the CSB300 "Parent Interest-Volunteer Survey Form".

Parent Interest surveys are distributed to enrolled families at enrollment and are tallied by Comprehensive Services staff by September 30th. to determine interests and needs of parents at each site. Information from these surveys is analyzed by staff, and form the basis for the development of activities and parent trainings that reflect the interests of the site. Parent Engagement requests found consistently across the program will be considered for agency-wide opportunities.

Currently enrolled parents, are encouraged to co-partnership with classroom staff, or with their Early Childhood Home Educators to design child development activities and special events.

Staff should assist parents to define their feelings about child rearing, as well as building partnerships with parents (to develop confidence and knowledge about their children's education). In turn, parents contribute their experiences and values to the program in a way that is comfortable for each parent.

Various opportunities are made available throughout the year, and support is provided both site and comprehensive services staff to assist each family to participate to the extent of their comfort, ability, and availability.

#### **F. Parent Education / Home Activities**

Teachers provide parents with individualized home activities to reinforce their child's learning objectives. Home activities focus on the use of household items and emphasize a developmentally appropriate approach to working with preschoolers.

Home activities are introduced to parents at site parent meetings, home visits/parent conferences, and daily conversations with parents.

Each center has a Parent Lending Library/Wellness Center available to parents on a checkout basis. Books and pamphlets about Parenting, Child Developmental Milestones, Health, Mental Health, Dental Care, Nutrition, Child Development, and Home Activities are all part of the library. For more information on Home Activities, refer to the Education section of the Policies and Procedures.

#### **G. Parent Notification of Community Services Bureau Changes**

Following is CSB's procedure for notification of parents of staff changes, new hires, substitutes, staff departures, and other applicable CSB staff movement:

- Classroom Substitute – the Site Supervisor will notify impacted families about changes in staffing at the classroom.
- Hiring/Assignment/Departure of Staff –the Site Supervisor or Head Teacher will inform parents in writing and verbally about changes in staffing on-site.

#### **H. Family Literacy**

Family Literacy will be promoted on a group and individual family basis through information obtained in the Strength Building-Family Partnership Agreements, Parent Interest Surveys, parent/teacher home visits, parent conferences, center parent meetings, and from other parent contacts. Family Literacy is approached as a collaborative venture; wherein interagency agreements are established to streamline access to the services of a variety of community agencies. Examples of Family Literacy opportunities include:

- Tandem Reading Program
- Raising a Reader book bags
- Reading Advantage
- Home activities

Comprehensive Services and site staff work consistently through the year to maintain effective working relationships with community agencies providing literacy support services. These may include, but are not limited to, United Way, Literacy Alliance, Libraries, ROP, RIF, Project Second Chance, CalWORKs, and Diablo Valley Literacy Council, or provide parents with resources for literacy services at their local library and more depending on the need and interest of families.

## I. Parent and Family Engagement in Health, Nutrition, and Mental Health Education

The Family Strength Building Partnership Agreement utilizes the PFCE Family Framework outcomes. This matrix specifically addresses the family wellbeing that includes health, nutrition and mental health education. By completing this tool staff gains the information they need to:

- Assist parents in establishing and utilizing a medical and dental home
- Encourage parents to be active participants in their child's health care
- Provide parents with the opportunity to learn the principles of preventive medical and dental health, health and safety education, and individualized health training specific to the child and/or family needs

In addition to addressing education via the Strength Building-Family Partnership Agreement, there is a joint advisory group that allows appropriate time/opportunity for maximum engagement in Health and Nutrition.

Health Services and Nutrition Advisory Committee: This committee is composed of staff, parents, and community representatives from the fields of health, nutrition, disabilities, and mental health and their related services for pregnant women, children 0-5 years old, and their families. Members inform staff of current issues and practices in the community so that the program can address them. Parents also have an opportunity to express their concerns regarding health-related issues affecting their family or their community by providing input to local community agencies regarding current health-related events, trends, service gaps. Members of this committee also exchange information regarding the food service program and discuss and explore nutrition issues such as obesity, anemia, cancer, breastfeeding, and other topics of interest to the parent participants. This group meets twice a year. Parents indicate interest on the Volunteer Survey that is completed at placement (See form CSB300).

## J. Parent and Family Engagement in Community Advocacy

Through the encouragement of parent and family engagement at all levels, the program provides parents with valuable information that will empower them and serve as a practical resource to help them in their day-to-day lives.

One of the goals of parent and family engagement is to support and engage parents in their child's education, learning, and development. Information exchanged during the first and second parent-teacher conferences, through Family Meetings, sharing of health screening results, and on-going communication with parents, staff are educating parents on the importance of seeking out support for the interest and well-being of their child.

Through the Strength Building-Family Partnership Agreement staff support and encourages families to develop goals or support existing goals in order to support the growth and well-being of their family.

Through the Policy Council and Policy Council Subcommittees parents are provided an opportunity to extend their advocacy into the community as they are involved in the decision making process for their Head Start and Early Head Start Programs. They gain experience in a public meeting setting and will have knowledge of public meeting rules should they wish to advocate in their local public meetings. They are



exposed to community resources and in turn become vital resources to other parents at their respective centers. The Policy Council Executive Committee and Advocacy Subcommittee, shares information about grass roots advocacy for the Head Start program and encourages parents to write letters to their elected officials supporting their Head Start program. This advocacy extends beyond supporting their own child which is what brought them to Head Start initially. It is vital that parents remain concerned and informed about issues that affect their lives and the lives of their children. Parents are encouraged to form their own opinions regarding issues and are provided with information on advocacy skills so that they can have a voice as well as leadership skills.

#### **K. Parent and Family Engagement in Transition Activities**

Helping each parent become an effective advocate for their children is an essential transitional strategy:

- Transitions start well in advance to allow time for the parent and the child to prepare for the upcoming change.

Parents are involved in transitions throughout the program such as transition from home to school, infant to toddler; toddler to preschool, preschool to kindergarten; routine transitions during class time; and transitions from the parking lot to the center. For more information on transitions, refer to the Education and Disabilities sections of the Policies and Procedures and the CSB Family Handbook.

#### **L. Parent and Family Engagement in Home Visits**

Head Start enrolled parents are encouraged to participate in two home visits during the program year. The first visit may occur at the time of placement and is intended to be an opportunity for the teacher to meet the child and family, and ensure that the child's entry into the program is successful. Comprehensive Services staff may accompany the teacher if necessary. This provides an opportunity for parents to share information about their child to the teacher.

Individual needs are also addressed at this time as well as completion of some required program documentation. The second visit occurs near the end of the program year and is intended to exchange information regarding progress the child has made and to address any areas of concern before the child leaves the program or begins another year with the program.

Parents may decline the opportunity for a home visit at any time. While home visits are not required as a condition of the child's enrollment or participation in these program options, every effort must be made by program staff to explain the advantages of home visits. Home visits are, however, required for the Home-based option and in the Early Head Start program where staff must visit the newborn within two weeks of birth. For more information regarding these programs, refer to the Education section of the Policies and Procedures.

#### **M. Parent Engagement in Recruiting Head Start and Early Head Start Employees**

All parents are invited to participate in the recruiting EHS and HS employees. Parents are included as part of the interview panel for consideration of employment. Parents can be engaged by showing interest as a Policy Council member or by way of the Volunteer Survey that is done upon enrollment. A list of parents who are interested in being on interview panels is created at the beginning of each year.

Training and orientation of the interview process is provided for all parents who wish to participate. For more information on staffing procedures, refer to the Human Resources section of the Policies and Procedures.

### **SUBPART III. Community Partnerships**

#### **A. Description**

CSB takes an active role in community partnership building and advocacy to enhance the delivery of services to children and families. Based on a variety of information sources, such as the Community Assessment, Strength Building-Family Partnership Agreements, regulatory requirements and current legislation, program staff actively seeks out and enters into partnerships with various community entities and individuals to coordinate the access to resources and services to children, families, and staff. These partnerships and the manner in which they are conducted are documented by virtue of interagency agreements and memoranda of understanding, which clearly delineate the responsibilities of both parties, are updated regularly, and are responsive to the needs of children and families.

#### **B. Child Care Partnerships**

CSB engages several Community-Based Organizations on a contractual basis to provide child-care and development services to eligible families. Comprehensive Services staff and a CSB Senior Manager are assigned to these programs operated by our child care partners to provide support and technical assistance and to ensure compliance with federal and state regulations. Collaborative partnerships with child care agencies enhance the educational, health care, and social services to children and families throughout the county.

Providers of child care services include: First Baptist Church, We Care Services for Children, YMCA of the East Bay, Martinez Early Childhood Center, Richmond College Prep, Crossroads High School, Little angels Country Day School, Aspiranet, Sunshine Valley, San Ramon Unified School district, Healthy Families America, Child Care Counsel.

#### **C. Partnerships with Agencies, Entities, and Individuals.**

CSB partners with over a hundred community-based organizations including but not limited to:

- Health Services: Family, Maternal, Child Health Program (FMCH), Child Health and Disability Prevention Program (CHDP), , CAIR, Integrated Pest Management Bed Bug Task Force, John Muir Child Safety Coalition, Give Kids a Smile Day, Children’s Oral Health Program, Lead Prevention program, Communicable Disease program, Community Wellness & Prevention program.
- Child Welfare: County Child & Family Services (CCC EHSD-CFS).
- Mental Health: County Mental Health Program/MediCal Reimbursement, C.O.P.E. Family Services program (Triple-P program).
- Nutrition: Women, Infants and Children Nutrition Program (WIC), CCFP Roundtable, Solano

- & Contra Costa Food Bank, Families CAN, CCC Health Services CalFresh, BANPAC, UC Cooperative Extension (EFNEP), Healthy and Active Before 5.
- Disabilities: Regional Center of the East Bay, California Children’s Services, California Community Care Coordination Collaboration Five Cs, Contra Costa SELPA, Parent Care Network, Child Health and Disability Prevention.
  - Family Support: Department of Child Support Services (DCCS), SparkPoint Center, County Probation Family Justice Centers, Contra Costa First 5.
  - Child Abuse Prevention: Family Stress Center’s Child Assault Prevention Program and Families Thrive.
  - Professional Associations: California Child Development Administrator’s Association (CCDAA), National Association for the Education of Young Children (NAEYC), California AEYC, Contra Costa AEYC, Local Planning Council (LPC), National Head Start Association (NHSA), California Head Start Association (CHSA), and Region IX Head Start Association (RHSA).
  - Educational Institutions: Contra Costa College District, UC Davis, UC Berkeley, and Cal State University East Bay.
  - Other Supportive Services: Reading Is Fundamental, Supporting Father Involvement, Zero Tolerance for Domestic Violence, Raising A Reader and First 5 Commission.

In addition to partnering with agencies and entities to provide services to our children, families, and staff, CSB also conducts outreach to organizations for the purpose of securing volunteers to participate in program activities. Examples of this type of outreach include our work with the Volunteer Center, CalWORKs (work experience clients), Teens Link with the Community (teens fulfilling community services requirements in High School), and the Telephone Pioneers (retired Pacific Bell employees). Visiting experts are also recruited from the community to enhance training for children, staff, and families.

Groups of parents and professionals recruited to participate on Advisory Committees (Health & Nutrition Services Advisory, Community Colleges, Budget, Bylaws, Education and Family Services, Nutrition, and Personnel Committees) ensure quality planning for needs/interests of children and families. These committees contribute parent and professional input to the planning and program implementation process and are recognized for the important role they play in community partnership building.

## **PART VI. ADDITIONAL SERVICES FOR CHILDREN WITH DISABILITIES**

### **A. Purpose**

The Contra Costa County Community Services Bureau complies with the IDEA (Individuals and Disability Act IDEA) and is consistent with both Federal and Center regulations governing the rights of the disabled. Children enrolled in Head Start programs with disabilities receive all the services to which they are entitled to under the Head Start Program Performance Standards (45 CFR 1302).

Contra Costa County Community Services Bureau enrollment efforts include recruiting children with disabilities.

Enrollment may not be denied on the basis of a disability as long as:

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- The parent wants to enroll the child,
- The child meets the Head Start age and income eligibility criteria,
- Head Start is an appropriate placement according to the child's IEP/IFSP, and
- The program has vacancy to enroll

When a Head Start program has been determined an appropriate placement for a child with a disability and documented on the child's IEP/IFSP, Contra Costa Community Services Bureau will access resources, recommend placement options, and provide staff training as needed.

Children with disabilities may not be denied enrollment due to the following:

- Staff apprehension and/or unfamiliarity with the child's individual disability or special equipment required to accommodate the disability
- Inaccessibility of facilities,
- The need to access additional resources to serve a specific child to the extent possible,
- Unfamiliarity with a disabling condition or special equipment or devices needed to support the child
- The need for personalized special services

The policies governing Head Start program eligibility are the same for children with or without disabilities.

The Contra Costa Community Services bureau has instituted a variety of placement options for enrollment, including:

- Joint/shared placement with other agencies
- Shared provision of services
- Collaboration with the school district personnel to supervise special education services
- Shared enrollment slots
- Accepting kindergarten-aged eligible children in collaboration with school districts when IEP states the need

Children with disabilities identified for services are as follows:

- Children who have been diagnosed by a certified and/or licensed professional as "having a developmental delay or a disabling condition and have an IEP or IFSP."
- Children who may require special attention due to specific high risk factors who do not have a diagnosis. These children may not have an IEP or IFSP.

## B. Definitions

- 1. ACYF** - Administration on Children, Youth and Families, Administration for Children and Families, U.S. Department of Health and Human Services, and includes appropriate Regional Office staff.
- 2. Children with disabilities** - Children with intellectual disabilities, hearing impairments including deafness, speech or language impairments, visual impairments including blindness, serious emotional disturbance, orthopedic impairments, autism, traumatic brain injury, other health

impairments or specific learning disabilities; and who, by reason thereof, need special education and related services. The term children with disabilities for children aged 3 to 5, inclusive, may, at a State's discretion, include children experiencing developmental delays, as defined by the State and as measured by appropriate diagnostic instruments and procedures, in one or more of the following areas: physical development, cognitive development, communication development, social or emotional development, or adaptive development; and who, by reason thereof, need special education and related services.

3. **Commissioner** - Commissioner of the Administration on Children, Youth and Families.
4. **Day** - Calendar day.
5. **Delegate agency** - A public or private non-profit agency that a grantee has delegated the responsibility for operating all or part of its Head Start program.
6. **Disabilities coordinator** - Person on the Head Start staff designated to manage on a full or part-time basis the services for children with disabilities described in part 1308.
7. **Eligibility criteria** - Criteria for determining that a child enrolled in Head Start requires special education and related services because of a disability.
8. **Grantee** - A public or private non-profit agency that has been granted financial assistance by ACYF to administer a Head Start program.
9. **IFSP** - Individualized Family Service Plan for (ages 0-3) and **IEP** - **Individualized Education Program** for (ages 3-5) - A written statement for a child with disabilities, developed by the public agency responsible for providing free appropriate public education to a child, and contains the special education and related services to be provided to an individual child.
10. **Least Restrictive Environment** - An environment in which services to children with disabilities are provided:
  - To the maximum extent appropriate, with children who are not disabled and in which;
  - Special classes or other removal of children with disabilities from the regular educational environment occurs only when the nature or severity of the disability is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.
11. **Performance Standards** - Head Start program functions, activities and facilities required and necessary to meet the objectives and goals of the Head Start program as they relate directly to children and their families.
12. **Related services** - Transportation and such developmental, corrective, and other supportive services as are required to assist a child with a disability to benefit from special education, and includes speech pathology and audiology, psychological services, physical and occupational therapy, recreation, including therapeutic recreation, early identification and assessment of disabilities in children, counseling services, including rehabilitation counseling, and medical services for diagnostic or evaluation purposes. The term also includes school health services, social work services, and parent counseling and training. It includes other developmental, corrective or

supportive services if they are required to assist a child with a disability to benefit from special education, including assistive technology services and devices.

- Assistive technology - Any item, piece of equipment, or product system, whether acquired commercially off the shelf, modified, or customized, that is used to increase, maintain, or improve functional capabilities of individuals with disabilities.
- Assistive technology service - Any service that directly assists an individual with a disability in the selection, acquisition, or use of an assistive technology device. The term includes: The evaluation of the needs of an individual with a disability; purchasing, leasing, or otherwise providing for the acquisition of assistive technology devices by individuals with disabilities; selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing, or replacing of assistive technology devices; coordinating and using other therapies, interventions, or services with assistive technology devices, such as those associated with existing education and rehabilitation plans and programs; training or technical assistance for an individual with disabilities, or, where appropriate, the family of an individual with disabilities; and training or technical assistance to professionals who employ or provide services involved in the major life functions of individuals with disabilities.

**13. Responsible HHS (Human Health Services) official** - The official who is authorized to make the grant of assistance in question or his or her designee.

**14. Special education** - Specially designed instruction, at no cost to parents or guardians, to meet the unique needs of a child with a disability. These services include classroom or home-based instruction, instruction in hospitals and institutions, and specially designed physical education if necessary.

### C. List of Disabling Conditions

The classification of a child as “having a disabling condition” requires diagnosis by a qualified professional. Children with disabling conditions require special education and related services, due to one or more conditions including, but not limited to:

- Autism
- Emotional /Behavior Disorder
- Developmental Delay
- Health Impairment
- Hearing Impairment and Deafness
- Intellectual Disability as of Oct. 2010 instead of Mental Retardation
- Learning Disabilities
- Orthopedic Impairment
- Speech/Language Impairment
- Traumatic Brain Injury
- Visual Impairment and Blindness
- Other impairments

No child will be identified as having a disability because of speaking a language other than English, economic circumstances, ethnic or cultural factors, or normal developmental delays.

#### D. Responsibilities of CSB Full Inclusion Teacher

- Work collaboratively with the Site Supervisor, Comprehensive Services team and school district full inclusion staff.
- Share joint responsibility for all students in the class with regard to the implementation of indoor and outdoor activities with the School District full inclusion teacher (Special Education Teacher)
- Obtain appropriate documentation (copy of IEP or IFSP) that identifies the child as having a disability and be aware of other services provided to the child.
- Complete child observations in the classroom.
- Ensure each child's safety and assist identified children with self-help skills while they are receiving services.
- Assist school district full inclusion staff with bathroom procedures including diapering and toileting.
- Participate in family meetings and IEP/IFS meetings regarding children in the class.

#### E. Responsibilities of School District Special Day Classroom (SDC), Response to Intervention (RTI) and Full Inclusion Teachers

School District and CSB Staff work in collaboration to ensure the children and families receive needed services while ensuring the education and safety of the children under their supervision.

##### 1. Full Inclusion Staff:

- Follow all Community Services Bureau policies and procedures.
- School District Inclusion Teacher (Special Education Teacher) and CSB inclusion teacher share joint responsibility for all students' supervision during small and large, indoor and outdoor activities. This includes assisting full inclusion children in bathroom procedures (including diapering and toileting).
- Provide special education services to identified children by ensuring the children's IEP goals are addressed, maintaining accurate records of evaluations documenting progress, and meeting with families.
- Follow CSB transition protocols
- Participate in team planning for classroom inclusion strategies, family meeting team meetings and IEP meetings.
- Participate in program collaboration meetings.
- Collaborates completing children's assessments

##### 2. Special Day Class Staff:

- Ensure the safety of the children under their direct supervision (SDC).
- Collaborate directly with the Comprehensive Services Team to ensure the family and children comply with CSB mandates.
- While in the playground, SDC teaching staff and CSB Teacher share joint responsibility for supervision of all students during small and large outdoor activities.
- SDC teachers are responsible for providing special education to identified children, ensuring the

children's IEP goals are addressed, maintaining accurate records of evaluations, documenting progress, and meeting with families.

- Follow CSB transition protocols
- Participate in family meetings, SDC program collaboration meetings and children IEP meetings.
- Participate in program collaboration meetings.

## F. Responsibilities of the Comprehensive Services Team

### 1. Comprehensive Services Clerks

- Complete CSB temp files at intake.
- Flag files using the red/yellow flag system to alert the staff and assistant manager as to the child's health, nutrition, social-emotional and developmental needs to also include parental concerns and/or family needs.
- Communicate to comprehensive services assistant manager if child's physical exam/baby well check or sensory/developmental screening results indicate concerns.
- Keep accurate records of child health, nutrition and families services information.

### 2. Comprehensive Services Assistant Managers

- Review all records relating to the child's health history, medical records and screening results to ensure children with suspected or identified concerns receive further evaluations and services.
- Carefully review and follow up on intake files flagged with the red/yellow system
- Facilitates family meetings as needed to provide early interventions to children with identified concerns based on health, nutrition, social-emotional and developmental screenings.
- Facilitates pre-enrollment family meeting for new children entering our program with identified health, nutritional, social-emotional and developmental needs.
- Maintain close communication with parents and staffs to ensure the delivery of services and resources/referrals are in place and in accordance with the individual needs of the child and the family.
- With parental consent participate in IEP/IFSP meetings and any other meetings related to the services the child/family are receiving.
- Reviews and discusses Parent's Rights and Responsibilities under the Individual with Disabilities Education Act IDEA
- Supports and provides Advocacy resources to parents.
- Maintain accurate and up-to-date documentation regarding current IEP/IFSP and other services provided to the child and family in the children's file and in CLOUDS.
- Coordinate, schedule and participate with the site supervisor in transition planning for children moving from Early Head Start to Head Start and from Head Start to kindergarten; especially for those children with IEP and IFSP.
- Coordinate and schedule transportation to facilitate the child/family participation in evaluations/assessments or the IEP/IFSP meeting. Assist families, as needed in finding public transportation so they are able to participate in meetings.



- Consult and maintain open communication with the disability services manager and other content area managers as needed.

### **3. Responsibilities of the Comprehensive Services Disabilities Manager**

- Coordinate and Monitor the delivery of services provided by Community Services Bureau in collaboration with outside agencies to children with suspected and diagnosed disabilities and their families.
- Review, update and implement the Community Services Bureau Disability Services Plan.
- Review, update and train Community Services Bureau staff on following disability protocols to ensure that policies and procedures are implemented consistently.
- Create, review, and update interagency agreements with community agencies serving children with disabilities in an effort to:
  - Participate in the public agency's Child Find plan under Part B of IDEA
  - Participate in or lead joint trainings for staff and parents
  - Create procedures for mutual referrals and placements
  - Plan for transitions to provide support for children and families
  - Share resources
- Coordinate delivery of services and provision to children with a suspected or diagnosed disability.
  - Coordinate with other content area managers the timely completion of health/cognitive screenings.
  - Monitor site data reports to ensure that children received early intervention as a result of their screening and assessments results.
  - Participate in family meetings, and IEP/IFSP meetings as needed.
  - Assist teaching staff with trainings based on a specific disability or as requested.
  - Monitor the implementation of services provided to children with disabilities based on their IEP or IFSP goals and objectives.
  - Monitor the disability referrals tracking system to ensure child referrals are followed up accordingly.
  - Coordinate and monitor classrooms adaptations, accommodations and modification based on the individual needs of the child.
  - Assist identified parents with resources and advocacy information to prepare for meetings with the Regional Center or School District to develop an Individual Family Services Plan (IFSP) or an Individual Education Program (IEP).
  - Regularly visit classrooms to ensure that children with suspected and identified disabilities receive the individualization and accommodation they need based on their IEP and their individual needs. Monitor the delivery of services from both Community Services Bureau and the collaborative agencies.
  - Monitor delivery of services to children with disabilities and their families when transitioning from home to center based program, from infant/toddler program (EHS) to Preschool Program (HS) and from Preschool Program (HS) to Kindergarten. Participate in transition plans and meetings as needed.
- Provide disability content area assistance, and support to upper management, teaching staff including home based and comprehensive services team.
- Monitor disability reports for accuracy and timely completion of delivery of services to comply with PIR (Program Information Report) requirements.
- Review Program Self-Assessment reports and create follow up action plans when needed.

- Manage allocated funds to purchase or lease of special equipment and materials for use in the program and home to assist the child to move, communicate, improve functioning or address objectives listed in the child's IEP/IFSP.
- Track and provide a detailed report to the Assistant Directors of the number of children enrolled in HS and EHS with disabilities, including the types of disabilities.

### **G. Documentation of Disabilities Services**

CSB must maintain a record of all services provided to children with disabilities and their families. Children's records are confidential and are maintained in locked files and password-protected in the CLOUDS data system. Data from these records are used to prepare the annual Program Information Report (PIR).

### **H. Postural Supports / Protective Devices**

Children needing protective, postural or medical devices due to a disability must have a written request from a physician or an IEP/IFSP Team indicating such need. The Comprehensive Services Disabilities Manager works with educational and health staff to ensure that children with disabilities use approved medical devices including, postural or supportive restraints that are in accordance with state requirements and have CSB approval.

The use of any medical appliances, devices or supportive restraints must be secure and able to be released in a way that is in compliance with fire clearance and earthquake safety.

CSB Teachers and Site Supervisors directly working with the children should be trained in the use and care of such devices prior to the child starting the program. The training should be documented in the family meeting notes with attached signatures of the trainer and trainees.

### **I. Disabilities Resources**

The Comprehensive Services Disabilities Manager works with the Special Education Local Plan Area (SELPA) and other collaborative agencies to utilize all available resources to ensure involvement of the child and family in the program. The Comprehensive Services Disabilities Manager is responsible for developing a coordinated plan with all agencies working with the child and family.

### **J. Additional Services**

Community Services Bureau must ensure that services for children with disabilities will be planned and delivered as required by their IEP/IFSP, that the IFSPs and IEPs are being reviewed and revised as required by IDEA and that the children are working towards their goals.

- CSB plans and implements the transition services for children with IEP/IFSP to ensure steps are undertaken in a timely and appropriate manner to support the child and family as they transition into a new setting.
- All components of the Community Services Bureau program are appropriately involved in the integration of children with disabilities and their parents.

The Community Services Bureau Disability Manager coordinates with other service managers the provisions for children with disabilities to be included in the full range of activities and services normally provided to all Head Start children and ensures provisions for any modifications necessary to meet the special needs of the children with disabilities.

#### **K. Disabilities Budget Coordination**

The Comprehensive Services Disabilities Manager is the designated liaison for special education services. Disabilities services outlined in the budget follow the regular budget procedure of parent and staff input with final approval.

#### **L. Special Education Budget Allocation**

The CSB program works within its budget to assist in providing needed services to children with disabilities. The program accesses all available sources to insure that all needs identified in the IEP or IFSP are met. This includes the local and state LEAs, SSI funding, other agency support, and local educational institutions. Every effort is made to utilize community resources to meet the needs of each child with disabilities enrolled in the program.

#### **M. Disabilities Screenings**

Parents complete a comprehensive health screening while completing the child's health history at the intake process. There after all preschool and infants and toddlers children including children with IEP/IFSP are screened within 45 days by the teaching staff in the areas of social and emotional development using ASQ-SE and cognitive development using ASQ-3 within 45 days.

The Comprehensive Services Team screens preschool children in hearing, vision, and nutrition, within 45 days of initial enrollment and for infant and toddler follow the vision and hearing assessments based on the EPSDT schedule. Comprehensive services staff completes the screening results form within 75 days and communicates results to parents. The screening results are used for beginning the individualization process for each child.

The Site Supervisors are responsible for working with the Teachers and Comprehensive Services Team to ensure that the ASQ-3 and ASQ-SE screening are completed within 45 days of child's entry. Teachers will give each child time to adjust to the new environment before completing the screenings. Lead teachers review and initial all education screenings to ensure they are accurately completed and meet required timelines.

Designated site staff enters the screening data in CLOUDS. The Teacher places original documents for Ages and Stages Questionire-3 (ASQ-3) and Ages and Stages Social Emotional (ASQSE) behavioral screening in the Education section of the family file. Children with screenings that show concerns will be rescreened within thirty days to ensure the validity of the original screening.

If concerns arise after developmental and social-emotional re-screening, the teacher will communicate with the Site Supervisor and Comprehensive Services Assistant Manager to discuss options for referring the child for further evaluation/s. If concerns arise after sensory re-screenings the Comprehensive Services staff will follow the same process.

## N. Evaluations

Children are recommended for further evaluation based on screening results, parent's concerns, based on staff observations and other professional recommendations. Referrals for further evaluations are discussed with the parent at a family meeting.

## O. Accessibility of Facilities

All Community Services Bureau facilities are ADA (American Disabilities Act) compliant. Additionally, CSB in conjunction with other agencies provides special furniture, equipment and materials in order to meet the individual needs of children with disabilities.

## P. Transitioning Children with Disabilities

### 1. IFSP Transition

- All infant toddler transition plans start when the child turns 30 months old. The Parent, Site Supervisor, Teacher and Comprehensive Service Assistant Manager meet together to plan the transition and complete the Infant Toddler Transition Plan Form (CSB 161). A plan is completed for all children transitioning out of EHS including children with a current IFSP.
- When a child with IFSP turns 30 months and no later than 90 days prior to their 3<sup>rd</sup> birthday the family and child will go through the IFSP Transition Process. This transition is initiated by the IFSP team and both parties the Early Intervention Program (Part C Services of IDEA) School District (Part B of IDEA) participate in this process. The IFSP transition meeting includes but is not limited to the Parent and any family member for support, the Early Intervention Provider, the School District Coordinator, the Special Education teacher, the Comprehensive Services Assistant Manager or Comprehensive Services Disabilities Manager, and the CSB Teacher or Home Educator. The team will create a transition plan; evaluate the child's strengths and areas of concerns, schedule further evaluation by the School District and a diagnosis meeting. Following the evaluations the child may or may not qualify for an IEP services under the School District and exit the Early Intervention Program (IFSP) the day before the child turns 3 yrs. old.

### 2. IEP Transition into a HS program

Another opportunity for transition begins when the child qualifies for an IEP and placement is available at a CSB site. When this occurs a family meeting conference is held to evaluate and plan how to best serve the child and how to support his/her learning based on the child's IEP goals. Evaluation of the classroom and outdoor environment will take place in an effort to identify needed accommodation including adaptive furniture or materials, modification of classroom schedules and routines to meet the individual needs of the child. This Transition Plan may include a gradual transition that involves both programs over a period of time. Any needed staff training will be provided as part of the plan.

### 3. IEP Transition out of HS program

For children transitioning out of the program into another program, the Teacher, Home Educator or Comprehensive Services Assistant Manager coordinates with parent and School District as to how to support the child's transition. The meeting is to explore possible placements for the child. Included in the meeting are the child's parent, School District Coordinator, Teacher or Home Educator, and other professionals providing services for the child and family. When the most appropriate placement for the child has been decided, the teacher and the family will initiate a meeting with the child's new Teacher. At that time, a plan for a gradual transition including visits to the new program and sharing information about the child and their individual plan takes place.

### Q. Transition Policy for Early Head Start Children Receiving Mental Health or Special Education Services

- For EHS children receiving mental health services, CSB must consider the children's disabilities in transitioning from the EHS program to the HS program. If an EHS child who is receiving mental health or special education services turns 3, the child must not automatically be terminated from the program. Transition planning must consider the child's individual developmental and emotional needs as well as age.

The following steps will be followed to support the child's transition:

- If a child is receiving mental health services from Community Services Bureau's Mental Health unit, a transition-planning meeting will take place approximately 6 months before the child's 3rd birthday to address the child's individual circumstances. The family, teachers, site supervisor, comprehensive services assistant manager and mental health clinician will participate in a family meeting.
- If it is determined that the child is developmentally and/or emotionally not ready to move into the HS program, the child can remain in the EHS program until such time when it is determined that the child is ready to transition to the HS classroom (Site Supervisor to Check on Center Based License Regulation to see if this is feasible.)
- If there is a time gap between the child's 3rd birthday and the beginning of the HS program, so as to ensure continuity in educational and mental health services, the child may remain in the EHS program until he/she can transition into the a HS classroom. (Site Supervisor to Check on Center Based License Regulation to see if this is feasible.)

### R. Special Education and Related Services

All infants/toddlers and preschool age children entering Community Services Bureau must have a well-child exam within 30 days of enrollment. Those preschool children who did not receive a hearing and vision screening as part of their well-child exam will be screened by in-house certified trainers within 45 days of enrollment.

Children identified with concerns are referred back to their physician for further evaluation or referred to a community agency for assessment. Children who qualify after assessment receive services from the

Special Education Local Plan Area (SELPA) or the Regional Center under an IEP or IFSP plan in accordance with our interagency agreement.

A mental health consultant is available to discuss behavioral/mental health concerns that the family, teacher or home visitor may have about a child. The consultant will share non-confidential information with the teacher/home educator and families, and work with them to develop a plan for the child.

When no other alternative is available, the comprehensive services team provides transportation for the guardians and child to obtain evaluations. When services are not provided on site, parents are assisted in finding public transportation to clinics or service providers.

Community Services Bureau works collaboratively with all other agencies involved with the child and the family to meet the objectives in the IEP or IFSP.

Community Services Bureau, subject to budgetary allowances, will purchase any assistive devices identified in the IEP or IFSP that cannot be funded through outside agencies.

Comprehensive Services staff forms collaborative partnerships with individual families to develop a Strength Building-Family Partnership Agreement (SB-FPA) twice a year. Comprehensive Services staff provides families with community resources such as, parent support groups, parent trainings, advocacy and child development among others to assist families to reach their SB-FPA goals.

### **S. Special Education Services with Other Agencies**

CSB refers children to the Local Education Agency (LEA) for further evaluation/s when there is strong documentation that early intervention is necessary now and we cannot prolong waiting for screening results. Such documentation may be based on parents, teachers and other professional's observations and recommendations.

Following the preschool age child assessment administered by the LEA an IEP meeting is held that includes the child's family, teacher or home educator and comprehensive services assistant manager, and the LEA representative. At this time, appropriate placement is determined and a service plan is developed for the child. For children who do not qualify for placement with the LEA, Community Services Bureau addresses the child's individual needs within the classroom or during a home based visit and seek guidance from Mental Health, other professional, including outside services, to determine if concerns will affect child's development and school readiness.

An IEP meeting is held to develop a plan and establish goals for children with disabilities transitioning in or out of the program. CSB and the LEA share resources as appropriate at this time. This resource sharing includes use of the classroom for any individual, family or group work that is necessary for the child's success. The LEA staff member also shares ideas and materials with the CSB teaching staff as applicable to foster attainment of IEP goals.

Children enrolled with a diagnosed disability and have a current IEP or IFSP, receive individualized education based on their unique needs. For center based care, if a child's IEP or IFSP indicates a part-time schedule, he/she may share an enrollment slot with another child. Children with shared placement in Community Services Bureau and outside agencies receive careful monitoring to ensure that the

program developed for them in each placement is meeting the needs of the children. Frequent communication among the service providers is necessary to ensure this. The family also plays a key role in assessing the success of the shared placement.

#### **T. Volunteers**

CSB welcomes community volunteers and student interns from colleges. Whether paid or volunteer, all staff working with children with disabilities, are provided training that includes specific identified topics relating to the unique needs of each child. General training topics also include working with children in group situations and respecting child/family confidentiality (Health Insurance Portability and Accountability Act - HIPAA regulations).

#### **U. Special Education Staff**

Community Services Bureau ensures that the Disabilities Services Plan addresses program efforts to meet state standards for personnel when serving children with disabilities. Special education and related services are provided by or under the supervision of personnel meeting state qualifications. All staff working with children with disabilities meets required state special education standards for personnel serving children with disabilities. Training and supervision that meet special education standards are developed in collaboration with Local Education Agencies.

#### **V. Interagency Agreements**

CSB maintains an interagency agreement with the Contra Costa County Special Education Local Plan Area (SELPA) and the Regional Center of the East Bay (RCEB) to establish shared guidelines for providing services to identify children with disabilities within the CSB program.

CSB participates in the Local Education Area (LEA) Child Find plan (Child Find is a component of the IDEA) by providing information on application and enrollment guidelines to the LEA and supporting them with the enrollment of eligible children.

#### **W. Recruitment and Enrollment**

All personnel responsible for the recruitment and enrollment of children are knowledgeable of all laws (Nondiscrimination on the Basis of Handicap in Programs and Activities Receiving or Benefiting from Federal Financial Assistance and of the American with Disabilities Acts) and Head Start mandates regarding children with disabilities.

Interagency agreements between Community Services Bureau, Local Education Agencies and Regional Centers are developed, maintained and updated annually to aid in the recruitment, enrollment and mainstreaming of children with disabilities. Referral sources are maintained, utilized and updated to provide needed services for children with disabilities. Special efforts are made to recruit children with severe disabilities.

All staff involved with the recruitment and enrollment of children with disabilities receives training on children's records as they apply to each child file.

Obstacles (including staff apprehensions, inaccessibility of facilities, provision of additional resources necessary for child's specific needs, unfamiliarity with a disabling condition or special equipment, and the need for personalized special services) are addressed through needed program adaptations and trainings and do not affect a child's enrollment.

Enrollment placement takes into account the number of children receiving services under the disabilities area, including types of disabilities, severity of the disability, and services and resources provided by other agencies. Resources and placement options are utilized according to a child's IEP or IFSP. Children with disabilities enrolled in Community Services Bureau programs follow the same eligibility enrollment procedures stated in the Community Services Bureau Policies and Procedures and comply with all licensing regulations for center based programs. Children with a current certified IEP or IFSP may have an over income waiver to qualify them for the HS/EHS program.

Families with children who have a current certified IEP or IFSP may qualify for an over income waiver to enroll in a HS or EHS program. At the same time families enrolled in double funded programs (State/Federal) may have a fee, based on the state portion of the program.

Children with a current certified IEP or IFSP, sharing blended state-federal funding, must comply with state requirements and provide CSB with a copy of the child's IEP or IFSP and the Exceptional Needs Verification Form (CSB625) completed in full.

The Comprehensive Services Disabilities Manager monitors the recruitment and enrollment of children with suspected disabilities and certified IEPs or IFSPs.

#### **X. American with Disabilities Act (ADA) Policy – Recruitment and Enrollment of Children with Disabilities**

The Americans with Disabilities Act (ADA) is a federal law, enacted in 1990, that provides child care professionals with an exciting opportunity to serve children with special needs or disabilities. The law guarantees that children with disabilities cannot be excluded from "public accommodations" simply because of a disability. CSB takes steps to ensure full ADA compliance; to identify the unique needs of each child and family; to facilitate the individualization process in collaboration with the family; and to make needed modifications in policies, practices and/or procedures as deemed reasonable.

During intake, the individual needs of each child and family are reviewed. Based on information presented at this time a child may or may not have a suspected or diagnosed disability. However, if determined that the child has a diagnosed disability (IEP/IFSP), the parents are required to provide such documentation for review.

The site team, with the appropriate comprehensive services manager will review the intake file to include if available IEP/IFSP documentation. After reviewing all documentation and as applicable a family meeting will be scheduled with the family and other related professionals to:

- Further identify child/family strengths and needs
- Define needed accommodations/adaptations
- Identify staff training needs and support
- Identify any additional action that may be needed



Following the family meeting in collaboration with the comprehensive services manager the site team will:

- Initiate an individualized assessment of the child's needs as applicable. The process for an individualized assessment will be determined on a case by case basis:
- The process for an individualized assessment will be defined on a case by case basis and may include:
  - Reviewing additional medical or special services, records/information.
  - Gathering the most current medical knowledge and/or best objective evidence regarding the disability.
  - Observation of the child in a natural environment or through parent/child site visitations.
  - Medical guidance obtained from Public Health Agencies, Center for Disease Control, National Institute of Health, including the National Institute of Mental Health, and other such agencies.

Based on the findings of the previous actions, a proposal of accommodations/modifications to allow for the child to participate in the program will be presented to a management team (Including the Assistant Director). The team will determine if identified modifications constitute reasonable accommodations or if CSB can demonstrate that making such modifications would:

- Create undue financial burden/hardship (all resources available for use in funding and program operation will be considered)
- Fundamentally alter the nature of the program (essential elements of program as well as essential elements necessary for participant will be considered)

The management team must also determine if the child's presence would pose a direct threat to the health and safety of the individual child or others (factors to consider include: nature, duration, and severity of risk; probability of occurrence of injury; whether reasonable modifications of policies, practices, or procedures will mitigate or eliminate risk).

The team will:

- Recommend enrolling the child in appropriate placement
- Or provide a written statement of the reasons for reaching the conclusion not to enroll the child based on criteria stated above.

### **Y. Assessment Process of Children with Disabilities**

The Comprehensive Services Disabilities Manager in collaboration with Health and Education Managers coordinate the completion of sensory and cognitive screening of all children within 45 days of enrollment.

The Comprehensive Services Assistant Managers evaluate the need for further specialized assessment after all standard screenings have been completed.

In a family meeting families are informed of screening results and are encouraged to sign a written consent for requesting further evaluations with an outside agency when appropriate.

The Comprehensive Services Assistant Managers refers children for further formal evaluations to the LEA (3 years to 5 years) or RECEB (new-born to 2.9 years) according to the established referral procedure. LEA agencies have 60 days to process referrals and develop an IEP upon receipt of the family intake file. RCEB has 45 days to process the referrals upon receipt of the family intake file.

The evaluation procedure is conducted with the following provisions:

- Parental consent prior to evaluations
- Parents informed of their rights and responsibilities under IDEA
- An evaluation conducted in a culturally sensitive manner by trained certified/licensed personnel that speak the child's home language.
- More than one criterion will be considered in determining an appropriate program placement.

A multi-disciplinary team including the child's teacher will conduct an evaluation utilizing assessment materials validated for the purpose.

### **Z. Eligibility Criteria: Health Impairment**

Children will not be discriminated against if they present any health impairments such as, cancer, severe asthma, uncontrolled seizures, neurological disorders, rheumatic fever, heart conditions, lead poisoning, diabetes, blood disorders, cystic fibrosis, heart diseases, ADD, AIDS and other medically fragile conditions.

CSB must ensure all individuals with disabilities are protected from discrimination under and provided with all services and program modifications required by section 504 of the Rehabilitation Act (29 U.S.C. 794), the Americans with Disabilities Act (42 U.S.C. 12101 et seq.), and their implementing regulations.

Children who meet specific criteria including level of functioning, age, onset of indicators and documented reports may be classified as having Health Impairment.

Children with suspected health impairments are referred for further evaluation. With the parent's consent, CSB teaching staff will provide documentation of behavior observations relevant to the impairment, to the appropriate professional for assessment. Upon receipt of a physician evaluation, a family meeting will take place to ensure that CSB can accommodate the individual needs of the child.

### **AA. Eligibility Criteria: Emotional / Behavioral Disorders**

The identification of children with emotional/behavioral disorders involves specific characteristics, the use of multiple sources of data such as child's health history, behavior screening results, teachers/parents observation notes, and the child's Head Start physical exam.

Children suspected of having an emotional/behavioral disorder are referred for further evaluation to appropriate community agencies to determine whether IEP services are appropriate. Upon receipt of a diagnosis, a family meeting will take place to ensure that CSB can accommodate the individual needs of the child in the classroom.

### **BB. Eligibility Criteria: Speech or Language Impairments**

All HS children are screened for speech and language delays, within 45 days of enrollment using ASQ-3. Infant/toddlers and preschool children with suspected speech/language delays are referred for further evaluation to RCEB or SELPA. If a determination is made for intervention or special education, an IEP or IFSP will be implemented through the outside agency (Regional Center or SELPAs). When referring children for assessments, careful consideration is given to cultural, ethnic and bilingual differences as well as temporary disorders and delays that fall within the normal range for the child's age. Upon receipt of evaluation and diagnosis, a family meeting will take place to ensure that CSB can accommodate the individual needs of the child in the classroom.

#### **CC. Eligibility Criteria: Intellectual Disability**

"Intellectual Disability" is the term in IDEA replacing Mental Retardation (Rosa's Law, 2010). After screening is completed children suspected of having any delays/deficits in adaptive behavior are referred for further evaluation to the LEA and/or physician and/or MH services. A family meeting will be scheduled upon receipt of the diagnosis to ensure proper placement and support is provided for the child.

#### **DD. Eligibility Criteria: Hearing Impairment**

All children are screened for hearing loss through the program or by their physician. Children needing further evaluation are referred back to their private physician and to the SELPA or to the Regional Center. Upon receipt of evaluation and diagnosis, a family meeting will take place to ensure the CSB can accommodate the individual needs of the child in the classroom.

#### **EE. Eligibility Criteria: Orthopedic Impairment, Visual Impairment / Blindness**

Children suspected of having an orthopedic impairment including but not limited to spinal bifida, cerebral palsy, loss of or deformed limbs, arthritis, or muscular dystrophy are referred to their pediatrician for further evaluation. Children requiring special services are referred to the SELPA or Regional Center and the California Children Services.

All children have vision screenings through the program or their physician. Children needing further evaluation are referred to their physician, an ophthalmologist and/or optometrist to determine whether the child is visually impaired.

Upon receipt of evaluation and diagnosis, a family meeting will take place to ensure that CSB can accommodate the individual needs of the child in the classroom.

#### **FF. Eligibility Criteria: Learning Disabilities**

All Head Start children are screened for possible learning disabilities. Children with suspected disabilities are referred to their physician and RCEB or SELPA as needed. Site Supervisors with the assistance of teaching staff provide classroom observations and child's work samples as needed to document the child's needs. Upon receipt of evaluation and diagnosis, a family meeting will take place to ensure that CSB can accommodate the individual needs of the child in the classroom.

### **GG. Eligibility Criteria: Autism, Traumatic Brain Injury, Other Impairments**

Children that present behaviors such as autism, traumatic brain injuries or other developmental impairments may qualify for services under the Regional Center of East Bay or Local Education Agency (LEA). CSB supports the early identification and intervention of children and following parental consent children are referred for further evaluation to outside agencies. Upon receipt of evaluation/diagnosis, a family meeting takes place to review the IEP/IFSP diagnosis. Based on IEP/IFSP goals and objectives, the best placement will be offered to support the child's enrollment in the HS program.

CSB must ensure all enrolled children are screened for autism at the ages 18 months and 24 months by their physicians based on EPSDT.

### **HH. Disabilities/Health Services Coordination**

The Comprehensive Services Disabilities Manager works closely with the Health Manager, CS Team and other staff in the screening, assessment process and follow-up to meet the needs of children with disabilities.

The Health and Disabilities Managers work together to ensure children's special needs are met and supervision of the administration of all prescriptions and over the counter medications occurs in accordance with state requirements. Children requiring medication must have the doctor's instructions and parental consent before the medication is administered. Individual records of all medications dispensed and a regular review with the child's parents occurs.

All medications are adequately labeled, locked and stored out of reach of children. Epi Pens labeled and accessible but out of children's reach. Individual medical plans are shared with the teaching staff and closely monitored for compliance. Any changes in a child's behavior related to a drug are shared with staff, parents and the physician. Pre-enrollment case management is encouraged to ensure CSB staff is aware of the individual needs of the child and accommodations can be made.

## **II. Developing Individualized Education Programs (IEPs)**

The School Districts provide families with advance written notification of IEP meetings. Family's participation in the IEP meeting are documented. Opportunities are provided for reviewing assessment results of the meetings and to request parent's input. Efforts are made to assure that families are knowledgeable about their parent's rights and responsibilities under IDEA and understand the purpose and proceedings of the child's program.

Head Start evaluates all pertinent information when determining eligibility and placement options of children with current s IEPs such as:

- Child's strengths and present level of functioning in all areas of development, strengths.
- Identification of challenges and needs in areas requiring specific services.
- Short and long term goals and objectives.
- Specific related services necessary for the child to participate in Head Start including those services provided by other LEAs and professionals.
- Personnel responsible for services provided, projected dates for initiation/duration of services and location of services.
- Evaluation procedures to determine the achievement of goals including family

- goals and objectives.
- Transition Plans
- Transportation if applicable

## JJ. Disability Referral Procedures

### 1. Description

The first five years of the children's life are times of rapid growth and learning. CSB provides rich learning and nurturing environment for them to grow and develop. Children develop at different rates and some may need extra support to reach their age appropriate milestones. The Community Services Bureau is committed to early identification of children at risk of developmental delays in order to provide the necessary early intervention that will lead to positive outcomes for the child.

### 2. Screening for suspected concerns

- i. Prior to enrollment and during the application period the child's file may be flagged using the Red and Yellow Flag System to alert the staff of known or suspected concerns based on the completed health history shared by the parent. The health history briefly screens children for possible health, nutrition, and socio-emotional and developmental risks.
- ii. Child's Physical Exams/Baby Well Checkups provide a great source of information and parents are responsible for submitting them to us within 30 days of enrollment thereafter as required by CHDP (Child Health and Disability Prevention.)
- iii. Sensory and developmental screenings and assessments are provided to all enrolled children within 45 days of enrollment.

Children determined to be in need of further evaluation/assessment based on screening results, staff observations, and/or parent observation are referred to the appropriate agency with parental consent.

### 3. Referral

The referral process is explained in detail to the parent during a family meeting. This meeting will take place in the parent's home language whenever possible. The CSAM will review agency referral protocols with the family including referral time lines, and requirements to complete the referral. CSAM will review with the family and provided copies of their Parent's Rights and Responsibilities under IDEA and advocacy resources.

Depending on the child's age Referrals could be sent to one of the agencies below:

- Regional Center/Early Intervention Agency (Children zero to two years "2.9 years")  
The process takes approximately 45 days from the date of referral.
- Local Education Agencies/Family Home School District (Children 3 to 5 years)  
The process takes approximately 60 days from the date of referral.

As part of a Family Meeting the parent is encouraged to sign the Child Referral and Parent Consent Form (CSB501); only after understanding the referral process and his/her parent rights under IDEA.

For Mental Health referrals, the medical provider information is completed on the referral form and a copy of the child's Medical card (if insured) is attached. When a child is on "Positive Guidance Policy Steps" and has a "Positive Guidance Plan", a copy of those documents (CSB521 & CSB134B), along with the child's Social-Emotional (ASQ-SE) and Developmental Screenings (ASQ-3) are included with the referral.

The Child Referral and Parent Consents Form (CSB 501), is reviewed to ensure the document is correctly filled out after acquiring parent signature. Additional signatures are obtained from the Site Supervisor and the Comprehensive Services Assistant Manager. A copy of this form (CSB501), is given to the parent, one to the assistant manager to process the referral and the original is placed in the file.

The Assistant Manager reviews the signed CSB501 form and processes it immediately. Once receipt of the referral is verified with the appropriate School District, Early Intervention Agency, or Mental Health Unit, the Assistant Manager completes the Response to Referral Form (CSB502).

The referral must be including:

- Child's Last and First name
- Child's birth date
- Gender
- Child's CLOUDS ID
- Child's center and Classroom #
- Current home address
- Family phone number#
- Parent's name
- Parent's language of preference
- Child's language of preference
- Medi-Cal or SSN # for Mental Health referral (No need of SSN or Medi-Cal for Disability referrals)
- Positive Guidance Plan and Positive Guidance Policy Step Letter if applicable
- Referral contact: CSAM's name and phone number
- Consents for exchange of information and assessment should be initialed by parent.
- Parent's signature
- Site Supervisor, CSAM or Home Based Teacher's signatures
- Parental check and initials for consent-referral and assessment
- Name/address of the agency referring to and providing consent for exchange of information
- If foster parent is requesting evaluations, CSAM must obtain the biological's parent consent. Or, request Social Worker consent signature

Agency to refer information:

- Determine Home School District for children 3 to 5 years old. Identify individual school referral requirements such as: Child's birth certificate, child's immunizations, copy of parent's ID, a copy of a utility bill and any other home addressed mail other than cell phone bill.
- Access RCEB or other intervention programs if the child is under 2 ½ years old.
- Fax signed form (CSB501) to outside agency and follow up with a confirmation phone call to ensure they have received the referral.

- Complete Response to Referral Form (CSB502)

The original Response to Referral form (CSB502) is placed in the child's file and a copy is given to the parent attached to any requested or additional relevant informational resources such as CARE Parent Network, IEP/IFSP program descriptions, advocacy resources, etc.

The CSAM enters the family meeting notes and intervention/referral information under the disability tab in CLOUDS (Intervention/Referral). A copy of the family meeting (CSB514) is placed in the child's file.

The CSAM will contact the family for a follow-up between 30 and 60 days after submitting the referral to ensure proper evaluation meetings are in place, proper support is given to the parent in preparation of the diagnosis meeting, and ensure participation in the IEP/IFSP meeting. Additional family meetings will follow as applicable.

#### **KK. Nutrition Services for Children with Disabilities**

The Comprehensive Services Disabilities Manager works with the Health Services Manager and the Nutritionist to ensure that provisions to meet the needs of each child are incorporated into the nutrition program.

Appropriate professionals are consulted to provide support for Head Start staff and families for children having severe disabilities and problems with eating.

Activities to help children with disabilities participate at mealtimes are implemented in the classroom after discussion in a family meeting.

Family meetings with CSB staff, other professionals and families are held to meet the nutritional needs of children with disabilities including the prevention of disabilities with a nutrition basis.

#### **LL. Parent Involvement in Transition Services for Children with Disabilities**

In an effort to support the transition of children with disabilities into CSB programs, or children transferring from one Community Services Bureau program to another, the parent will be asked to attend a family meeting (transition planning meeting) prior to enrollment or transfer. The focus of the meeting will be to:

- Review the IEP/IFSP goals and objectives as well as identify parent goals for child
- Determine the needs of the child
- Insure appropriate placement
- Plan program adaptations (if needed)
- Support family and foster team approach for service delivery
- Provide activities and information to the family to foster the child's development.
- Provide activities to the family to reinforce program activities at home.
- Provide family with resources such as Social Security (SSI), Early Periodic Screening Diagnosis and Treatment (EPSDT) programs and other community resources and assist them in accessing these resources.
- Provide family with information to prevent disabilities among younger siblings.

- Provide parent with information about their rights under the Individuals with Disabilities Act. (IDEA)
- Provide resources to family groups for children with similar disabilities who can provide peer and family support.

Comprehensive Services Team will support family through the children's transition from Early Head Start to Head Start or from Head Start to Kindergarten or to other agencies.

## **PART VII. Services to Pregnant Women Enrolled in the Program**

### **Enrolled Pregnant Women**

Staff addresses the needs for appropriate supports for emotional well-being, nurturing and responsive caregiving and father engagement during pregnancy and early childhood.

- 1. Health Care and Insurance** - Within 30 days of enrollment Comprehensive Services Staff determines the status of an ongoing source of continuous, accessible health care provided by a health professional that maintains ongoing health records and is not primarily a source of emergency or urgent care and health insurance for each enrolled pregnant woman. For those pregnant enrolled women, support is provided to gain access to health care and insurance as quickly as possible.
- 2. Family Partnership Services** - Comprehensive Services Staff engages enrolled pregnant women and other relevant family members such as fathers, in family partnership services focused on factors that influence prenatal and postpartum maternal and infant health. Staff provides support throughout the transition process with program options and transition to program enrollment, as appropriate.

Support Services Provided for Pregnant Women to Access Comprehensive Services through Referrals include:

- Assessment for nutritional status as well as nutrition counseling and food assistance, if necessary.
- Health/oral health promotion and treatment, including medical and dental exams, on a schedule deemed appropriate by attending health care providers as early in the pregnancy as possible.
- Mental health interventions and follow-up services
- Substance abuse prevention and treatment services as needed.
- Emergency shelter or transitional housing in cases of domestic violence.

Pre-natal and postpartum information, education and services are provided to pregnant women, fathers and other relevant family members on the following:

- fetal development
- the importance of nutrition
- risks of smoking, alcohol and drug use



- labor and delivery
- postpartum recovery
- parental depression
- infant care
- safe sleep practices
- the benefits of breastfeeding and accommodation of breastfeeding in the program

### Newborn Home Visit

Newborn visits are scheduled with each mother and baby within two weeks after the infant's birth to offer support and identify family needs.

Comprehensive Services Staff is responsible for ensuring compliance with the requirement for a Newborn Home Visit within two weeks after the infant's birth as follows:

- At enrollment - Educating each pregnant woman on the importance of the Newborn Home Visit and explaining the importance of agreeing to this visit when it is offered at the hospital following the birth of her child or when the Public Health Nurse calls to schedule the home visit.
- Prior to delivery due date - Reminding the parent of the Newborn Home Visit requirement.
- After delivery – Following up with mother to provide support as needed with scheduling or obtaining documentation of the Newborn Home Visit or following up with Public Health Nursing to ensure Newborn Home Visit or obtain documentation.
- Entering documentation of the Newborn Home Visit in the file and in CLOUDS.

## **PART VIII. Program Human Resources Management (Personnel Policies & Procedures)**

### **A. Statement of Purpose of Policies and Procedures**

These personnel policies are produced for the purpose of:

- Promoting an effective, efficient, and economic operation of programs;
- Providing fair and equal opportunity to all qualified individuals to enter employment with Employment and Human Services Department, Community Services Bureau (CSB) and assuring that employees are promoted or advanced under impartial procedures;
- Maintaining a program of recruitment and advancement which will provide career development opportunities;
- Maintaining a uniform plan of evaluation, duties and wages based upon the relative duties and responsibilities of positions in CSB;
- Employing persons who can perform their duties with competence and integrity.

### **B. Governing Board**

The ultimate authority to manage the Head Start and Early Head Start program is vested in the County

Board of Supervisors. According to Contra Costa County, Personnel Management Regulations, the Executive Director or Department has the authority to act on behalf of the County Board of Supervisors on certain personnel actions as stipulated throughout the regulations. All authority for day-to-day administration of CSB is delegated to the Community Services Director.

The Board of Supervisors, upon the recommendation of the Employment and Human Services Director, reserves the exclusive right to hire, evaluate, compensate or release the CSB Director (HS/EHS Director), Human Resources and Fiscal Officers. The Policy Council shall approve or disapprove in advance the hiring of the Community Services Director.

The Board of Supervisors delegates the authority of the Head Start and Early Head Start program to the Community Services Director or his/her designee, who is responsible for carrying out the policies, procedures, and intent of these policies to include power to employ, promote, assign duties and responsibilities, evaluate, train, reprimand, suspend, discharge, or reward employees within the guidelines of all applicable federal, state and local regulations.

CSB will observe standards of organization, management, and administration that will ensure, so far as reasonably possible, that all program activities are conducted in a manner consistent with the purpose of Head Start Performance Standards and the objective of providing assistance effectively, efficiently, and free of any taint of partisan political bias or person or family favoritism.

### C. Organizational Structure

This section contains policies governing the activities of all CSB employees. It is not intended to supersede the Memorandum of Understanding between Contra Costa County and Public Employees Union, Local One (MOUs), the Personnel Management Regulations (PMRs) or any other policies adopted by the County Board of Supervisors. It establishes standard procedures which are applicable to all programs operated by CSB, irrespective of funding source. Unless otherwise noted, all provisions of the manual apply to each and every employee of CSB. If the requirements of MOUs, PMRs, funding sources, and etcetera are less stringent than the provisions of this section, then these provisions will apply. If personnel provisions imposed by the MOUs, PMRs, funding source, et cetera conflicts with the provisions of these policies, then such regulations shall apply.

The Community Services Director or designee has the authority to identify and interpret regulations which conflict with these policies. Employees may not take it upon themselves to interpret regulations which may permit them or require them to behave in a manner which is inconsistent with the provisions of this policy. If doubt arises, employees must request their supervisors to secure a ruling from the Community Services Director or designee.

In addition to these policies, the MOUs, PMRs, management bulletins, memos, side letters, et cetera regarding personnel policies issued by the County and funding sources shall be considered a part of CSB's personnel policies and procedures whenever applicable. All personnel policies and practices contained herein are established in accordance with current applicable rules and regulations of CSB funding sources and other mandates. All CSB staff members are required to become thoroughly familiar with these policies and adhere to their provisions.

The Community Services Director and senior management are charged with the responsibility for assuring that all provisions of these policies are administered fairly and impartially.

According to Contra Costa County, Personnel Management Regulations, the Executive Director or Department Head has the authority to act on behalf of the County Board of Supervisors on Certain personnel actions as stipulated throughout the regulations.

#### **D. Additional Personnel Policies Relating to Employees of Program Services**

##### **1. Criminal Record Clearance (Background Check/Fingerprinting)**

###### **i. Live Scan (Fingerprinting) Process**

- According to the Head Start Act, 45 CFR 1304.3(a)(18) and California DSS, 101170(f), all employees/adults must be fingerprinted. Failure to obtain clearance free of an exemption or with and exemption and/or to comply with fingerprinting regulations will result in refusal of employment.
- Applicable employees must be fingerprinted and cleared before their first day of employment. CSB will not employ anyone without an active clearance with or without an appropriate exemption.
- CSB Personnel works with the County's Central Human Resources to schedule a Livescan appointment and provides the applicant with a Livescan form to take to their appointment.
- All CSB employees must obtain Federal Bureau of Investigation (FBI), Child Abuse index and California State Department of Justice clearance or appropriate exemption
  - After the Live Scan is completed, the Department of Social Services notifies the County's Central Human Resources (HR) of the results of the Livescan via a Department of Justice Letter of Criminal Record Clearance. Human Resources forward the letter to the CSB Personnel.
  - After receiving the Department of Justice (DOJ) Letter, CSB Personnel contacts the Community Care Licensing Office to verify the clearance and obtain a clearance number for the prospective employee.
    - If the candidate receives full clearance, CSB Personnel proceeds with the hiring/on-boarding process
    - In the case that a candidate is required to apply for exemption, CSB Personnel works with the candidate to complete the required documentation to apply for exemption. Only after CSB Personnel receives written notification from the Department of Social Services that the candidate is granted exemption to work in a childcare facility, the candidate is further advanced through the County's hiring/on-boarding process.
- The DOJ letter or Exemption Notification is kept in the candidate confidential Personnel File.

###### **ii. Re-checking Livescan Process**

- According to the Head Start Performance Standards 1302.90 (5) the program must conduct the complete background check for each employee, consultant, or contractor at least every five years, unless the program can demonstrate that it has a more stringent system in place that will ensure child safety.
- California Department of Social Services, Community Care Licensing Division automatically re-checks live scans continuously and notifies the program and the employee.
- Should a conviction or other charge occur while the employee is employed, CSB receives an “Immediate Action Required (IAR)” letter from the Department of Social Services Caregiver Background Check Bureau. In this case:
  - The Community Services Bureau Director determines the appropriate action to be taken based on the Child Care and Development Fund (CCDF) disqualification factors described in 42. U.S.C. 9858f(c)(1)(D) and 42 U.S.C. 9858f(h)(1).
  - If a manager receives an IAR letter, he/she is to notify CSB Personnel Unit immediately. If CSB Personnel Unit receives an IAR letter, they will notify the Manager, Site Supervisor and immediately have the employee removed from the facility. Disciplinary actions may be taken up to and including termination.
  - It is the responsibility of the employee to obtain a waiver form from DSS and submit the waiver. Any employee who obtains a waiver may apply for reinstatement and applications will be considered by personnel. If no waiver is obtained as requested by the Personnel Unit, the employee may be terminated from employment with Contra Costa County.
  - Declaration-The State requires that all current/prospective employees must sign a declaration, Criminal Record Statement prior to employment, which reveals any background information that might be detrimental to their employment with CSB. The declaration or Criminal Record statement must list:
    - All pending and prior criminal arrests / charges related to child sexual abuse and their disposition
    - Convictions related to other forms of child abuse / neglect
    - All convictions
  - The grantee must review each application for employment individually in order to assess the relevancy of an arrest, a pending criminal charge, or a conviction.
  - The declaration may exclude listing of:
    - Any offense, other than the ones related to child abuse and/or child sexual abuse or violent felonies, committed before the prospective employee’s 18th birthday which was adjudicated in a juvenile court or under a youth offender law
    - Any conviction the record of which has been expunged under Federal or State law
    - Any conviction set aside under the Federal Youth Corrections Act or similar State authority

### **iii. Requirements for Staff Providing Mental Health Services**

In addition to the above, for staff providing mental health services, such as the Mental Health Clinical

Supervisors and Mental Health Interns, CSB is required by the Department of Health Care Services (CCR, title 42, section 1128 or section 1128A of the Social Security Act and CFR, Title 42, section 438.214) to verify that at time of hire the Mental Health Supervisors and the Mental Health Interns meet the following:

- Are eligible to claim for and receive state and federal funds
- Have the required licensure that is current and valid
- Are not on the following individual/entities excluded provider lists:
  - [http://oig.hhs.gov/exclusions/exclusions\\_list.sp](http://oig.hhs.gov/exclusions/exclusions_list.sp)
  - <https://files.medi-cal.ca.gov/pubsdoco/SandILanding.asp>
- Thereafter, verification will be conducted on a monthly basis.

## **2. Emergency Procedures**

### **i. Chemical Accident**

In case of a shelter-in-place emergency, a manager will notify all affected sites. In this case, all employees are required to follow shelter-in-place protocols.

**SHELTER**—Go inside a building immediately to avoid exposure to airborne chemicals.

**SHUT**—Seal all doors and windows/turn off ventilation systems. (Locking doors and windows creates the best seal.) Parents must be informed during orientation that staff is not authorized to release children during a shelter-in-place accident.

**LISTEN**—Turn on the radio/listen for up-to-date information. Avoid using the telephone unless you have a life-threatening emergency. All sites must have a working radio available at all times.

### **ii. Earthquake Emergency**

Duck and cover under a table or desk, crouching on knees with face down and hand covering the back of the head.

- Stay clear of outer walls, windows, glass, cabinets, files, or shelves
- Evacuate the building to Assembly Area after counting 100.
- Avoid re-entry into the building.
- Allow the Building Warden to re-enter the building (searching for missing persons, assessing the extent of damage, turning off utilities as needed, and checking for gas leaks).
- Keep clear of overhead wires, poles, buildings, trees, and falling objects if outside.
- Prepare for aftershocks.

### **iii. Fire Emergency**

Notify the fire department immediately, giving required information:

- CSB building, room number, address, and other means of identifying location of the fire
- Description of size / type of fire
- Information regarding any injured people
- The name, telephone number, and extension of the employee reporting

- Evacuate all people from the fire area and close off the fire area using posted emergency routes.
- Report to Assembly Area (consult the Evacuation Plan)
- Use appropriate type of fire extinguisher. If smoke or heat endangers safety, evacuation of the area is required (to allow emergency personnel to handle the situation).

#### **iv. Medical Emergency**

- Provide appropriate first aid and/or cardiopulmonary resuscitation (CPR).
- Call the Fire Department if advanced first aid is required (911).
- Call an ambulance if appropriate (911).
- Send the injured to either the physical location of his or her choice or to the nearest medical emergency center or hospital. Notify the family of the injured.
- Report injuries to the appropriate supervisor and the designated CSB Personnel Analyst immediately. The supervisor is responsible for notifying Community Care Licensing via telephone within 24 hours and in writing within 7 days.
- If an injury results in death or hospitalization of an employee for over twenty-four hours, notify CSB Personnel and the Workers' Compensation/Safety Coordinator. She/he is responsible to inform the CCC Risk Management and the State Division of Occupational Safety and Health (CAL/OSHA).

### **3. Work-Related Injury and Illness**

All County employees who are injured or become ill as a result of their job are covered under workers' Compensation.

Workers' Compensation is a no-fault insurance plan paid for by the County and supervised by the State. It is a plan where fault does not have to be proven to receive medical expenses and lost wages. If an employee is unable to work because of a work-related injury or illness, (s)he is eligible for benefits. All benefits are determined by the California State Legislature.

#### **i. If an employee is injured or becomes ill as a result of her/his job, the following steps should be taken:**

- The employee must immediately notify her/his supervisor. All work-related injuries/illnesses, including first-aid, need to be reported.
- The supervisor must notify CSB Personnel (the designated Workers' Compensation/Safety Coordinator)
- The supervisor and the employee are to complete the required workers' compensation forms: CCC Supervisor's Occupational Injury or Illness Report Procedures (AK 30 –Part A & B), and Workers' Compensation Claim Form (DWC – 1), as soon as possible
- The supervisor is to submit the completed forms to CSB Personnel (CSB Workers' Compensation Coordinator) by the end of the business day of the injury/illness or by the end of the day (s)he became aware of the injury or the illness; The Supervisor is to fax the first white page of the DWC-1 and parts A & B of the AK-30, Supervisors Report, to the CSB Worker's Compensation/Safety Coordinator at Personnel on the day of the injury and to send the original paperwork via the Interoffice Mail.

- The CSB Workers' Compensation Safety Coordinator will submit the required documentation to CCC Risk Management Office. County policy requires the documentation to be submitted to Risk Management within 24 hours of the injury/illness
- Injured/ill employees are encouraged to seek immediate medical attention. The CSB Workers' Compensation/Safety Coordinator will provide information on medical facilities that can be visited in case of a work-related injury/illness
- The injured/ill employee may only return to work with a doctor's note stating that employee is cleared to return to work on that date. If the employee is placed on "Off Work" or any modified work status, (s)he must notify her/his supervisor and the CSB Workers' Compensation/Safety Coordinator about her/his status and fax/deliver the appropriate doctor's note to both parties
- Modified work will be assigned only by the CSB Workers' Compensation/Safety Coordinator in coordination with the employee's supervisor if accommodations are viable
- If an employee is ordered for follow-up doctor visits or therapy as a result of a job-related injury or illness, (s)he is required to attend all prescribed visits and furnish Work Status Reports to her/his supervisor and the CSB Workers' Compensation/Safety Coordinator after each visit
- Employees leaving work for appointments connected to work-related injuries/illness are to claim the time off as workers' compensation time (WC) on their time cards
- Doctor bills and hospital expenses related to on the job injuries or illness will be paid directly by the County. If an employee receives a bill that is related to a job-connected injury or illness, (s)he should notify the CSB Workers' Compensation/Safety Coordinator and should not pay the bill.

## ii. Return-To-Work Program

CSB participates in the Return-To-Work (RTW) Program. It is a plan utilized by Contra Costa County with the main objective to manage the employees' successful and timely return to work after a work related injury. The program facilitates the earliest possible return of an injured employee to meaningful, productive work within the parameters of her/his physical capabilities. If necessary, the program allows for temporary modifications to the employee's job description or position to accommodate the physical restrictions identified by the medical provider. Employees participating in the program are assigned transitional jobs. Two main transitional jobs are available for employees through the RTW program:

- Modified work within the employee's unit – this is usually for on-the-job injured employees who can perform their usual jobs full time or part time with significant accommodations
- Bridge Assignments – these are for employees who cannot perform their usual jobs, but can be assigned to other meaningful jobs. Usually, Bridge Assignments are much broader and employees assigned to them may be placed in any of the EHSD's Bureaus or even other County Departments.

Assigning employees to transitional jobs is facilitated by the CSB RTW Coordinator (Personnel) in collaboration with the employee's supervisor. While in the RTW program, each employee is required to furnish Personnel with Work Status reports after each visit with the Worker's Comp doctor.

Employees with work related injuries benefit from participating in the RTW Program by returning back to work quickly, by continuing to participate in meaningful jobs and maintaining their self-esteem, by the on-the-job hardening, and faster recovery.

#### **4. Ergonomic Safety and Evaluation**

All employees are expected to maintain their work environment and equipment safe and in good repair. Employees are to organize their work space considering basic ergonomic and safety practices such as, easy access/reach of desk equipment, appropriate lighting, use of appropriate equipment, avoidance of forceful lifting, pushing or pulling, prolonged repetitive motions. Employees performing mainly sitting jobs are encouraged to periodically change activities and positions, take small stretch breaks to reduce repeated stress to various parts of the body.

Employees who experience discomfort by using their work equipment or have doctor's recommendation for ergonomic evaluation are to notify their direct supervisor and request evaluation. The supervisor should contact CSB Personnel, the Workers' Compensation/Safety Coordinator and request ergonomic evaluation for the employee. The CSB Workers' Compensation/Safety Coordinator will review the request and arrange for the evaluation.

After the completion of the ergo evaluation, the employee and her/his supervisor will receive a copy of the evaluation report and an Ergonomic Equipment Acknowledgment Form. The employee is to review and keep the copy of the evaluation. Both the employee and the supervisor are to sign the Ergonomic Equipment Acknowledgment Form and return the original to the CSB Workers' Compensation/Safety Coordinator at the Personnel Unit for authorization of the recommended ergonomic equipment.

The CSB Workers' Compensation/Safety Coordinator will work with the CCC Ergo Lab to ensure the appropriate accommodations are made and that the employee is trained on ergonomic and safety practices. Ergonomic Equipment Acknowledgment forms sent by the employees directly to the CCC Ergo Lab without the authorization of the CSB Workers' Compensation/Safety Coordinator will not be accepted by the Ergo Lab and the requested equipment/accommodations will not be provided.

#### **5. Employee Relations**

As a part of a team providing services for the benefit of the public, each employee must cooperate with co-workers and supervisors and the public through professionalism and mutual respect in order to set a high standard of work performance. The entire staff of CSB must function as a team. Each employee is required to make a positive contribution in the interest of efficient public service.

Unwillingness or failure to cooperate will not be tolerated and will be cause for disciplinary action.

#### **6. Smoke-Free Environment**

CSB will create a smoke-free environment and eliminate exposure to tobacco smoke by children, staff, parents, and visitors in the Head Start program.

Under California labor code, it is unlawful for any individual to smoke tobacco products in an enclosed workplace.



Furthermore, in June 2014 the Contra Costa County Board of Supervisors adopted a Smoke-Free Contra Costa law which prohibits smoking, including use of medical marijuana and electronic smoking devices such as e-cigarettes. This law, which will be fully enforced on March 1, 2015, prohibits smoking as follows:

- In all buildings, vehicles, and other enclosed areas occupied by county employees, owned or leased by the county, or otherwise operated by the county.
- In all outdoor areas owned or leased by the county, including parking lots, the grounds of the county's hospital and health clinics, and the grounds of all other buildings owned or leased by the county.
- In personal vehicle, whether parked or in motion, if it is located on property owned by the county.

Employees leaving the County property to smoke or use electronic smoking devices, have to be mindful of their personal safety while off county property. Staff is encouraged to wear protective wear, such as a smoke or "smoking jacket" so that when they finish smoking, they can remove it so as to not carry the tobacco chemicals on their clothing into the classrooms or offices.

Adults are also prohibited from smoking during group socialization activities, such as field trips, neighborhood walks, and other outdoor activities. The only situation under which this does not apply is during a presentation or field trip related to American Indian cultural customs in which tobacco is utilized.

Educational and wellness activities, such as smoking cessation programs for adults and inclusion of developmentally appropriate activities in health education for children will be developed to assist in carrying out smoke-free policies. Staff and parents are encouraged to call the California Smokers Helpline at 1-800-NO-BUTTS (English speakers) or 1-800-No-Fume (Spanish speakers) or to visit <http://cchealth.org/tobacco/time-to-quit-smoking.php> for a list of local cessation resources. Additional information and resources are available by contacting the Comprehensive Services Unit's Health Services Manager.

## **7. Drug-Free Work Environment**

In Compliance with the Federal Drug-Free Workplace Act 1988, the Contra Costa County Board of supervisors instituted a Drug-Free Workplace Policy (Resolution No. 90/674 from October 16, 1990). The Board is committed to a Drug-Free Workplace because of the inherent dangers to employees who abuse drugs and/or alcohol. According to the Drug-Free Workplace Policy:

- The County prohibits the unlawful manufacture, distribution, dispensing, possession, or use of controlled substance in the workplace, and/or during work hours.
- Any violation of this policy may result in disciplinary action, up to and including termination, or when needed, mandatory participation of the employee in a drug-abuse assistance or rehabilitation program.
- Any employee convicted of any State or Federal criminal drug statute for a violation occurring in the County workplace or on County time, shall report the conviction to their supervisor, department manager or personnel officer no later than five (5) days after such conviction.

CSB strives to maintain a workplace that is reflective of the County Smoke-Free and Drug-Free Workplace Environment Policy. CSB employees are expected to conduct themselves responsibly. Upon report that an employee appears to be under the influence of alcohol or illegal drugs, the employee's supervisor must notify the Assistant Director or the Division Manager, or the Personnel Administrator.

One of these CSB Senior Managers and the employee's supervisor will immediately meet with the employee and determine if she/he is under the influence of alcohol or illegal drugs. If they determine that the employee is under the influence, the employee shall be instructed to immediately leave the workplace. An employee under the influence of alcohol or illegal drugs is to report back to work sober and clean of drugs at least one day after the incident. The employee has the option to claim unpaid time or to use her/his own accruals.

### **8. Solicitation of Goods**

Contra Costa County prohibits the solicitation of goods on any County property. Goods for sale will not be accepted, bought, or sold at any Grantee office or CSB center. This applies to commercial activities only. This does not apply to parent fundraising. Parent fundraising activities are reviewed and approved by the Policy Council and the Bureau Director.

### **9. CSB Telephone Usage Policy**

There may be times when personal telephone calls must be made or received during working hours. Personal telephone calls must be kept to a minimum, and may not interfere with classroom or business activities. CSB expects employees to make these calls during break or lunch periods. No long distance calls can be made on CSB telephones. Personal cellular phone usage is prohibited in the classroom and business offices at all times.

### **10. Food in the Classroom**

Food for individual staff consumption is not allowed in the classroom unless the staff member is eating a CSB provided meal or snack with the children. Any other food and drink must be consumed by the staff member during their break or lunchtime, away from the classroom and children.

## **E. Analysis of Staff Needs**

The needs of individual staff members for assistance and training, as well as the training tools are analyzed regularly to ensure optimal performance and efficiency of services. The Community Services Director or designee assesses staff needs by considering levels of responsibility, experience, performance of assigned tasks, and other relevant factors. On the basis of such assessment, the Community Services Director or designee determines the delivery of needed assistance after considering funding limitations. Assessment of staff needs is performed annually or as needed.

Self-reflection is also a support strategy used to assess staff strengths and needs. Teachers will utilize the Early Childhood Teacher Self-Reflection Tool at least annually and throughout the year, as desired. Upon completion, teachers can continue to reflect on their own thoughts and teaching practices to support the classroom. In the fall, teachers will update and refresh their own self-reflection tool and

share their reflection tool with their supervisor so that s/he is able to support desired areas of growth and development.

CSB also recognizes that building positive employee morale leads to staff feeling motivated, encouraged, and appreciated. To maintain high morale, CSB will recognize and appreciate staff efforts through various wellness initiatives. Employee health and wellness is a CSB priority and recognition expenditures will directly relate to building a wellness culture that promotes staff well-being and personal effectiveness.

## F. Recruitment and Selection

It is the policy of CSB to employ qualified, capable, and responsible personnel who are of good character and reputation. Consideration will be given to provide employment opportunities to current and former Head Start and Early Head Start parents. CSB will follow the guidelines for recruitment as required by the MOUs, PMRs, Management Bulletins and other provisions established by the County and funding sources. CSB shall make certain that its recruiting procedures afford adequate opportunity for the hiring and career advancement of its parents and staff. The attainment of a high level of education may be important to performance in certain positions; however, formal educational qualifications, unless required by state, local or federal law, where practical, shall be made discretionary rather than required for employment and advancement. Head Start staff will be required to meet the educational requirement as established in the Head Start Act and/or Head Start Performance Standards.

Parent Participation in Staff Recruitment/Screening:

CSB has a comprehensive approach with regard to parent participation in the recruitment and screening of HS/EHS program employees. (HSPS1301.4 (b)(3))

- Annually, CSB families complete a Parent Interest Survey (CSB300 Form), a question in the survey asks and identifies parent interest in being part of the screening/interviewing process for new hires. Results from the Parent Interest Survey are tallied and the PFCE clerk provides personnel with a list of interested parents. The Personnel unit is responsible for contacting parents to request their participation as recruitment and screening opportunities become available.
- To support recruitment:
  - During Policy Council Meetings, parents are informed of open positions within the program. Informational flyers are also made available to be shared at site Parent Committee Meeting and with the community.
  - At the site level, AD's inform staff of open positions during their monthly Cluster Meetings. Flyers with information about individual open positions are shared and posted on site Parent Boards with extra copies accessible for dissemination.
  - CSB Family Newsletters, a triannual publication, advertises CSB employment opportunities.
  - CSB Friday Flyers, a semi-monthly resource publication for families includes CSB employment opportunities.

## G. Hiring of CSB Staff

A position will be following steps outlined below:

- Following the approved Contra Costa County Personnel Management Regulations, the Personnel Unit will work with the County Human Resources Department, as required, to publicly announce a position for employment.
- Upon receipt of applications, the Human Resources Department or designee will screen the applications to ensure that applicants meet the minimum requirements for filling the position.
- The Human Resources Department shall designate selection procedures that may be written tests, oral tests, physical agility tests, assessment centers, training and experience evaluations or other selection procedures, or any combination of these. Selection procedures shall be practical and job related, constructed to sample the knowledge, skills, abilities and/or personal attributes required for successful job performance.
- When, after public announcement, the number of accepted candidates is equal to or less than the number necessary for a full certification, after consulting with the Community Services Director, the Personnel Unit may waive competitive testing and certify the applicants without rank or score. Under these circumstances, the Community Services Director will appoint a Qualifications Appraisal Board within the Community Services Bureau to conduct oral interviews of the applicants.
- In examinations where an oral interview is to be conducted as part of the total examination, the Personnel Unit shall appoint two or more qualified staff, to conduct oral interviews.
- Whenever final interviews are conducted to fill key management positions such as Executive Director, Head Start or Early Head Start Director, Chief Fiscal Officer, Personnel Director or any other equivalent position within the Community Services Bureau, in addition to the appointed subject matter experts, the Policy Council Chair/Vice Chair will be included in the panel conducting the interview/s.
- After completion of the examination process, the Personnel Unit will certify to the Bureau Director in rank order, according to the overall scores in the examination process, the names, addresses and phone numbers of the persons entitled to certification.
- CSB Personnel will coordinate the Hiring Manager to identify an interviewing panel consisting of managers and supervisors with expertise in the content area of the position needed to be filled. The panel should include minimum of two managers or supervisors and a parent always when possible.
- The designated interview panel will interview the prospective employee to determine:
  - If the individual will be able to work with staff in a cooperative, team-like manner;
  - The individual's commitment to low income families and the community;
  - The experience the individual has working with or the understanding the individual has of culturally diverse groups;
  - Personal characteristics such as warmth, strength, flexibility, understanding, empathy, ability to respond quickly under stress;
  - The ability of the individual to work within systems;
  - The individual's respect for authority and ability to work under supervision; and
  - Any other special skills such as speaking, reading, or writing in other languages.

- A second interview may be conducted in some cases with the purpose of determining the candidate/s suitability to the agency and the particular job. The interview should be conducted by a panel of at least two interviews. No interviewer should be conducting an interview by him/herself. This interview, although set up with CSB Personnel assistance, can be informal without the usage of a structured interview questionnaire.
- After the interview, the Personnel Unit will conduct personal and employment reference checks on all potential new hires and will submit a reference report for review along with recommendations to the Hiring Manager and Community Services Director or designee for employment in the position being considered.
- The name and qualifications of the candidate/s will be considered for approval by the Hiring Manager and the Community Services Director. Only after the candidate has been approved for employment may the candidate be officially employed and report for work.
- In case of hiring a new Head Start Director, a Chief Fiscal Officer, or a Personnel Director, the candidate/s will be presented for approval by the Policy Council.
- Policy Council will be informed of all new hires during the monthly Policy Council meetings.
- All newly hired employees will serve a probationary period as outlined in Section 9 of the Personnel Management Regulations and the appropriate Section of the applicable Memorandum of Understanding between Contra Costa County and Public Employees Union, Local One.

#### H. Reject from Probation

When an employee is being separated from employment while on probation, the employee's supervisor and/or a CSB Personnel Analyst will notify the employee and at that time shall ask for any keys and/or employee badges they may have to the facility.

#### I. 9/80 Work Schedule

A 9/80 work schedule has been established for a period determined by the Community Services Bureau Director. The schedule is available for Senior Management and some management and middle management classifications. There may be some job functions or classifications that are not feasible for participation in the 9/80 schedule. Additionally, probationary employees are not eligible for a 9/80 schedule until successfully completing their probationary period. Furthermore, temporary employees are excluded from the 9/80 work schedule. The Director of Community Services Bureau has the authority to determine the exclusion or the participation of particular jobs or classifications in the 9/80 shift.

The 9/80 schedule is voluntary. An employee who participates in the 9/80 schedule is not obligated to maintain it except for a two-week cycle from the beginning of the 9/80 shift. If an employee opts out of the schedule, she/he may opt back in once in the following three-month period. Work expectations do not change as a result of an employee's participation in a 9/80 schedule. If her/his performance deteriorates due to participation in the 9/80 schedule, the employee may be returned to a regular schedule. This action requires the approval of the Community Services Director or designee.

Employees requesting participation in the 9/80 work schedule should complete a Participation Request form that can be obtained from CSB Personnel Unit. The employees are to submit the completed form to their supervisor. Approval is granted by the Community Services Director or designee with

consideration for adequate coverage of the Department and the individual units. A copy of the approved request should be submitted to the Fiscal unit and to CSB Personnel to be filed in the employee's personnel file.

Employees participating in a 9/80 schedule must take a day off during the two-week pay period. During the period, the employees work one 8-hour day and 9 hours each day thereafter. The total work hours for the pay period should equal 80. If a holiday falls on the employee's day off, the employee should take her/his 9/80 day within the pay period before or after the holiday. If a holiday falls on a work day, the employee must use 1 hour accruals to make the required 9-hour work day since a holiday is 8 hours.

#### 9/80 Work Schedule for Employees Temporary Disabled Due to Industrial Injury

In accordance with the Memorandum of the Office of the County Administrator, dated November 23, 2009, and the Contra Costa County's Return to Work Policy for Industrial Injury or Illness, Section VI, A. Restrictive Duty, the 9/80 or flexible work schedule for every employee who has sustained industrial injuries, who has an accepted worker's compensation claim and is temporarily disabled from working full time will be temporarily revoked. Upon release to full time work by the treating physician and only if the employee is able to work more than 8 hours per day, the 9/80 or flexible schedule may be resumed.

### J. Separation

Employees are dismissed, suspended, and demoted in accordance with Contra Costa County, Personnel Management Regulations Part 11, Separation and Memorandum of Understanding between Contra Costa County and the Labor Unions.

### K. Resignation

A resignation letter from the employee shall be made in writing and submitted to the employee's immediate supervisor and/or Assistant Director. The original letter should be sent to Personnel Unit.

### L. Nepotism

No immediate family member of a supervisor shall work directly under his/her supervision. Immediate family member shall be defined as person's parent/s, grandparent/s, siblings, spouse, in-laws, natural child, stepchild, foster child, child in employee's custody, legally adopted child, legal guardianship, foreign adoption, tribal adoption, disabled adult child, domestic partner, child of domestic partner, and children's spouses.

### M. Enrolled Children of CSB Employees

To maintain an equitable educational environment at our child care centers, CSB requires that an enrolled child of a CSB employee or immediate family member be placed at facility that is different from the employee or immediate family member's worksite, with the exception of AD approval under extenuating circumstances. In NO case will an employee's child be placed in the employee's or immediate family members classroom. CSB employees' children may be enrolled in the program only if eligible.

#### **N. Staff Qualifications – General**

All site-based staff must meet the minimum qualifications of the State Department of Education matrix and the Early Head Start and Head Start staff qualification requirements as stated in Sections 645(A) and 648(A) & (B) of the 2007 Head Start Act and Section 1302.91 of the Head Start Performance Standards. This includes Assistant Directors, Site Supervisors, Infant/Toddler Master Teachers, Master Teachers, Infant/Toddler Teachers, Teachers, Infant/Toddler Associate Teachers, and Associate Teachers. It is the employee's responsibility to maintain and provide to Personnel and their Site Supervisor a current Permit or Temporary Certificate issued by the Office of Education and to meet the Head Start and Early Head Start staff qualification requirements by the established timelines.

Services for families enrolled in the home-based program option are provided by Early Childhood Educators. These employees must meet the education qualification requirements established in Section 1302.91(e)(6) of the Head Start Performance Standards, demonstrate competency to implement home visiting curriculum, promote the progress of all children, including dual language learners and children with disabilities, and build respectful, culturally responsive, and trusting relationship with families.

Family services staff work directly with families on the family partnership process. Staff hired after November 7, 2016 must, within 18 months of hire, obtain at a minimum a credential or certification in social work, human services, family services, counseling or a related field.

In addition, all staff must meet the minimum qualifications as stated in the Community Services Bureau Job Descriptions and as set forth by state and federal regulations. Should an employee fail to meet the minimum qualification of his or her job while employed with Contra Costa County, he or she will be dismissed as stipulated in the Personnel Management Regulations, Part 1108 and the Public Employees Union, Local One MOU, Section 24.2.

#### **O. Qualification Requirements for Positions**

Minimum qualification requirements reflecting the California Department of Education, the Head Start Act and Section 1302.91 of the Head Start Performance Standards qualification guidelines are set for all Contra Costa County Community Services Bureau positions.

The Personnel Director, in conjunction with the Assistant Directors and/or other subject matter experts, drafts minimum qualification requirements for certain positions. These are received by Division Managers for input and review.

Where minimum qualification requirements affect health, education, food service, or other component positions, the draft is received by the appropriate committee for input and review.

The draft is then submitted to the Community Services Director for review and approval. After Community Services Director's approval, the draft is sent to the CSB Personnel Unit for further processing.

Managers receive copies of job descriptions and qualifications adopted by Human Resources. Preference will be given to former and current parents who meet the qualifications as set forth in the job descriptions.

All staff must be able to perform the Essential Functions as set forth by the Bureau at all times (please refer to Essential Functions documentation). If staff is unable to perform the functions at any time during employment, the Bureau will try to accommodate needs; however, there are some instances where this may not be possible.

New Hires: Before a new employee / volunteer who will work directly with the families and children begin work, (s)he must have completed the following:

- Complete health screening by a physician including a tuberculosis test (prior to employment) or a written statement from a doctor stating a TB test is not required.
- Provide verification of required vaccinations for Measles and Pertussis or waiver of such vaccination/s as required by Community Services Bureau Vaccination policy as per SB 792(for staff working in child care centers).
- Fingerprint / criminal record clearance without any exemptions.

## **P. Classroom Staffing and Ratios and Comprehensive Services Staffing**

### **1. Classroom Staffing and Ratios**

Each classroom maintains the adult/child ratios required by Title V: For children ages 3-5, 1:8; for toddlers, 1:4; for infants 1:3. Children under three years of age may not be in groups with more than eight children. Each full-day pre-school classroom is staffed with a qualified Teacher and 2 Associate Teachers. If this is not possible, an Associate Teacher may be substituted for a Teacher and a Teacher Assistant Trainee for an Associate. Each part-day pre-school classroom is staffed with two Teachers and Teacher Assistant Trainees.

CSB center classrooms will have no more than 20 children enrolled at any time, except in State Preschool classrooms where there may be 24 children enrolled at one time and in Head Start classrooms with an approved 24-waiver from the Administration for Children and Families (ACF).

The Supervisor must ensure that adult/child ratios are maintained at all times. If a staff member is absent, the Site Supervisor must do the following:

- Assess the staffing needs of the classroom based on the number of children present and the staff/child ratios in other classrooms at the site.
- Request the services of a parent volunteer.
- If a substitute is needed, the Supervisor must contact the clerk who coordinates the substitutes. All staff inside the classroom and outside in the yard are responsible to ensure that all children are visible at all times and that they are being supervised at every moment.
- Whenever the classroom is outside on the yard or on a field trip, all members of the teaching team must be present to ensure the health and safety of children. No scheduled prep time or breaks are permitted during times scheduled outside of the classroom.



Teaching staff supervise infants and toddlers/twos by sight and sound at all times. When infants and toddlers/twos are sleeping, mirrors, video or sound monitors may be used to augment supervision in sleeping areas, but such monitors may not be relied on in lieu of direct visual and auditory supervision. Sides of cribs are checked to ensure that they are up and locked.

Teaching staff and volunteers are aware of, and positioned so they can hear and see any sleeping children for whom they are responsible, especially when they are actively engaged with children who are awake.

CSB management ensures that the staff reflects the cultures and languages of the children and families served in the program whenever possible. If this is not possible, the Supervisor must contact the main office to obtain the services of a translator in order to communicate with families.

## **2. Comprehensive Services**

The program is supported at all times by the following personnel:

- A health services content area expert who is trained and experienced in public health, nursing, health education, maternal and child health, or health administration.
- An education and curriculum services content area expert who is trained and experienced in early childhood education and development, classroom observation and monitoring, and coaching/mentoring.
- A nutrition services content area expert who is a registered dietitian or nutritionist.
- A mental health services content area expert who is a licensed or certified mental health professional with experience and expertise in serving young children and their families.
- A family and community partnership or parent involvement content area expert who is trained and experienced in field(s) related to social, human, or family services and who is skilled in assisting parents of young children in advocating and decision-making for their families.
- A disabilities services content area expert who is trained and experienced in securing and individualizing needed services for children with disabilities.

When a health procedure must only be provided by a licensed or certified health professional, the agency will ensure that this requirement is met.

## **Q. Site Administration**

Each site that receives State Department of Education funding must have a full time Site Supervisor housed in the building. For sites with more than nine classrooms, an additional Site Supervisor will be housed at the building. This Supervisor may be counted in the ratio if working directly with the children. Sites with infant/toddler care must have a Site Supervisor who, in addition to the regular qualifications, has completed 3 units of Infant and Toddler Care.

As an entity operating child care and development programs, providing direct services to children at two or more sites, CSB shall employ Assistant Directors that meet the minimum qualifications of a Program Director as outlined in the State Department of Education matrix.

### R. Teacher Assistant Trainees (TATs)

CSB employs Teacher Assistant Trainees (TATs) who have no less than 12 Early Child Education units from an accredited college. The following applies for all teaching staff with less than 12 units in Early Childhood Education courses:

- The TAT must be at least 18 years of age
- If the TAT has enrolled in or completed at least 6 units in Early Childhood Education, (s)he may supervise children at nap time and escort children to the bathroom without the direct supervision of a Teacher/Associate.
- The TAT will support the classroom needs under the supervision of the Lead Teacher

In order to support the professional development and career advancement of TATs, CSB will provide a select number, based on funding and availability, of TATs the opportunity to participate in the ECE Work Study Program, as outlined in Section 2.VIII.EE.vii

### S. Volunteers

CSB encourages volunteers from the community whenever possible. Each year, program staff recruits volunteers through flyers and other announcements. Before a volunteer begins in the program, (s)he must be approved by the CSB Manager responsible for volunteer coordination. This ensures that the volunteer has fulfilled the necessary requirements prior to being given an assignment. All potential volunteers must complete a Volunteer Application. If the volunteer works more than sixteen (16) hours at one facility s/he must obtain fingerprint clearance. All volunteers, regardless of the number of hours they are planning to work, must submit a statement of good health. The statement could be issued by a doctor, a medical professional or be a self-disclosure signed by the volunteer. Each volunteer must undergo a TB risk assessment and if at risk submit a negative TB test result, as well as provide verification of measles, pertussis and influenza immunizations as outlined in California Community Care Licensing and Health and Safety Code 1596.7995 at their own cost prior to volunteering. The statement of good health, the TB and immunization result should be provided to the manager overseeing volunteer coordination and kept on file by the Site Supervisor. As outlined in California DSS section 101170(b), certain volunteers may be exempt from the requirement to submit fingerprints and or immunization verification.

Once fingerprint, criminal background clearance, immunization verification/s and TB clearance is received, the volunteer coordinator will contact site supervisors to see if there is an appropriate volunteer opportunity at their site. The volunteer coordinator will forward all paperwork to the site supervisor for their Licensing and Health file. The Site Supervisor or designee will review the Volunteer Policy with the volunteer and have him/her sign the Standards of Conduct, Certification Statement and all other Licensing forms. Only then will CSB make the final volunteering assignment which includes: start date, end date, and number of days and hours per week. The volunteer enters hours worked daily on an in-kind form for the whole month. At the end of the month, the volunteer submits the completed in-kind reporting form to the assigned volunteer supervisor to have them sign their approval and to make a copy of form for the volunteer. The volunteer's supervisor or designee submits the in-kind records monthly to the cluster clerk for entry into the In-Kind Log in the shared drive.

## T. Standards of Conduct

CSB ensures that all staff, consultants, and volunteers will observe the program's Standards of Conduct. All employees must sign the Standards of Conduct annually and the original will be maintained in their personnel file.

Every employee, consultant and volunteer involved in the Program, must subscribe to the following:

- Respect and promote the unique identity of each child/family.
- Refrain from stereotyping on the basis of gender, race, ethnicity, culture, religion, disability, Sexual orientation, or family composition.
- Follow program confidentiality policies concerning information about children, families, and other staff members.
- Never leave a child alone/unsupervised while under their care.
- Use positive methods of child guidance.
- Never engage in corporal punishment, emotional/physical abuse, rejection, extended ignoring, humiliation, intimidation, ridicule, coercion or threats.
- Never use any form of verbal abuse, including profane, sarcastic language, threats, or derogatory remarks about the child and/or about his/her family.
- Never prohibit a child from attending religious services outside the agency.
- Never use methods of discipline that involve:
  - Isolation
  - Binding or tying a child to restrict movement or taping a child's mouth.
  - The use of physical activity or outdoor times as a punishment or reward
  - The use of food as punishment or reward
  - The denial of basic needs
- Provide a safe, healthy and accommodating environment that meets the children's needs.

Each employee, consultant, contractor, and volunteer must comply with program confidentiality policies concerning personally identifiable information about children, families, and other staff members.

Every employee engaged in the award/administration of contracts or other financial awards will sign a statement to the effect that they will not solicit or accept personal gratuities, favors, or anything of significant monetary value from contractors or potential contractors. Additionally, employees will not engage in any form of picketing, protest, or other direct action that is in violation of law and must comply with Contra Costa County Administrative Bulletin 405.4.

If a staff member, consultant, contractor, or volunteer violates any of the above Standards of Conduct, the following disciplinary steps may be followed:

- Conference(s) with the individual's supervisor to discuss implications of their behavior, and corrective action plans.
- Further training for the individual may be provided.
- A letter of Coaching and Counseling may be sent to the individual, detailing the seriousness of their violation(s) of the Standards of Conduct.
- If the letter of Coaching and Counseling is ignored, the employee may receive further disciplinary action.

- If the behavior of the individual does not change, disciplinary measures may be applied, such as Letter of Reprimand, suspension, and/or termination of employment. In some cases, termination may be the first discipline.

## U. Professional Behavior and Attire

### 1. CSB Standards of Professional Behavior

As representatives of County government, it is important that staff adhere to high standards of professional behavior at all times. Public and client perceptions of our staff and services can be significantly affected by a single negative interaction with any employee in our department.

As professionals, staff members need to refrain from excessively negative behavior in all interactions with their colleagues, in meetings and training sessions, with clients, or the public. Such behavior can over time create a hostile work environment, be experienced as harassment, interfere with client access to services, or violate client rights.

Examples of excessively negative behavior can include: rudeness, being overly brusque and impatient, showing contempt for others, being excessively critical and fault-finding, demeaning and sarcastic, disrespectful, slamming doors or files, raised voices, use of profanities, sexual and national origin harassment and discrimination, There may also be other behaviors that create a hostile or extremely unpleasant environment for staff or clients.

Staff who engages in such behaviors will receive counseling and coaching from their supervisors. Continued engagement in unprofessional behavior after counseling and coaching has been provided may result in disciplinary action.

To ensure the health and safety of enrolled children and to foster professionalism at our child care centers and offices, staff is expected to adhere to the following dress code.

Staff at child care centers, whether direct caregivers or support staff, must wear clean, neat, comfortable clothing and footwear suitable for the daily tasks of significant bending, walking, lifting, sitting and running. Central Kitchen staff must adhere to policies that specifically pertain to hygiene and attire.

### 2. CSB Standards for Appropriate Attire

- Shoes: heel height to a maximum of 1 inch, closed toe and heel required
- Shorts: must reach the knee, transparent fabric is unacceptable.
- Tops: prohibited are tops that expose the midriff, low cut necklines, backless, strapless, halter or tube tops, spaghetti straps, or any transparent material.
- Skirts/dresses: hem must be knee length or longer; fabric may not be transparent.
- Pants: hems of pants cannot drag on the floor, and waistband may hit no lower than the top of the hip. Transparent fabric is unacceptable.
- Jewelry: Earrings must be shorter than 1 inch from lobe, rings no higher than ¼ inch from shank. Any jewelry that may pose a hazard to children or staff may not be worn to work.
- Any articles of clothing with statements deemed by CSB to be political, offensive, or inappropriate are prohibited. The display of 'gang colors' is prohibited.

- Administrative staff shall dress in a manner that reflects a positive public image. In general, appropriate business attire will include well maintained clothing, as described above. 'Casual Friday' attire is acceptable, but must incorporate the above standards. Administrative staff may wear blue jeans on Casual Friday but may not be worn with sneakers, thong shoes, or T-shirts.

#### V. Non-Discrimination and Anti-Harassment Policies

It is the policy of Contra Costa County to maintain a work, service and program environment free of discrimination, harassment, or intimidation based on sex, gender, age, race, religion, national origin, ancestry marital status, sexual orientation, disability or medical condition. These policies are also mandated by state and federal law. It is the policy of the Community Services Bureau to comply with all applicable state and federal statutes and regulations prohibiting discrimination in employment, contracting, buildings, facilities, and provision of services. All employees should be familiar with all of the provisions in the County's "Notice of County Non-Discrimination and Anti-Harassment Policies" and the procedures for "Reporting Discrimination, Harassment, and Retaliation".

In addition to policies and regulations which prohibit harassment on the job on the basis of one's membership in one of the protected classes as well as all forms of sexual harassment, please note that the County policy also states that:

- "Employees are entitled to, and will be provided with, a workplace environment which is free from harassment...All employees are individually responsible for conducting themselves in ways that ensure others are able to work in an atmosphere free of discrimination, harassment or intimidation...Each employee has a duty to report incidents of unlawful discrimination and harassment. Retaliation for reporting discrimination or harassment or participating in an investigation of a discrimination claim is both unlawful and against County policy."
- Supervisors have an affirmative and legal duty and responsibility to report all allegations of sexual and other forms of harassment or discrimination to their managers or supervisors. The Employment and Human Services Department will fully comply with these policies and will not tolerate discrimination, harassment, or intimidation in any form. Reports of violations of these policies will be promptly investigated and appropriate disciplinary action taken if warranted. This policy also includes more subtle forms of harassment, such as threats, name-calling, and use of slurs, innuendo, or misrepresentation of actions or intent to damage an employee's reputation.

#### W. Whistleblowers are Protected

Community Services Bureau adheres to the California Whistleblower Protection Act (Government Code Sections 8547-8547.13) and EHS Policy against Retaliation. It is the public policy of the State of California to encourage employees to report or "blow the whistle" to an appropriate government or law enforcement agency when they have reason to believe their employer is violating a state or federal statute, or violating or not complying with a state or federal rule or regulation. These violations may include fraud, waste, abuse, unnecessary government spending, an unsafe or unhealthy employer practices.

A “whistleblower” is an employee afforded with the following protections:

- An employer may not make, adopt, or enforce any rule, regulation, or policy preventing an employee from being a whistleblower.
- An employer may not retaliate against an employee who is a whistleblower.
- An employer may not retaliate against an employee for refusing to participate in an activity that would result in a violation of a state or federal statute, or a violation or noncompliance with a state or federal rule or regulation.
- An employer may not retaliate against an employee for having exercised his or her rights as a whistleblower in any former employment.

Information regarding possible violations of state or federal statutes, rules, or regulations, or violations of fiduciary responsibilities should be reported by calling the California State Attorney General’s Whistleblower Hotline at 1-800-952-5225.

A copy of this Labor Code and how to report improper acts is posted at each CSB center.

#### **X. Protocol for Tracking Staff Absences and Recognizing Excessive Absenteeism**

Maintaining good attendance is a condition of employment and essential function of every employee's job. Further, consistent staff attendance is critical to the operation of quality child development centers. To maintain our daily staffing levels so that our work is completed effectively and efficiently it is necessary to keep accurate account of the use of these benefits.

Use of vacation and personal leave accruals is by mutual agreement between the employee and the supervisor. Request for use of this time must be made and approved in advance using the form provided by CSB.

For employees who do not have pre-approved absence from work, each Site Supervisor is required to maintain a daily employee call-in log to record employee absences that were not pre-approved. Employees calling off of their shift must do so by 6:00am on the day of the absence. For consecutive absences, employees must notify their supervisor by 3:00pm of the day prior. If no communication between the employee and supervisor takes place during the first day of absence it is expected that the employee will be present for their shift on the next business day. The employee is required to provide the following information when calling in: Name, date of the absence, job classification, shift, time of the call, reason for not reporting to work.

Supervisors are to track absences on the monthly Staff Absentee Tracking log that is provided in an Excel workbook. Assistant Directors are to review monthly Staff Absentee Tracking logs for analysis of staffing patterns, site needs for substitutes, etc. Additionally, through review of these logs, assistant directors, supervisors and managers can detect abuse of sick leave and excessive absenteeism and allow management and supervisory staff to proactively address absenteeism concerns in a timely manner.

- **Excessive Absenteeism:**

- Absenteeism (including use of sick leave) may be considered excessive where there are frequent and often unscheduled absences, including use of vacation, floating holiday and earned compensatory time accruals. Excessive absenteeism usually results in exhausted sick leave accruals and frequent use of other leave balances such as vacation, floating holidays or compensatory time for “sick leave” purposes, as well as other unscheduled absences (including tardiness). In general, repeated depletion of sick leave accruals as they are earned may be an indicator of excessive absenteeism as is the frequent placement in Absent With Out Pay (AWOP) status.
- Abuse of sick leave use occurs when it is used for absences that are not permissible under the definition of appropriate use of sick leave or for the purpose other than that for which it is claimed (as described in the MOUs and the Personnel Management Regulations).
- Use of large amount of sick leave accruals may be mitigated by extenuating circumstances as applicable in the MOUs (FMLA, disability status, etc.).

Supervisors and managers are encouraged to look for patterns of absenteeism such as unscheduled absenteeism at the beginning or the end of the work week, before and after holidays, before and after approved time off, etc. Such patterns may be indicators of excessive absenteeism.

- **Handling Excessive Absenteeism:**

When patterns of excessive absenteeism are detected, and there are no known mitigating circumstances, supervisors and managers are to discuss their findings with the Assistant Director or Unit Manager and decide on appropriate course of action. Actions taken may include but are not limited to the following:

- Counsel the employee verbally to improve their attendance
- Issue Counseling and Counseling Letter (if employee does not improve)
- Pursue disciplinary actions: Letter of Reprimand
- Reference the absenteeism issue in the employee’s annual performance review
- Develop Improvement Plan with the impute of the employee
- Consult with Personnel Analyst on other disciplinary actions if no improvement is noticed
- If appropriate, refer the employee to the County’s Employee Assistance Program (EAP). This action requires consult with and involvement of the CSB Personnel Analyst. Note: EAP is always available to an employee who may wish to make an appointment him/herself.

Supervisors and managers are encouraged to check with CSB Personnel Analyst if not sure if an employee has any known mitigation circumstances.

### Y. Family Medical Leave Act (FMLA)

CSB provides coverage under the Family Medical Leave Act (FMLA). Eligible employees can receive up to 18 weeks unpaid, job-protected leave in rolling 12 months period. An “eligible” employee is an employee who had work for his/her employer for at least a year and had worked a minimum of 1,250 hours and meets any of the qualifying reasons listed below:

- The birth of a child or placement of a child with the employee for adoption or foster care
- The employee’s own serious health condition
- The employee’s need to care for her/his spouse, child, parent, due to his/her serious health condition
- The employee is the spouse, son/daughter, parent, next of kin of a service member with a serious injury or illness (in this case the FMLA may be up to 26 weeks in a single 12 month period)
- Qualifying emergency arising out of the fact that the employee’s spouse, son/daughter, parent is on active duty or call to active duty status in support of a contingency operation as a member of the National Guard or Reserves

Employees needing to take FMLA are required to notify their supervisor and Personnel, and submit a medical certification or appropriate document/s issued by a court, law/enforcement agency or a military service entity showing need for the employee to take time from work. Medical certification has to be provided on CCC Certification of Health Care Provider Form. This form can be obtained from the CSB Personnel Unit. The employee is required to submit the completed and signed by his/her doctor document within 15 calendar days of receiving the form from Personnel. The CSB Personnel Analyst/FMLA Coordinator will provide the employee with official letter approving/disapproving the FMLA and information on the employee’s benefits and rights while away of work.

If a supervisor is aware that an employee is off work due to a condition qualifying under the FMLA, she/he should notify CSB Personnel on behalf of the employee. Personnel will contact the employee and will provide information on his/her rights under the FMLA.

Employees who have been on FMLA or Approved Leave of Absence (LOA) due to their serious medical condition are required to submit to CSB Personnel a Physician’s Statement of Ability to Work clearing them to return to work, prior to reporting to their assigned work location. If the employee is cleared to return to modified work, CSB Personnel Analyst/Return-to-Work Coordinator will assign modified work, if any is available.

While on FMLA, an employee may be eligible for Temporary Disability Benefits or Paid Family Leave. The employee is to make personal decision if (s)he wants to take advantage of these benefits. Employees are encouraged to contact CCC Benefits Unit at (925) 335-1746 for specific information regarding their benefits during time off work. While on FMLA, employees may choose to use their accruals. In this case, they are to contact their payroll clerk and make specific arrangements for the use of their accruals.

In California, employees are also covered by the California Family Rights Act (CFRA) and the Pregnancy Disability Leave (PDL) Act, each of which provide family or medical leave that can run concurrently or consecutively with the FMLA, depending on the circumstances.



Paid Family Leave is also available to employees who contribute to State Disability Insurance (SDI). Paid Family Leave runs concurrently with FMLA, CFRA, and PDL.

## Z. Confidentiality

As public employees, CSB is governed by numerous federal, state, and county regulations that are designed to ensure that public resources are being administered in an ethical manner and that the right of both employees and the public CSB serves are respected and honored. These include regulations that ensure that the rights of individual employees are respected to work in an environment that is free of discrimination, intimidation, hostility, or retaliation. CSB's mission to serve the most vulnerable members of the community also requires even higher standards of professional conduct to ensure that rights are respected and that there will be no cause of additional harm and suffering.

Knowing what these myriad regulations are and understanding their relationships to each other can be confusing. The purpose of this policy is to update and summarize the major policies that govern employee conduct. References will be made to other policy documents that contain the more detailed provisions.

These policies will be reviewed with all existing employees and will be presented to and discussed with all new employees and temporary staff at the time of their orientation. New employees will sign a statement that certifies that they have received and read these Standards of Conduct.

### 1. General Policies

Policies and procedures in this matter bind CSB employees who have access to confidential information. The policy is:

- No information about a child or family is to be released without written, parental informed consent if the material is personally identifiable.
- "Personally identifiable" information is defined as information about a child or family that would make it possible to identify the child or family with reasonable certainty. Such information includes:
  - The child's name, address, telephone number
  - Medical record
  - Social Security number
  - Any other data that can readily identify the child or family.

When the child's name is attached to any of the following, that information is considered confidential:

- Specific educational/medical screening
- Diagnostic data
- Disability
- Categorical diagnosis
- Child's functional assessment
- Family needs assessment
- Home visit reports
- Progress reports

## **2. Confidentiality Procedure**

All records containing information pertaining to a child and/or family must be kept in a locked file. The locked file should be maintained at each center location, and the Site Supervisor shall designate a staff member to be responsible for the key.

A list of individuals authorized to review files must be available at every center. Any individual not on the list, but requesting access to files must be approved by the lead Teacher/Site Supervisor prior to release of files.

Please refer to Record Keeping and Reporting Section for protocols for file review.

An Individual Access Log must be kept in each file, and any individual working with/reviewing/monitoring the file must sign his/her name, date, and reason for accessing the file.

Files or papers containing confidential material regarding a family must not be left on desks, tables, or other areas where others may have access to them. After current business concerning a file is completed, the file must be returned to the file cabinet, and the cabinet locked.

Discussions of family problems or situations are to be held only with those staff members working directly with the family. Information should be shared only if it is relevant to that staff member in assisting the family. The normal mode of information sharing is the Case Conference/Family Meeting. The following must be followed:

- Problems of one family must not be discussed with another family.
- Family situations/problems must not be discussed in the presence of parents, children, or visitors at the centers or division office.
- Written information regarding families must not be shared with any community agency without express prior written authorization from the family.
- After a child's participation in the program has ended, no records of home visits, Case Conferences/Family Meeting, IEP's or other confidential reports are to be forwarded to any school without prior written authorization from the parent(s).
- Prior to using children's photographs outside the program or allowing children to participate in research, parents' written permission must be secured.

## **3. Parent Access to Family Records**

The following protocols are followed with regards to family records:

- Parents have full review / access rights to information regarding their children and themselves.
- CSB has an obligation to explain to parents any information in the records that pertains to the child/family.
- Parents have the right, after reviewing their child's records, to have them amended or corrected. The request can be written or verbal; the Site Supervisor must approve it.
- If the parents cannot come to an agreement with the Comprehensive Services team/Site Supervisor, then all explanations and requests for change must be kept with, and become part of, the child's permanent record.
- Parents may obtain from the Site Supervisor, upon written request, a list of locations of

all personally identifiable information kept by CSB.

#### 4. Photo Consent Policy

The Community Services Bureau provides families with the Parent Handbook upon enrollment. In the Parent Handbook, there is a section on Photo Consent where parents/guardians can choose to grant consent for photographs/videos taken of their children during the term of their child's enrollment. Note that **when children transition** from the EHS program to the HS program they will **need to re-enroll** and a new consent form needs to be signed.

- Community Services Bureau will use photographs to record children's progress and development during their time at preschool. These photographs may also be used in a variety of ways in the agency such as for publicity for a variety of events, Social Media, annual reports, and newsletters.
- Photo Consents must be signed by parents/guardians upon enrollment and re-enrollment. A record of the consent forms need to be filed and readily accessible at each site. The signed consent form is added in each child's file (parent communication section).
- Site Supervisors must be aware of where the photo consent forms are filed and must be able to identify the children with no consent.
  - In addition if the child has no consent, at the time of enrollment, Site Supervisors must checkmark the field in CLOUDS titled 'No Photo Consent' in the child's Data Sheet to indicate lack of photo consent.
  - Smart Reports can be created from CLOUDS to show the list of children with no consent so it is of utmost importance to checkmark the 'No Photo Consent' field upon enrollment.
- In the case of a change in guardianship, the signed consent form is sufficient for the pictures taken prior to the change of guardianship. If however, the new guardian approaches you and asks for the child's picture not to be used, you must stop using it going forward. Any time a student's guardianship changes, the new guardian must review and initial the policies and forms to stay informed.
- Under no circumstances are foster children to be given photo consent or to be photographed for display to the public. Site Supervisors must ensure that the field in CLOUDS titled 'No Photo Consent' in the child Data Sheet is check-marked.

## AA. Probationary Period and Staff Performance Appraisals

### 1. Probationary Period

All employees appointed from officially promulgated employment list for original entrance and promotions are subject to a probationary period. For original entrance appointments the duration of the probationary period is determined by the Personnel Management Regulations and the appropriate MOUs. For all CSB employees represented by Public Employee Union Local 1, the entrance probationary period is 9 months. For most promotional appointments, the probationary period is six months.

#### Probationary Period Protocol:

The probationary period for new and promoted employees gives the supervisor the opportunity to evaluate an employee's performance and conduct on the job training, provide learning opportunities and, if necessary, remove or resign the employee. During this time a new or promoted employee receives extra supervision and coaching to help the employee meet the standards and expectations of the job. The period begins on the day of appointment to a permanent position.

- **Period length:** The length of the probationary period is negotiated between the county and the labor unions for different classifications and may vary.
  - For new non-management, project employees and Site Supervisors – (all represented by PEU, Local 1) 9 months;
  - Promotional positions, non-management project and Site Supervisors – 6 months;
  - Management classifications (represented by Local 21 and not represented) – 6 months
- **Tracking Date of Appointment / End of Probationary Period:** Supervisors of employees on probation must obtain and know the official date of appointment to a permanent position and the date that the probationary period ends. This information should be provided by Personnel, but if not, it is the supervisor's responsibility to obtain it.
  - The Supervisor shall mark the probationary period end date in her/his Outlook calendar to ensure it does not pass without the supervisor's knowledge.
  - Once the official date of appointment has been determined, Personnel is to send out a communication to the responsible supervisor that contains the start date, the end of probation period date, and a guide to onboarding a new employee which is to outline the steps and the roles of the supervisor in providing an exceptional onboarding experience.
- **Orientation:** All new and promoted employees will receive a full orientation to their new position, which includes CSB New Employee Orientation, EHSD New Employee Orientation and any classification and unit-related orientation checklists.
  - These activities shall be completed within the first two months after the appointment date.
  - It is the responsibility of the supervisor to arrange for the new employee to timely meet with the other key stakeholders to complete their onboarding check lists.

- Completed orientation checklists shall be signed and submitted to the CSB Personnel Analyst.
- Management and supervisory staff may be scheduled for additional orientation sessions provided by the Employment and human Services Staff Development Unit.

The Personnel unit will track receipt of checklists timely and provide reminders 4 weeks before the completion deadline, if not yet received.

- **Support and Coaching:** Within the first 45 days of appointment, all new teaching staff will receive an observation in his/ her classroom from the education manager and an opportunity to discuss the observation and receive feedback.
  - All supervisors will provide regular reflective supervision opportunities to the employee as a means to provide timely feedback and discuss any issues brought forth by the employee or supervisor.
  - If issues arise, the supervisor will provide resources and support as needed. This shall be documented.
  - For all new employees, a 3 and/or 6 month evaluation will be conducted to provide feedback and resources. If concerning issues are identified prior to 3 months, both 3 and 6 month evaluations with coaching, resources and remedial learning opportunities will be provided and documented.
  - Small group conferences may also be used in addition to formal evaluations but not in lieu of. If concerning issues arise, the second level supervisor will be notified immediately of any concerns and kept regularly and well-informed on progress or lack thereof.
  - A final probationary evaluation will be provided just prior to the conclusion of the probationary period.
  - For all promoted employees, a 3 month evaluation will be conducted to provide feedback and resources. A final probationary evaluation will be provided just prior to the conclusion of the 6 month probationary period.
- **Release during probationary period:** An employee may be released during their probationary period at any time; however, sufficient documentation which includes evidence of adequate support, coaching, and proof of resources and learning opportunities, must be present. The second-level supervisor and the Personnel Analyst must review all documentation to ensure it is complete and that adequate evidence is present to warrant release.

## 2. Staff Performance Appraisals

A Uniform Service Rating System includes provision for periodic rating of employees' performance for the purposes of:

- Promotion
- Transfer
- Demotion
- Termination

- Salary adjustment
- Re-hiring
- Recommendation to future employers
- Performance improvement

A probationary employee must be evaluated at least once during their probationary period. In accordance with Contra Costa County probationary requirements, every employee on original entry appointment is evaluated at the end of the first six months of employment. A formal, written review of the employee is completed at that time and thereafter at least annually by the immediate supervisor.

In the process of formal evaluation of the employees, CSB utilizes also peer feedback evaluation and self-evaluation. The information collected through the feedback evaluation tool is analyzed and summarized by the supervisor and included in the employee's Performance Evaluation. The employee is given the opportunity to evaluate his/her Professional Goals and submit the self-evaluation form to his/her supervisor before the Performance Evaluation meeting. The employee's self-evaluation is included in the Performance Evaluation.

The probationary period is used as the final phase of the examination process. It is utilized by the appointing authority for effective adjustment of new employees, and for release of employees whose performance is unsatisfactory. Ongoing evaluation continues throughout employment.

(For more information on the probationary period, see "Personnel Management Regulations, Part 9, Sections 901 and 902, pages 9-10.)

Performance Evaluation Schedules (due dates) are tracked monthly by the Personnel Unit and notifications are given directly to the immediate supervisors as well as the 2nd line supervisor and the Bureau Director. The immediate supervisor is also notified via the COPA/CLOUDS electronic system.

### **3. When Completing Employee Evaluations**

The immediate supervisor rates an individual employee on work performance, efficiency, dependability, and adaptability. Step ratings are made in a formal report by the immediate supervisor (responsible for the work of the employee being rated).

In completing the Performance Evaluation for each employee the supervisor takes in consideration the feedback information received from the employee's peers, as well as, the self-evaluation completed by the employee. At least two weeks before completing the employee's evaluation, the supervisor will ask 2-3 employees working closely and familiar with the employee to complete the appropriate feedback tool. The supervisor will summarize and analyze the results and include them in the employee's review. Prior to the meeting with the employee, the supervisor will also ask the employee to evaluate his/her performance in the area of Professional Goals. The employee self-evaluation will be reviewed at the time of the Performance Evaluation meeting and included with the Performance Evaluation.

During the Performance Evaluation meeting both the supervisor and the employee will review and discuss his/her performance, as well as their goals. After the discussion, the employee must sign the Performance Evaluation form. Each employee shall receive a copy of his/her evaluation.

Signed original evaluations are submitted to the Personnel Unit.

Evaluations are filed in the employee's personnel records. The formal report becomes a part of the employee's permanent personnel record.

An employee who receives an unsatisfactory rating may be ineligible for a higher pay until a satisfactory rating has been received.

An employee may be reassigned, demoted, or discharged for receiving an unsatisfactory rating.

Each employee shall receive a copy of his/her rating.

The primary functions of supervisory personnel are: 1) guidance, and 2) improvement of the operation. Each supervisory visit shall be a positive approach to improvement, and add to the employee's contribution to the department.

In accordance with section 648(A)(f) of the Head Start Act, staff and supervisors will collaboratively complete a Professional Development Plan that connects the employee's professional goals to training and educational programs and/or resources that support attainment of such goals. Each plan will clearly outline high quality activities that will improve the knowledge and skills of staff as relevant to their roles and functions in a manner that will improve delivery of program services to enrolled children and families. Supervisors shall ensure that the plans are regularly evaluated for their impact on teacher and staff effectiveness. Professional Development Plans are part of the performance evaluation process and must be submitted with the completed evaluation tool.

#### **4. Supervisor's Approval**

Before evaluations are reviewed with employees, they must be approved by the second level supervisor. The supervisor's supervisor or designee reviews step ratings. That reviewing official must:

- Approve or disapprove the service rating
- Change the service rating, without formal appeal procedures, when in the interest of sound administration
- Discuss the rating with the employee
- Upon request of the employee, provide an impartial review of the service rating.

#### **5. Appealing a Performance Evaluation**

If the employee is dissatisfied with the review/decision, the employee may appeal in writing (within ten days) to the CSB Director for an impartial review of their service rating. The CSB Director shall render a written decision, sustaining or modifying the rating to the employee within ten days following a hearing. The Appeal Letter submitted by the employee will be attached to the Performance Review being disputed and will be kept in the employee's Personnel File.

### **BB. Chronological Supervision and Filing System**

Chronological Supervision is a management and record-keeping system that organizes and facilitates the tasks of supervision, staff development, and progressive discipline. It is based on the concept that all employees are trained and supervised over a chronological period of time. Since this training and

supervision occurs over an indefinite time period, the documentation of these activities should be filed in the chronological order that they happened. Chronological supervision supports non-discriminatory documentation of employee professional growth and performance, increases management accountability, and contributes to personal and organizational development. Chronological Supervision files will contain all non-disciplinary correspondence and documents pertaining to the supervision of subordinate employees. Examples of mentoring and supervision include, but are not limited to recognition for excellent and/or consistent performance of assigned tasks; written instructions for improving job functioning with follow-up of monitoring activities; and documentation of meetings held with employees.

Each site will maintain a site Chronological and Supervision File. If a staff person's site assignment changes, Site Supervisors are responsible for transferring the employee's Chronological and Supervision File to the new assigned site.

## **CC. Staff and Volunteer Health**

### **1. Volunteer Health**

In accordance with California Care Licensing Regulations, all volunteers (regardless of the number of hours volunteering) must sign and date form CSB232-Volunteer Health Statement (See Forms CSB232), indicating that they are in good health and pose no threat to the health and safety of the staff and children of the program. All volunteers must provide proof of required immunizations for measles, pertussis and influenza (flu), as per the Health and Safety Code 1596.7995(a)(1) and a negative TB test or negative chest x-ray, certified by a health care professional. TB tests are not required for visiting experts.

The TB test must be administered and the results documented by an authorized medical provider. CSB will help in obtaining a TB test with our LVN. Also, provide all potential volunteers with information regarding the latest schedule for the immunization clinics throughout the county. Call 1-800-246-2494 for clinic times and locations. The cost is approximately \$10.00, but may be covered under some insurance policies.

A signed statement from a provider indicating the test date and result must be on file before the first day of volunteering at the site(s). For parent volunteers, place the documentation behind the volunteer health statement in the health section of the comprehensive file. For non-parent volunteers, place the documentation in file specific to that volunteer along with other required documentation such as fingerprints and volunteer applications. Keep all information confidential.

For frequency of testing and other details regarding TB test results, please refer to "Tuberculosis Screening Guidelines," below.

### **2. Staff Health**

New employees must obtain and submit to CSB Personnel Unit a Physical and an Intradermal Mantoux 5TU PPD skin test (note: Tine or other multiple puncture tests are not acceptable.) prior to starting work. If an employee has had a positive PPD skin test in the past, a negative chest x-ray and physician's statement must be obtained. Initial Physicals and TB tests must be obtained within one year of the date of employment with CSB.



In compliance with California Community Care Licensing regulation 101216(g)(1), staff shall obtain a health screening performed by or under the supervision of a physician not more than one year prior to or upon employment. No further re-examination is required by the State of California.

In accordance with Health and Safety Code 1596.7995(a)(1), effective September 1, 2016 all employees working in child care facilities must provide proof of measles and pertussis immunizations or waiver of such immunizations per the regulation. Additionally, each employee must annually provide verification or waiver of influenza (flu) immunization. Influenza vaccination must be received between August 1st and December 1st of the same calendar year.

### **3. Tuberculosis Screening Guidelines for Staff and Volunteers**

If staff or volunteers present a positive TB test (10mm or more of indurations), it must be followed by a chest x-ray and a statement from the examining physician indicating that the employee or volunteer is free from active disease.

Employees and volunteers with a negative initial TB test, who do not live in the Richmond or San Pablo area, must repeat the test every four years. Employees and volunteers with a negative initial TB test must complete a TB Risk Assessment every year (See Form CSB262) to determine whether annual TB testing is recommended.

An employee or volunteer who lives in the Richmond or San Pablo area must have a TB test done yearly. Employees and volunteers with a documented positive initial TB Test that was followed with an x-ray showing no active disease do not require any additional exam. These employees and volunteers must complete the TB Symptom Review (CSB260) every year to determine whether they require further medical evaluation.

### **4. Hand Hygiene Standards at Sites**

To assist in the prevention of spreading infection and viruses, and for safety reasons, all staff at child care facilities, whether considered direct caregivers, clerical or management must adhere to the following standards of hand and fingernail hygiene.

Artificial or natural fingernails must be clean, and at a maximum, ¼ inch in length.

Large rings that extend above the ring base more than ¼ inch may not be worn while at work.

Hands must be washed, at a minimum, before and after diapering, before and after food preparation or handling, before and after morning health check-in, after contact with any bodily fluid (blood, mucus etc.), after personal use of the restroom, after playing with pets or other animals, after handling garbage, and after playground activities, including sandbox play.

If staff are found in violation of the hand hygiene policy, they may be required, at the Site Supervisor's or CSB management's discretion, to rectify the problem by washing their hands, removing rings or trimming or cleaning nails before returning to their position.

#### DD. Career Development Opportunities

The County encourages/supports employees' efforts to improve their skills, abilities, and knowledge to be more productive in their current assignments and to be prepared for career advancement (as opportunities arise). Staff may be required to attend trainings and/or educational advancement programs to meet licensing, state and/or federal regulations. As resources are available, CSB will support staff in attaining certain goals; however, it is the responsibility of CSB staff to meet the minimum qualifications and requirements of their position.

Service Requirements may be established for certain professional development programs to comply with federal, state, or local regulations. As mandated in the Improving Head Start for School Readiness Act of 2007, Section 648A (6), employees who receive financial assistance to pursue a degree shall:

- Teach or work in a Head Start program for a minimum of 3 years after receiving the degree; or
- Repay the total or a prorated amount of the financial assistance received based on the length of service completed after receiving the degree.

Contra Costa County Community Services Bureau agrees that:

- Career development activities are the joint responsibility of the individual and the County.
- All staff members should engage in continuing education, whether it takes the form of formal courses of study, participation in technical society activities, attendance at meetings, reading, or other forms of communication with the profession. CSB will make every effort possible to accommodate working schedules to permit occasional attendance at educational meetings.
- To encourage continuing education, the Board of Supervisors has established a career development education policy. Applications for assistance will be considered by the Bureau and, subject to funding limitations. The details of this policy are outlined in Administrative Bulletin 112.9. Funds may be provided for tuition, books, and other direct costs, providing that the following criteria are met:
  - The employee must start and complete course while associated with the County, within timelines.
  - The field of study must relate to assigned duties or prospective assignments.
  - Attendance at all meetings or classes is required, unless compelling reasons for missing sessions occur.
  - Passing grades must be maintained throughout the course.

Certain classified, exempt, and project management employees may be eligible for reimbursement for up to \$625 every two years for memberships in professional organizations, subscriptions to professional publications, professional engineering license fees required by the employee's classification, and attendance fees at job-related professional development activities. Individual professional development reimbursement requests are authorized by the department head.

Training sessions are held to provide opportunities for staff development and to help employees grow professionally. Such sessions help orient employees to their assignments, explain policies and procedures, teach new skills and methods, and help prepare for a particular program. Professional growth is accomplished through staff meetings and conferences, supervisory interviews, correspondence, extension courses, attendance at professional conferences, inspection tours, and directed readings.

If an employee is directed to undertake a course of study or to attend any meeting or lecture requiring travel and/or expenditure of funds, the County reimburses the authorized expenses. Time out of the office during normal working hours attending meetings will be counted as regular hours worked. The details of allowable training travel and reimbursable expenses are outlined in Administrative Bulletins 111.7 and 204.13 respectively.

The Bureau provides opportunities for employees to attend conferences which may benefit the employee and which would help to improve the department's operation or service. All employees must submit written reports to their supervisor within fourteen (14) days after attending a conference. The written report should include a summary of ideas or methods, which may benefit or improve the services or operation of the Bureau. Requests to attend conferences are made to the CSB Director.

Additionally, the County offers wide variety of free of charge on-line or in-class training and professional growth opportunities through its Risk Management Office (Target Solution) and the Employment and Human Services Department/Staff Development Office (SMART, Learning Management System). Teaching and technical staff members are encouraged to participate as active members of technical societies and professional organizations of their choice. With prior approval, time off to attend local meetings of particular interest and benefit may be arranged. The same pertains to national meetings dealing with subjects benefiting professional advancement.

Ongoing staff meetings are held for all employees. Individual employees may be called upon to present assigned topics to the group or be appointed to a committee to study special problems/lead discussions. All such meetings are held on department time and are designed to improve overall job performance/efficiency and services of the department.

CSB has designated the Personnel Unit as the lead for professional development and training activities within the program.

## **EE. Staff Training and Development**

### **1. Training and Technical Assistance Plan**

The Training and Technical Assistance Plan is reviewed and updated annually and included as part of the continuation grant process to promote program improvement and enhancement. Senior managers, Content Area Experts, and other stakeholders are to submit projected trainings for each year that support the needs of their staff and meet program mandates, and are responsible for the delivery of such trainings. These trainings are included in the Training Calendar for each program year. Any training requested after the Training and Technical Assistance Plan is finalized will require approval by the Community Services Director or designee.

The designated Staff Development Coordinator should be informed of all scheduled CSB trainings in advance. Aside from their own recordkeeping, training leaders are responsible for submitting original sign-in sheets and copies of training agendas and materials to the Staff Development Coordinator.

The Training Calendar that has been developed is based, in part, on career development training needs.

### **2. Staff Training and Development System**

Purpose/Philosophy: CSB delivery of high quality services depends on enhancing the skills, knowledge, and ability of the staff. The management staff and Training Committee carefully design training and

professional growth opportunities for staff, which serve as critical resources for maintaining and improving program quality.

**i. Strategic Training Plan**

This reflects the training and staff development needs identified through Community Assessment, Program Self-Assessment, Performance Indicator Report (PIR), Ongoing Monitoring, Federal and State Reviews and Regulations. The Strategic Training Plan is closely aligned to CSB short and long term goals and objectives.

**ii. Annual Training Plan**

The plan is developed based on: Staff Training and Professional Development Survey results from the program's self-assessment and the ongoing monitoring, staff's needs and goals identified in their performance evaluations, and federal, state and county regulations.

**iii. Training Calendar**

This identifies training topics and events for a 12-month period. It is updated quarterly and training opportunities and events are reflected on a monthly program calendar available to each CSB staff member. In addition, staff members are informed of ongoing community training events and opportunities.

**iv. Training Budget**

This is developed annually to support the implementation of the Training Plan. The budget also provides for additional training activities, as well as for training materials and equipment.

**v. Training Delivery / Implementation-Required Staff/Management Training**

- Orientation – All new staff are required to complete a bureau orientation covering all Department and County policies relating to employment. A site-based and program orientation is conducted within the first 2 weeks of employment. Additional orientation information is included in the New Employee Orientation section below.
- Ongoing Training – provided throughout the year in a timely and balanced fashion to ensure that staff possess the knowledge, skills, and expertise required to fulfill their job responsibilities and to operate a successful program.
- Head Start Required Training – provided to ensure that line and management staff develop skills and knowledge needed to operate a successful and effective Head Start program, one that fully meets the Head Start Performance Standards and the program objectives of the grantee.
- California Department of Education (CDE) Required Training – provided to meet the requirements of the Exemplary Program Standards and the State regulations.
- Community Care Licensing (CCL) Required Training – provided to ensure that line and management staff have knowledge and skills to provide services and operate a program in congruence with the Community Care Licensing requirements.
- Contra Costa County (CCC) Required Training – provided to all CSB staff to ensure that

the program creates a working environment that meets the County requirements and that staff members conduct themselves in a manner prescribed by the Code of Conduct.

- Domestic Violence Training- All Head Start and Early Head Start staff is trained on an annual basis regarding domestic violence. This training includes identifying the effects these situations may have on a child's behavior, how to talk with a parent who has made a disclosure of domestic violence, and community resources available to those in need. The role of staff is to listen to the parents' needs and provide specialized resources/assistance as requested and appropriate following the procedure for supporting families in crisis.

#### **vi. Staff/Professional Development**

Staff/Professional Development activities are the joint responsibility of the individual and CSB. All staff members are encouraged to improve their knowledge and skills to advance in their career and effectively serve enrolled children and families. Staff/Professional Development training supported/offered by CSB are as follows:

- Basic Professional Level – Staff members are encouraged and supported to engage in continuing education.
- Participation in activities leading to an associate or bachelor degree – Teaching staff working toward their associate or bachelor degree are supported by various continuing education programs offered by CSB. Additional information is included in the Continuing Education Programs section below.

All permanent County employees are eligible for financial assistance as specified by the policy for training (Administrative Bulletin 112.9) and reimbursement (Administrative Bulletin 204.13).

With the support of educational advancement grants for teaching staff awarded to CSB, staff is eligible for the benefits specified in such grant.

Whenever possible, appropriate accommodations are made to allow staff participation in the training opportunities leading toward an associate or bachelor degree.

CSB makes every effort to accommodate the work schedule to permit staff's attendance in formal training classes, conferences, and professional meetings.

Staff receive information about classes offered through the Community Colleges, Adult Schools, community based workshops, and conferences.

#### **vii. ECE Work Study Program**

Teacher Assistant Trainees (TATs) employed with CSB and in need of core classes to acquire the Associate Teacher Permit are encouraged to participate in the ECE Work Study Program:

- In partnership with the community colleges of Contra Costa, CSB offers its ECE Work Study
- Program designed for TATs endeavoring to advance in the ECE field

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- TATs work to obtain the four core classes, a total of 12 units; upon completing the program, they become eligible for the California Child Development Associate Teacher Permit
- Provides assistance with books, school supplies, tutoring, and paid tuition for required courses
- The only reimbursable travel expenses are: from work to class or from work to campus to fulfill college registration obligations are reimbursable
- The expectation is that participants in this program are working and studying

Program Participation Requirements:

- Must be a TAT with CSB and at least 18 years of age
- Must have worked at least 30 days in the classroom prior to applying for program
- Must have completed orientation and online trainings with sub coordinators and onsite orientation with initial Site Supervisor or designee
- Must work at least 24 hours on average per week in the classroom; 30+ preferred;
- Must maintain good attendance, job performance, and professional conduct by being professional, respectful, cooperative, punctual, prepared to learn, collaborative, communicative, and courteous
- Must be recommended for program by Site Supervisor and approved by Assistant Director
- Must complete and submit application both for CSB program and college
- Must register for classes (assistance provided during Enrollment Sessions)
- Must attend mandated tutoring when grade is below a “C”
  - If a participant in the program during the semester finds difficulty with coursework, they may utilize tutoring services even if their grade is “C” or above to ensure success in their classes; if tutoring is received during TAT’s work hours, they will be paid
  - TATs will also be paid to attend mandated tutoring during work hours
- Must study outside of class, utilize available resources, and complete all required assignments and tasks by college instructors to maximize success in the program
- Must communicate individual and academic needs, concerns, and/or challenges immediately to Program Coordinator to ensure they are addressed and resolved so that it does not become a barrier to TAT’s success in the program
- Must provide timely notification to the college instructor and the Program Coordinator of changes and/or circumstances that affect participation in the program (e.g. absences, medical reasons, change in phone number, etc.)
- Must obtain a grade of “C” or higher in all classes
  - If a grade below a “C” is received in any of the four core classes offered, participant is permitted to take the class again. If, after second attempt to take the class, the grade remains below a “C”, participation in the program must be discontinued.
- Upon completing the program:
  - Must transition into an Associate Teacher sub position
  - Must apply for the California Child Development Associate Teacher Permit
  - Must commit to at least two years of working with young children ages 0-5 at CSB
- If CSB has a permanent Associate Teacher position vacancy, the TAT must apply

- Must submit requested documents to the Program Coordinator
- Must keep all borrowed textbooks and laptops in the condition it was received; return all books at the end of the semester; return laptop upon completing the program

**viii. On-the-Job Training Program (Metrix Learning)**

Income-eligible Contra Costa Residents, including parents, are provided with employment, mentorship, on-the-job training and support in establishing and pursuing career advancement objectives and goals within the field of clerical support and administrative services. The program requires participation in on-line vocational learning. Participants who successfully complete the program receive a Certificate.

**ix. Professional Growth Activities for renewal of existing or receiving of a new Child Development Permit**

Staff are provided the opportunity to participate in a variety of training/ professional development activities offered by CSB or the educational community, leading to completion of the CDE required professional growth hours for Child Development Certification. It is the responsibility of the employee to ensure that all renewal or upgrade requirements are met to maintain a valid Child Development permit as required by their position.

- CSB managers and supervisors, who are certified Professional Growth Advisors, counsel program staff and provide them with effective guidance and assistance in accomplishing their professional goals.
- Participation in professional organizations and technical societies – staff are encouraged and supported to participate in technical societies and professional organizations.
- Staff are given time off to attend meetings/conferences, whenever possible.
- Staff's membership in the NHSA is paid by CSB. Participation in other professional organizations and technical societies is governed by the CCC Personnel Management Regulations (PMRs).

**x. Parent training is conducted throughout the year in a variety of settings including**

- Annual Parent Conferences
- Monthly Policy Council Meetings
- Monthly Parent Committee Meetings
- Policy Council training events
- Monthly Parent Trainings (in each part of the County)
- Annual Trainings

**xi. Evaluation and Monitoring**

Evaluation and monitoring of the training activities are effective ways to determine the extent to which the training achieved its objectives and to plan follow-up activities. They also ensure a

consistent sequence in the whole training process. The following tools are used to evaluate and monitor the Staff Training and Development process:

- Staff Performance Evaluations - provide information for effectiveness of training, follow-up activities, and individual training needs.
- Tracking System - provides data regarding individual staff training and the sequence for balance of training opportunities in general.
- Training Summary - provides information about effectiveness of the training, the follow-up activities and the need for technical assistance.
- Ongoing Monitoring and Self-Assessment findings - provide information for the update of the training plan. Monitoring and Self-Assessment are used to determine the training needs and professional development activities for the next school year and for the next three-year Strategic Plan. The Staff Training and Development System operate in a cycle. The results from the Evaluation and Monitoring are crucial elements for the beginning of the new planning cycle.

## FF. New Employment Orientation

1. All new employees will receive a CSB orientation covering the goal and the underlying philosophy of the program, the department and county policies and programs and the ways they are implemented, and will sign a New Employee General Orientation Record form. The Personnel Unit is responsible for conducting New Employee Orientation Trainings, which include but are not limited to:

- EHSD and CSB Mission Statements and Organizational Structures
- Employee Rights and Responsibilities
- Standards of Conduct, Rules & Regulations, CSB's Buddy System
- Payroll and Expense Reimbursements
- Employee Benefits and Training
- IT Policies & Resources
- Injury & Illness Prevention Program Training

2. All newly employed teaching staff, including Site Supervisors, and other staff determined to benefit from, will receive an Education Orientation. The CSB Education Team is responsible for conducting the Education Orientation, which includes, but is not limited to:

- Performance Standards
- Job Descriptions
- Curriculum goals, objectives and effective implementation
- Screenings, assessment, individualization, and parent-teacher conferences
- Kindergarten transition
- Positive Guidance and Discipline
- Project Approach
- Lesson Planning
- Nutrition, Education, Health, Mental Health, Disabilities & Homelessness Programs
- Parent, Family, and Community Engagement



Further, newly hired teaching staff will receive on-the-job training to ensure their successful acclimation with the program.

3. All non-teaching staff will receive on-the job training as identified for the work unit and specific job.

Specially designed New Employee Orientation Check-Off Lists will be utilized for navigating each employee learning and on-boarding.

Additional initial and ongoing orientation trainings will be provided to new employees as required by County, State and Federal regulations.

All volunteers and temporary/substitute staff will review the CSB Substitute and Volunteer Handbook, and will sign the Handbook receipt which will be kept on file at the center and the personnel files. Both volunteers and substitute staff will also receive on-site orientation at the center/office. Substitute staff additionally will complete the Substitute Orientation Checklist with the Substitute Coordinator.

## **GG. Continuing Education Programs**

CSB will make every effort to support staff pursuing a degree in higher education that is relevant to the public services provided by CSB.

CSB staff enrolled in programs leading to an associate or bachelor degree are encouraged to use the financial benefits available through the County as outlined in Administrative Bulletin 112.9.

CSB works with local colleges and universities, and community organizations to provide mentorship, tutorial, and other support services. A lending library is available to staff attending degree programs in the local community colleges.

In addition, CSB is committed to pursue grant opportunities providing financial support for staff working towards degrees or credentials in early childhood education, or related field, as specified in the Teacher Qualifications Section 648(A)(2) of the Improving Head Start for School Readiness Act of 2007 and the 2016 Head Start Performance Standards.

## **HH. Delegate Agency Policies**

### **1. Appeal Procedures for Current & Prospective Delegate Agencies:**

The 2007 Head Start Act requires all grantees to provide written procedures for evaluating and defunding a delegate agency and procedures for a delegate agency to appeal a defunding decision. Head Start Program Performance Standards in 45 CFR 1303.33 and 1304.6 provides for three (3) separate and distinct occasions a current or prospective delegate may have appeal rights to CSB or the responsible HHS official:

- Termination of a contract with a current delegate agency

- Rejection of a funding application from a prospective delegate agency
- Failure of the grantee to act on a funding application from a prospective delegate agency

The applicable procedures are described in the sections below. These appeal procedures do not apply in any of the following circumstances:

- CSB's decision not to fund a prospective delegate agency or a current delegate agency in the first year of any future competitive or non-competitive five-year grant award period from the Office of Head Start (OHS);
- Any CSB contract for services other than as a current HS or EHS delegate agency;
- Funding applications from current delegate agencies for cost-of-living allowances (COLA), program improvement funds (PIF), or quality improvement (QI) funds, or similar supplemental funding whether one-time or permanent increase in the funding amount to the current delegate agency;
- Reduction, by any amount or percentage, of a current delegate's recruitment area(s);
- Reduction, by any amount or percentage, of a current delegate's slots or funding level;
- Removal of one or more contracted programs funded by CSB except where the removal is a termination of the contract and all of the delegate agency's funded programs;
- Suspension of a current delegate's funding; or
- CSB-funded CSPP or CCTR programs.

## **2. Mandates and Implementation**

### **i. Current Delegate Appeals**

Termination of a Head Start, Early Head Start, or Early Head Start-Child Care Partnership contract with a current delegate. CSB may not terminate a current delegate's contract based on defects or deficiencies in the operation of the program without first:

- Notifying the delegate of the defects/deficiencies;
- Providing, or providing for, technical assistance to assist the delegate in correcting the defects and deficiencies; and
- Giving the delegate the opportunity to make corrections based on the grantee's approval of the delegate's Quality Improvement Plan (QIP) and the identified defects and deficiencies within ninety (90) days from the date of notification by the grantee to the delegate agency of those

defects and deficiencies. Extensions are at the discretion of CSB.

If after the above procedures have been followed, the delegate agency still fails or refuses to make the necessary corrections in its program operations, the CSB Bureau Director, shall notify the EHSD Department Director of his/her recommendation to terminate a delegate agency's contract and the need to identify a designated reviewer in the event there is an appeal of CSB's decision.

If the EHSD Director supports terminating a delegate agency's contract, the EHSD Director will provide the Board of Supervisors with a recommendation to terminate the contract. The Policy Council is not required to approve the decision to terminate a current delegate agency contract.

Once the Board of Supervisors and the EHSD Director have reached an agreement, the EHSD Director will:

- Notify the delegate agency within five (5) working days after the EHSD Director and Board of Supervisors have reached an agreement.
- Convene a meeting with the delegate agency's governing board and CSB representatives to outline the options available to the delegate agency.
- Allow the delegate agency five (5) working days following the joint meeting to voluntarily terminate the contract with CSB. This meeting must include a representative from the delegate agency's policy committee executive membership.
- Notify the delegate agency of the termination of the contract to provide HS and/or EHS services (including EHS-CCP) and the reasons for the decision when the delegate agency rejects voluntary termination. The notice will include a statement that the delegate agency has a right to appeal the decision within ten (10) working days of receiving the notice.
- Ensure that the appeal procedure is fair and timely and is not arbitrary or capricious.
- Select a EHSD designated reviewer in preparation for a possible appeal from the delegate agency.
- Submit a copy of the delegate agency's appeal together with CSB's response to the appeal to the designated reviewer within twenty (20) working days from the receipt of the appeal.
- Review the written appeal from the delegate agency and issue a decision within sixty (60) working days of receiving the appeal notice.
- Notify the responsible HHS official about the termination decision, the delegate agency's appeal timelines, and CSB's final decision.

The designated reviewer will review within ten (10) working days the delegate agency's appeal and CSB's response to the appeal. The designated reviewer will not accept and/or review from the delegate agency and/or CSB any additional information after the appeal is submitted. The designated reviewer will submit his/her recommendation to the EHSD Director or designee to sustain CSB's initial decision to terminate the delegate agency's contract or to support the delegate agency's appeal position.

The designated reviewer will review all submitted documentation by the delegate agency and determine the following:

- Whether, when, and how CSB advised the delegate agency of alleged defects and deficiencies in the agency's operations prior to sending the rejection notice.
- Whether CSB provided the delegate agency reasonable opportunity to correct the defects and deficiencies and the details of the opportunity that was given.
- Whether CSB provided or provided for technical advice, consultation, or assistance concerning the correction of the defects and deficiencies.
- The steps or measures undertaken by the delegate agency to correct the defects or deficiencies.
- When and how CSB notified the delegate agency of its decision, the reasons for its decision, and how the reasons were communicated to the agency.
- If the delegate agency believes CSB acted arbitrarily or capriciously, why the delegate agency believes this to be true.
- Any other facts supporting the delegate agency's appeal of CSB's decision.
- If the designated reviewer is in support of the EHSD Director's and Board of Supervisors' decision, the EHSD Director will notify the delegate agency within twenty (20) days and give instructions and timelines for completion of the close-out of the HS, EHS, and/or EHS-CCP program(s). A close-out contract will be issued to the delegate agency.
- If the designated reviewer disagrees with the EHSD Director's and Board of Supervisors' decision to terminate based on the appeal review, the designated reviewer will within ten (10) working days notify the EHSD Director in writing and provide specific reasons to support the decision.
  - The EHSD Director will review with the Board of Supervisors the recommendation of the designated reviewer, and the EHSD Director will make a subsequent recommendation to the Board.
  - The delegate agency will be notified within twenty (20) working days whether the Board of Supervisors and EHSD Director uphold the initial decision or will allow other actions to be taken with the delegate agency.

- The EHSD Director will notify the responsible HHS official about the appeal decision and the next steps.

This decision is final and no further appeals are allowed from the delegate agency to CSB or to the responsible HHS official. Current delegates that meet the criteria for termination will be sent formal notice of the intent to terminate the contract with specific reasons included in the notice.

The notice will be sent to the following three contacts at the delegate:

- Governing Entity of the Organization: President of the Board of Directors
- Head Start/Early Head Start Executive Director
- Policy Committee Chair

This notice may be sent by certified mail, return receipt requested, or any manner that provides proof of the date of receipt by the delegate.

The notice will be sent to the delegate's official address as identified in the current contract unless the agency has provided a change of address notification. If the notice is returned by the delivery company or the United States Postal Service as "undeliverable," the notice will be sent to the delegate's last known address provided by the California Secretary of State.

The notice must include the EHSD contact and the address to file all appeals and supporting documentation.

Selection of the EHSD Designated Reviewer:

During the annual planning process, but no later than August 1, and in anticipation of a possible appeal, the CSB Director will prepare a list of prospective reviewers and work with Division Managers to review the EHSD staff roster for potential "designated reviewers." Qualifications and requirements for the reviewer(s) are listed below.

The designated reviewer must:

- Be knowledgeable about HS and EHS programs (including EHS-CCP), regulations, and legal contracts.

- Have no involvement with the original decision to terminate the contract.
- Have no personal interest or bias in the matter that may prevent an objective, impartial review of all information relevant to the case.
- Have not received funding directly or indirectly through CSB's HS or EHS budget.

The CSB Director, will identify a minimum of three (3) current or former EHSD employees or external consultants as designated reviewers. The list will be submitted to the EHSD Director no later than September 1 each year. The EHSD Director will review and approve the list. The designated reviewers must not be employees of CSB.

The approved list will be sent to the CSB Director, who will train new additions to the list as necessary. The training will include appeal procedures, federal regulations, Head Start law, and the current CSB delegate contract. The training will also provide the timetable for the refunding process, including the date(s) applications are due to CSB, the cutoff date for CSB's completed application review, and the deadline for delegate to submit appeals.

#### **ii. Prospective Delegate Agencies**

The EHSD Director chooses delegate agencies through a competitive solicitation process, assigns services areas, and enters into contract service agreements. The EHSD Director will share information on the process and outcome with the Board of Supervisors.

#### Unsolicited Request for Funding:

If CSB receives an unsolicited funding application from a prospective delegate agency or a current delegate agency when no CSB RFP/RFQ was announced, the executive director, Head Start-State Preschool Division, will notify the applicant that its funding application cannot be accepted and that it has no appeal rights to the responsible HHS official.

#### Solicitation through RFQ:

An RFQ is initiated to establish a list of qualified prospective delegate agencies. It is intended to determine the viability of a prospective delegate to effectively operate a CSB program through its existing organizational structure, policies and procedures, and fiscal solvency. The application requires programs to answer questions pertaining to the organization's current operations and fiscal management.

If a prospective delegate agency submits an application to CSB in response to an RFQ and that RFQ does not request a written program narrative and detailed operational budget, the prospective delegate agency has not submitted a “funding application” and, therefore, no appeal rights are available.

Solicitation through RFP:

An RFP is initiated when a service area identified by CSB becomes available with associated funding allocation. An RFP requires submission of a written program narrative and detailed operational budget detailing plans that will be undertaken should the prospective delegate agency be awarded a contract to directly serve children under CSB.

Appeals from prospective delegate agencies or RFP applicants will follow the appeal process as outlined in Board of Supervisors Policy 5148.4.

- If a prospective delegate agency’s funding application is rejected, CSB’s Business Services will notify the prospective delegate agency of CSB’s decision and the prospective delegate agency’s right to appeal directly to the responsible HHS official.
- If CSB denies, or fails to act on, a prospective delegate agency’s RFP funding application within the specified amount of time, the prospective delegate may appeal CSB’s decision or inaction.
- If after a prospective delegate agency submits an application to CSB under an RFP publication and CSB requests and the prospective delegate agency submits additional information (i.e., written program narrative and detailed operational budget), then a “funding application” has been submitted to CSB. Should CSB reject that funding application, the prospective delegate agency now has the right of appeal to the responsible HHS official.

**Note:** A current delegate agency submitting a funding application under a CSB RFQ/RFP is considered a “prospective delegate agency” and must follow the appeal process as specified herein for prospective delegate agencies.

To appeal, a prospective delegate agency must:

- Submit the appeal, including a copy of the funding application, to the responsible HHS official within 30 days after it receives CSB’s decision to reject a funding application, or within 30 days after CSB has had 120 days to review but has not notified the prospective delegate agency of CSB’s decision; and,

- Provide CSB with a copy of the appeal at the same time the appeal is filed with the responsible HHS official.

CSB must provide the responsible HHS official with a response to the prospective delegate agency's appeal within thirty (30) working days of receiving the materials submitted by the prospective delegate agency.

CSB's response must:

- Relate to the items specified by the agency in its appeal submitted to HHS.
- Specify why CSB acted appropriately.
- Identify why CSB's actions taken were not arbitrary or capricious.
- Explain any other mitigating factors that support CSB's position not to accept the application or why action was not taken on the prospective delegate agency's funding application.

If the responsible HHS official finds CSB acted arbitrarily, capriciously, or otherwise contrary to law, regulation, or other applicable requirements, CSB may be directed to reevaluate its decision.

The responsible HHS official's decision is final and not subject to further appeal.

## II. Short-Term Contract Employees

Contract employees working over one year must have the approval of Contra Costa County. The need for contract labor is determined and funds must be available for contract labor.

Selection of persons to fill contract labor positions is determined by the appointing authority or designee.

Contra Costa County Managers and Directors give input into the development of the Service Plan.

Please see reference to contracts and grants under Record Keeping and Reporting.

## JJ. Union Membership

Contra Costa County follows the State of California Legislature, adopting a set of codes pertaining to employer-employee relations for public agencies as follows:

- The Contra Costa County Board of Supervisors recognizes collective bargaining units to



represent certain classifications of County employees - to determine the wishes to be represented, and by which organizations.

- Representatives of the collective bargaining unit provide literature/information regarding the services of that unit, and conditions of employment (agreed to by the Board of Supervisors and that collective bargaining unit).

The Board of Supervisors approves processes by which representatives of the bargaining unit may use Contra Costa County time, facilities, and bulletin boards to communicate with members. The collective bargaining unit provides its members with information regarding these matters. Questions relating to policies guiding the collective bargaining process are directed to:

*Human Resources  
Department Employee  
Relations Division 651 Pine  
Street, Second Floor  
Martinez, CA 94553*

#### **KK. Equal Opportunity/Affirmative Action Policy**

CSB shall not illegally discriminate in their recruitment, selection, promotion, or implementation of personnel policies and procedures against any person without regard to race, religion, sex, sexual orientation, national origin, age, disability, or military status. All applicable state and federal laws will be followed including, but not limited to Title VI, and Title VII, of the Civil Rights Act of 1964, as amended; the Age Discrimination in Employment Act of 1967, as amended, Section 504 of the Rehabilitation Act Amendments of 1974; the Civil Rights Restoration Act of 1987; the Americans with Disabilities Act of 1990 and the Civil Rights Act of 1991. Employment Discrimination procedures are set forth in Contra Costa County Administrative Bulletin 429.3.

#### **LL. Approval of New Personnel Policies and Revisions**

All personnel policies must be approved by Community Services Bureau, Policy Council, the County Human Resources Department, and the Board of Supervisors. Personnel policies and procedures must be consistent with collective bargaining agreements, and approved by County Counsel and County Human Resources as appropriate. The process is as follows:

- A policy is drafted with input from managers and program staff, related committees, and appropriate department personnel.
- County Counsel and County HR review it as appropriate.
- The draft policy is submitted to appropriate Managers and Assistant Directors for review/input before it is submitted to the Community Services Director for review and approval.
- After the Community Services Director's approval of the draft policy, it is submitted to the Policy Council for review and approval.
- If the draft policy is health-related, the draft is reviewed by the Health Advisory Committee before submission to the Policy Council.
- The draft policy must be consistent with written policies of collective bargaining agreements.

- The draft policy is submitted to the Board of Supervisors for review and approval.
- If the content of a policy has changed since the Policy Council's original approval, the Policy Council must approve the final version.
- After personnel policies and procedures have been approved, they are made available to staff electronically and in hard copy if requested.
- Policies and procedures are translated as needed.
- Policies and procedures are being made available in Braille as needed.
- Community Services Director and Personnel Director are responsible for amending, revising, or otherwise modifying these policies and procedures.

# POLICIES AND PROCEDURES

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## SECTION 3-ALTERNATIVE PAYMENT PROGRAM

**2019-21**

Board of Supervisors Approved: 07/30/19

2019-21  
Policies and Procedures  
Section 3: Alternative Payment Program

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## Part I. Program Overview

The purpose of this program is to provide subsidized child care for eligible children and families living in Contra Costa County and to provide a wide range of child care choices for participants. The CalWORKs Stage 2 child care program is limited to those participants who are in receipt of or have received CalWORKs cash assistance within the last twenty four (24) months. Our California Alternative Payment Program (CAPP) assists families referred by Children and Family Services and low-income families. Both of these programs support families in their child care decisions and make timely payments to their chosen child care providers.

CSB operates in accordance with all applicable state and federal laws governing human service agencies. Directed by the California Department of Education Title 5 regulations, CSB administers the child care subsidy program on a non-discriminatory basis, giving equal treatment and access to services without regard to race, color, creed religion, age, sex, national origin, sexual orientation, disabilities, or any other category that is prohibited by law.

For participants/families/providers that do not speak English, the Child Care Assistant Manager will provide, if available, translated materials, or upon request will provide an interpreter to explain the materials in the language the participants/family/provider prefers.

Children can be served from birth up until their 13<sup>th</sup> birthday, or up to age 21 if special needs are verified with appropriate documentation.

CSB CalWORKs Stage 2 & CAPP child care program administers subsidized child care through a vendor approach, providing full or partial payments for child care of eligible participants. These programs are designed to maximize parental choice in selecting child care. Participants may select child care services from licensed centers and preschools, licensed family child care homes, or licensed-exempt providers. Subsidized child care does NOT pay for private schooling.

### A. How to Qualify for Services

There are various ways that families can qualify for our programs. There are two distinctly subsidized programs that CSB administers, CalWORKs Stage 2 and CAPP (California Alternative Payment Program).

#### 1. CalWORKs Stage 2:

This program is the second out of three stages from the CalWORKs child care services. CalWORKs Stage 2 child care services begins when the county welfare department determines that a CalWORKs Stage 1 family is stable and transfers the family to our CalWORKs Stage 2 program for continuation of child care services.

Families that are not participating in CalWORKs Stage 1 child care services may be eligible in receiving CalWORKs Stage 2 if a family applies and is found eligible by meeting the following criteria:

- Family is and remains income eligible *and*

- Participant is responsible for the care of the child needing child care services *and*
- Participant is a CalWORKs cash aid recipient or a former case aid recipient who received cash aid within the last 24 months *or*
- Participant is determined eligible for diversion services by the county welfare department.
- *And* Participants must have a documented need(s) for child care

The twenty-four (24) month period begins when the participant leaves cash aid. For example, if a participant's last date of cash aid was January 31<sup>st</sup>, 2015, the participant is eligible in receiving CalWORKs Stage 2 until January 31<sup>st</sup>, 2017 (as long as family remains income eligible and maintains a need for child care). Upon approaching the twenty-four month period, families will be transferred to CalWORKs Stage 3 child care. It will be the responsibility of the Child Care Assistant Manager to work with the participant to determine the appropriate stage for child care services. The twenty-four (24) month period resets when the participant begins receiving CalWORKs cash aid.

Please Note: Families receiving CalWORKs cash aid for child aid only are not eligible for CalWORKs Stage 2. Families that are not eligible for CalWORKs Stage 2, will be placed on a waiting list for CAPP, if funding is not available.

## **2. CAPP (California Alternative Payment Program):**

Families may be eligible for CAPP funding based on need and eligibility criteria (such as low income working families), with first priority for those children currently receiving child protective services, or those children who are considered at risk of abuse, neglect or exploitation by a legally qualified professional. Participants must maintain eligibility and need while enrolled in CAPP. Enrollment is based on available funding.

### **B. How Families are selected for the Programs**

There are various ways that families may be selected to participate in one of our programs. Families are enrolled based on the following (*all enrollments are subject to availability of funding*):

- Families may be referred to CSB for enrollment from *Children and Family Services* (CFS), if child is receiving child protective services and it is stated on referral that child care is deemed a necessary part of the service plan.
- Families may be enrolled through an eligibility list maintained by CSB for families wanting to participate in subsidized child care. These lists rank families on their income and family size to ensure the most eligible family is being served at the time of enrollment. (All families with CPS, or at-risk referrals, will be enrolled as 1<sup>st</sup> priority.)
- Families may be transferred to Stage 2 child care services from the Stage 1 child care unit upon discontinuance of cash assistance or when families have been considered stable by their previous child care worker. Families may also be enrolled directly into Stage 2 child care if the family is deemed Stage 2 eligible and meet the eligibility and need criteria.

### C. Enrollment Process

Based on the availability of funding, families will be notified by phone if they are selected to participate in our program. For those families referred by Children and Family Services or for those deemed At-Risk, our office will contact the referring individual to verify the child's need and begin communication regarding enrollment to better support the needs of the family.

Intake Packet for the CalWORKs Stage 2 & CAPP Child Care Program will be mailed to the participant applying for services. Participants may be scheduled for an appointment to review all documents being submitted. Participant must provide all requested information and documentation to determine initial and ongoing eligibility within the timeframe given.

Intake Packet may be completed electronically by the participant by the due date indicated by CSB staff. Digital signature by the participant is accepted, however, participant must comply with CSB's policies.

- At the time of appointment, participants will be required to bring documentation that may include, but is not limited to, the following:
  - Birth records for all children counted in the family size
  - One month current/consecutive paycheck stubs
  - Any other income received such as Cash Aid, Unemployment, Disability, etc.
  - Verification of need for child care such as employment, vocational training, or parental incapacity
  - Immunization records for non-school age children (if chosen provider is non-licensed)
  - If applicable, an active individual family service plan (IFSP) or individualized education program (IEP) for children with special needs that includes a statement signed by a legally qualified professional that the child requires the special attention of adults in a child care setting which also includes the name, address, license number and telephone number of the legally qualified professional who is rendering the opinion
  - Any other verification documentation as requested by the Child Care Assistant Manager to determine the families need and eligibility for services.
  - Provider Packet (see Provider Participation section)

Upon completion of the Child Care Application, the assigned Child Care Assistant Manager will review and verify the information provided by the participant.

Once services are reviewed, verified and approved, the Child Care Assistant Manager will issue a *Notice of Action* (NOA) to the participant and send a copy to the chosen provider indicating certification has been completed. Along with the Notice of Action, the participant will receive one *Child Care Agreement* per child.

- The Child Care Agreement(s) will outline the following:
  - The effective date of the Child Care Agreement

- The end date of the Child Care Agreement
- Name of the Participant
- Name of the Child
- Monthly Family Fee *if applicable* (See Family Fee section for more information)
- Authorized Days
- Authorized Hours
- Payment Rate
- Maximum Payment Amount CSB can reimburse
- Co-payment *if applicable* (See Co-Payment section for more information)
- Authorized Child Care Provider
- Type of Child Care Provider
- Registration Fee *if applicable* (Licensed Providers only)

Important: If child care starts before child care services or provider has been approved by the Child Care Assistant Manager, it will be the participant's responsibility to pay the provider directly for any child care services rendered before child care services has been approved.

For those families transferred from CalWORKs Stage 1 to our CalWORKs Stage 2 child care program, a *Welcome Packet* will be mailed to the participant explaining the transfer has occurred. The packet will contain a letter indicating the effective date of transfer and the contact information for the family's assigned Child Care Assistant Manager. The following documents in the Welcome Packet will include: Welcome Letter, Child Care Agreement(s), the Participation Handbook, attendance sheets, and any other documents pertaining to the case. A copy will be mailed to the child care provider(s) on file.

#### D. Eligibility and Need

##### 1. Eligibility:

Is determined at the time of enrollment, recertification or upon an update on the participant's application because of a reported change. The participant is required to provide to the Child Care Assistant Manager the appropriate documentation to prove their eligibility and continued eligibility for child care. One or more of the following criteria determines their eligibility for child care services.

##### i. Income Eligibility:

If the income is equal to or less than 85 percent of the state median income released by California Department of Education Early Learning and Care Division. Participants will be required to provide supporting documentation for all total countable income. Listed below are the income guidelines by family size:

- The Child Care Assistant Managers will calculate the total gross monthly income of the family based on, but not limited to, the following:
  - Gross wages or salaries, advances, commissions, overtime, tips, bonuses, gambling or lottery winnings



- Wages for migrant, agricultural, or seasonal work
- Public cash assistance (TANF/Cash Aid)
- Gross income from self-employment less business expenses with the exception of wage draws
- Portion of student grants or scholarships not identified for educational purposes as tuition, books, or supplies
- Disability or unemployment compensation
- Workers compensation
- Spousal and/or child support received from the former spouse or absent parent, or financial assistance for housing costs or car payments paid as part of or in addition to spousal or child support
- Foster care grants, payments or clothing allowance for children placed through child welfare services
- Financial assistance received for the care of a child living with an adult who is not the child's biological or adoptive parent

**i. Homelessness:**

If the basis of eligibility is homelessness, documentation is needed stating that the participant is homeless and a description of the family's situation from a local shelter, a legally qualified professional from a medical or social service agency, or a written parental declaration written by the participant.

**ii. Child Protective Services:**

If the basis of eligibility is Child Protective Services, a written referral by the county welfare department must be provided to our agency indicating that the child is currently receiving CPS services and child care is a necessary part of the service plan. The referrals must be dated within six (6) months prior to the date of application for services. The referral must also include:

- The probable duration of the CPS service plan
- The hours approved for child care services
- The name and signature of the child welfare services worker who is making the referral, their business address and telephone number

**iii. At Risk of Abuse/Neglect:**

If the basis of eligibility is that the child is deemed at-risk of abuse/neglect, a written referral by a legally qualified professional from a legal, medical, or social service agency must be provided to our agency indicating that child care is needed to reduce the risk. The referral must be dated within (6) months prior to the date of application for services. The referral must also include:

- The probable duration of the at risk situation
- The hours approved for child care services
- The name, signature and license number of the legally qualified professional who is making the referral, their business address and telephone number

**iv. Transferring from CalWORKs Stage 1 to CalWORKs Stage 2 child care (Cash aid recipient or discontinuing from cash aid):**

If the participant is transferring from Stage 1 to Stage 2, initial documentation (9 data elements) will be required at the time of transfer from Workforce Services Bureau. Upon receiving appropriate documentation, participant's eligibility for child care will be extended twenty-four (24 months) from the effective date of transfer. Participant will be asked to provide documents for recertification..

**2. Family Size:**

Upon completion of participant's initial application, recertification or upon an update in family size, participant will need to provide supporting documentation for all children listed in the family. The family members may be documented by the following:

- Birth records; or
- Court ordered child custody agreements; or
- Adoption records; or
- Foster care placement records; or
- School or medical records; or
- County welfare department records; or
- Any other reliable document indicating the relationship of the child to the parent

When only one (1) parent has signed the child care application and the documentation provided for family size determination indicates the child(ren) in the family has another parent whose name does not appear on the application, then parent may self-certify single parent status under penalty of perjury.

- If due to a recent departure of a parent from the family and when participant requests an update, the remaining applicant may submit a self- declaration under penalty of perjury explaining the recent departure of a parent from the family.
  - The Child Care Assistant Manager may require further documentation at any time to prove the absence of a parent from family and/or verify the family composition and family size.

**3. Service Need:**

Families who are income eligible to receive subsidized child care must also have, at minimum, one of the following service need to become enrolled or remain enrolled in our program. All participants/guardians listed in the family size must have a service need. Hours of care provided to the family will be determined by the family's need for services. Below are the service needs:

**i. Child Protective Services (CPS):**

If the need for childcare is based on CPS, a written referral by the county welfare department must be provided to our agency indicating that the child is currently receiving CPS services and childcare is a necessary part of the service plan. The referrals must be dated within six (6) months prior to the date of application for services. The referral must also include:

- The probable duration of the CPS service plan
- The hours approved for child care services
- The name and signature of the child welfare services worker who is making the referral, their business address and telephone number

**ii. At-Risk:**

If the need for child care is based on the child(ren) being at risk of abuse, neglect, or exploitation, a written referral by a legally qualified professional from a legal, medical, or social service agency must be provided to our agency indicating that child care is needed to reduce the risk. The referral must be dated within (6) months prior to the date of application for services. The referral must also include:

- The probable duration of the at risk situation
- The hours approved for child care services
- The name, signature and license number of the legally qualified professional who is making the referral, their business address and telephone number

**iii. Parental Incapacity:**

If the basis of need for child care is parental incapacity (temporary or permanent), documentation shall include a release signed by the incapacitated participant authorizing a legally qualified health professional to disclose information necessary indicating why the participant is incapable of providing care and supervision for the child(ren). The documentation must also include the following:

- The days and hours per week that services are recommended (Child care services cannot exceed 50 hours per week)
- If incapacitation is a physical condition, a statement from a legally qualified health professional indicating to the extent to which the participant is incapable of providing care and supervision for the children is required
- The name, business address, telephone number, professional license number and signature of the legally qualified health professional

**iv. Employment:**

If the basis of need for child care is employment, families may receive child care services during the time they are working and traveling to and from work. To qualify for child care services under this need, participants would need to submit the following documentation:

- An employment verification form – completed and signed by the participant consenting CSB staff to contact their employer to verify employment.
- One month’s worth of current and consecutive pay stubs (*if new employment, income will initially be assessed based on the employment verification form upon verifying employment with employer*)
- If participant is paid in cash by their employer, participant will provide a letter from the employer verifying the following:
  - An employment verification form – completed and signed by the participant’s consenting CSB staff to contact their employer to verify employment.
  - Statement declaring employee is paid in cash only
  - Self-certification of income from participant
- If the participant is self-employed, the participant will provide the following:
  - A declaration under penalty of perjury that includes a description of the nature of their employment and an estimated number of days and hours worked per week
  - Copies of appointment logs, client receipts and/or mileage logs to demonstrate the days and hours worked
  - As applicable, copy of their business license, or workspace rental agreement
  - As applicable, a list of clients with contact information
  - Provide documentation to establish income (*may include but not limited to, a list of clients and amounts paid, the most recently completed tax returns, other records of income to support the reported income, along with a self-certification of income*)

Please Note: Participants employed by child care centers, or assisting family care home providers may receive services, but those participants who are licensed providers registered with Community Care licensing are not eligible to receive child care services for their own child(ren).

**v. Approved Welfare to Work Activity (*For Stage 2 Participants receiving Cash Assistance*):**

The Welfare-to-Work (WTW) Program is a comprehensive Employment and Training Program designed to promote self-sufficiency. CalWORKs recipients are assessed to determine the best course of action, whether it is immediate placement into a job, placement into an education or training program, or both.

CalWORKs recipients must participate in the Welfare-to-Work Program or be employed in order to determine need for CalWORKs Stage 2. All Welfare-to-Work participants receive an orientation to the program and appraisal of their education and employment background, followed by the

development of a Welfare-to-Work plan designed to assist individuals with obtaining employment. Employment Specialist will forward a referral to the Child Care Assistant Manager in order for child care services to be approved. For any additional hours of child care, the participant must communicate with their Employment Specialist in order for activity to be approved by their worker as well as approval for child care services.

**vi. Training Towards Vocational Goal:**

If the basis of need for child care is training towards a vocational goal, families may be eligible for child care services if the participant(s) are enrolled in a program that will directly lead to a recognized trade or profession. There is a six (6) year limitation for services under this need and the participant must continue to make adequate progress towards their goal. Regardless of the length of time a participant needs to complete their training, child care services must not exceed the six (6) year time limit. To qualify for child care under this need, participants must submit the following documentation:

- Training Verification Form to be signed by registrar (or designee of program). This form includes such information as name and location of school/training institute, days and hours of class/training schedule, vocational goal of parent, etc. *If a printout of current class schedule is available, registrar does not need to sign.*
- A copy of the current class schedule if available in electronic print, if not this information may be indicated on the verification form listed above.
- The anticipated completion date of all required courses/trainings to meet the vocational goal of the parent.
- At recertification, participant will be required to submit their most recent grades to show they are meeting adequate progress towards their vocational goal.
- Participant may request hours for study time for any academic course(s) enrolled. Participant and Child Care Assistant Manager will discuss the hours of study time.

**vii. Actively Seeking Employment:**

If the basis of need for child care is seeking employment, each participant in the home may qualify for child care services during the time they are actively seeking employment. Services must not exceed more than five (5) days per week and for less than thirty (30) hours of child care per week. Participants seeking employment will be required to submit a self- declaration under penalty of perjury that they are currently looking for employment. This declaration will include their plan to secure, change or increase employment and a general description of the child care hours necessary during this time. The Child Care Assistant Manager may request verification of the job search and/or interviews at any time.

### viii. Seeking Permanent Housing

If the basis of need for child care is seeking permanent housing, each participant in the home may qualify for child care services during the time they are actively seeking permanent housing. Services must not exceed more than five (5) days per week and for less than thirty (30) hours of child care per week. Participants seeking permanent housing will be required to submit a self-declaration under penalty of perjury that they are currently looking for employment. This declaration will include their plan to secure, change or increase employment and a general description of the child care hours necessary during this time. The Child Care Assistant Manager may request verification of the job search and/or interviews at any time.

## E. Share of Costs

### 1. Family Fees:

Some families may be required to pay a portion of their child care costs, this is called the “family fee”. These fees are paid by the participant directly to their child care provider. Family fees are determined using the “*Family Fee Schedule*” provided by the California Department of Education (CDE). The following determines a participant’s family fee:

- Family’s gross monthly income
- Family Size
- Child’s Certified Need

Based on the above criteria, families will be assessed either a flat monthly full-time fee or a flat monthly part-time fee based on participant’s certified need. If certified need is 130 hours or more per month, the Full-Time Monthly Fee will be assessed to the participant. If the certified need is less than 130 hours per month, the Part-Time Monthly Fee will be assessed to the participant.

*Example: If participant is approved on the 20<sup>th</sup> of the month and is certified for 8 hours per day, participant’s certified need for the month approved will be less than 130 hours. Therefore a flat Part-Time Monthly Fee will be assessed for the month participant was enrolled and a flat Full-Time Monthly Fee will be assessed on the following month and thereafter.*

If there is more than one child enrolled in the program, the child who uses the most hours of child care will be assessed the monthly fee. Monthly fees cannot under any circumstances, be recalculated based on a child’s actual attendance. Family fees are only to be assessed at initial certification, recertification or when a participant voluntarily reports a change to reduce their family fees. The collected family fee is part of the provider’s reimbursement. The family fee is deducted from the provider’s reimbursement each month. The Child Care Assistant Manager will issue a notice of action anytime there is a decrease, an increase or a new family fee with the effective date of change along with the updated Child Care Agreement. An informational copy will be sent to the provider.

*Example: If participant voluntarily reports a change in income requesting a decrease in family fee to the Child Care Assistant Manager, the Child Care Assistant Manager will reassess participant’s income. If at the time of updating participant’s income, it is determined that they will no longer have a family fee or a decrease in family fee, the Child Care Assistant Manager will issue a Notice of Action to the*

*participant. The family fee will be effective on the first day of the month that follows the issue date of the Notice of Action. For example, if a Notice of Action is issued on July 28, 2017, the effective date of the reduced fee would be August 1, 2017.*

Monthly Fees are due at the beginning of each month. Provider will declare on the monthly attendance record that the monthly fee have been paid for the month of services rendered. The provider shall issue a receipt to the participant of the amount family fees were paid. The monthly fee assessed by the Child Care Assistant Manager will still be deducted from the provider's reimbursement each month.

- The following exceptions apply in paying family fees:
  - Families with children at risk of abuse, neglect or exploitation as determined by a legally qualified professional in a legal, medical, or social services agency or emergency shelter (limitation is up to three (3) months).
  - Child Protective Services (CPS) families may be exempt from paying a fee if child development services are determined to be necessary by the county welfare department (limitation is up to twelve [12] cumulative months)
  - Families receiving CalWORKs (limitation is as long as family is receiving cash aid)

## 2. Co-Payments

A participant may choose a child care provider regardless of the provider's rates. If the participant chooses a provider who charges more than the maximum subsidy amount CSB can reimburse, the participant will be responsible to pay the difference directly to the provider. This difference is referred to as a "co-payment". The maximum subsidy amount CSB can reimburse is determined by the California Department of Education (CDE) reimbursement ceiling guidelines. It will be the provider's responsibility to collect payment from the participant. If applicable, the provider will declare on the monthly attendance sheet that co-payments have been paid for the month of services rendered.

***Example:*** Participant's approved certified need for child care is 25 hours per week for their two (2) year old. Participant's child care provider who is a Licensed Family Day Care Home charges \$210 per week for Part-Time Care (less than 30 hours per week). Based on participant's certified need, CSB will only be able to reimburse the maximum subsidy amount of \$205.50 per week for Part-Time care. Therefore, participant will be responsible to pay their provider the difference of what CSB cannot cover which is \$4.50 per week.

Please Note: Family Fees and Co-payments are two different shares of costs. If participant has a Family Fee and a Co-Payment, participant will be responsible in reimbursing both the Family Fee and Co- Payment directly to their provider. Failure to reimburse any shares of cost mentioned above to the child care provider may result in termination.

## F. Maintaining Enrollment

### 1. Recertification

After initial approval, participants are required to recertify their child care services for not less than twenty-four (24) months.

CSB Staff will mail a *Recertification Packet* to be completed within a specified amount of time. Participants are responsible to ensure that all requested documents are submitted before the due date. If participant submits an incomplete recertification packet by the due date requested, their child care services may be denied. CSB staff will attempt to request the missing documentation before the participant's certification end date.

If a recertification packet is not submitted within the timeframe given, a Notice of Action will be issued to the participant terminating their child care services at the end of their contract period. If a recertification packet is submitted after the termination Notice of Action has been mailed out to the participant, the packet may be viewed as a reapplication of child care services. Application will be forwarded to the intake specialist to be reviewed and determine approval or denial of care. There may be a lapse in services if application packet is not completed before the participant's certification end date.

Recertification Packet may be completed electronically by the participant by the due date indicated by CSB staff. Digital signature by the participant is accepted, however, participant must comply with CSB's policies.

## 2. Reporting Changes

The participant may voluntarily report changes to their family size, income, if participant has been discontinued from cash aid, need for services, address, contact phone numbers, or any other information with regards to their need and eligibility. Examples of change in need for services may include but are not limited to: a change in employment, a change of hours in employment, starting or ending a training, loss of employment, child's school schedule change, leave of absence from employment due to incapacitation, etc. To better accommodate a participant's child care needs, participants are encouraged to report any significant changes to the Child Care Assistant Manager. Participant must call their Child Care Assistant Manager to report the change.

Upon notifying the Child Care Assistant Manager, the Child Care Assistant Manager will

Use information as applicable to reduce the family fee, increase the family's services, or extend the period of eligibility.

Request the documentation in writing to be submitted by the participant within ten (10) calendar days from the date letter was mailed. It is the participant's responsibility to submit the requested documents within the due date. Otherwise, reported change may not be updated accordingly.

Not later than ten (10) business days after receipt of applicable documentation, issue a Notice of Action. The Child Care Assistant Manager will not use any information received to make any other changes to the child care agreement unless it is an increase.

A family may at any time voluntarily request a reduction to their service level. Before a contractor may make any reductions to the service level, a parent shall:

Submit a written request that includes:



- Days and hours per day requested;
- Effective date of proposed reduction of service level; and
- Acknowledge in writing that they understand that they may retain their current service level.

Upon receipt of the parent's written request, the Child Care Assistant Manager shall:

Notify the family in writing of the parent's right to continue to bring their child pursuant to the original certified service level

Collect documentation to support the changes requested, and

Not later than ten (10) business days after receipt of applicable documentation, issue a Notice of Action.

The Child Care Assistant Manager will not use any information received to make any other changes to the child care agreement unless it is an increase.

When a participant is initially certified or recertified on the basis of income eligibility, the participant shall, within thirty (30) calendar days, report changes to ongoing income that causes their adjusted monthly income, adjusted for family size to exceed ongoing income eligibility. The Child Care Assistant Manager will:

At initial certification and recertification, notify the participant in writing of the following:

Of the adjusted monthly income amount, based on the family size, that would render the family ineligible for services, based on ongoing income eligibility requirements

Of the requirement to notify the Child Care Assistant Manager, within thirty (30) calendar days, of any change in ongoing income that causes the family's adjusted monthly income to exceed eighty-five (85%) percent of the State Medium Income.

### **3. Fee Payment/Repayment Plans**

If the family does not meet another basis for eligibility, the Child Care Assistant Manager shall issue a Notice of Action to dis-enroll the family.

All family fees are to be collected by the child care provider. Due dates for these fees will at the beginning of each month, and payment will be acknowledged on the monthly attendance sheets. Fees are delinquent seven (7) calendar days from the due date. It is the provider's responsibility to collect all fees from the participant and notify the Child Care Assistant Manager if fees have not been paid. Upon receipt of notification that the participant has outstanding fees due to the provider, the Child Care Assistant Manager will issue a Notice of Action terminating child care services for Delinquent Family Fees. Participant will have nineteen (19) calendar days to pay the debt owed to the provider, or submit a written reasonable repayment plan signed off by both the participant and provider. If repayment plan is submitted within the nineteen (19) calendar days of the termination notice, child care services will be rescinded. The participant must comply with the repayment plan in order for child care to continue. However, if the provider notifies the Child Care Assistant Manager that the participant is failing to comply with the repayment plan, the family will be disenrolled from the program.

### **4. Alternative Payment Program Policies and Procedures**

By abiding to the policies and procedures outlined in the Participation Handbook, participant may retain their child care services as long as they are eligible to participate. Any violation of the program regulations may result in termination from the program.

## Part II. Alternative Payment Program Parent Policies and Procedures

### A. Reimbursement Policy

#### 1. General Description

Participants are responsible for the accurate completion of the CSB attendance sheets (CCARE5). Attendance Sheets are provider's form of reimbursement. CSB can only reimburse for childcare services, not private school tuition, educational fees, transportation, diapers, clothing items, or other expenses that are not part of the basic child care cost.

Below are criteria for accurate and reimbursable attendance sheets:

- Only original hard copy or electronic attendance sheets will be accepted (one attendance sheet per child and provider). Participant may request additional attendance sheets by calling the main office, emailing the unit or calling their Child Care Assistant Manager.
- Photocopies of an attendance sheets and faxed copies will not be accepted without prior approval from Comprehensive Services Manager.
- The full name of the child receiving services must be provided on the attendance sheets.
- The month/year must be reflected on the attendance sheet
- The specific dates services were provided must be entered on the attendance sheets.
- Attendance sheets must be filled out DAILY. This means each day the participant (or authorized adult) must record the ACTUAL TIME IN when dropping off the child, and again record the ACTUAL TIME OUT when picking up the child. Participant shall not round off the time; the actual time of pick up must be recorded. For school age child(ren) only or split schedule: The provider/authorized representative must sign school age children in and out from school on the attendance sheet using the exact drop off/pick up times.
- The participant must state the reason of child's absence from care (*see absence policy for further information*).
- Signatures and/or date of signatures of both the provider and the participant at the end of each month, attesting under penalty of perjury, that the information provided on the attendance sheet is accurate.
- Should participant make a mistake on the attendance sheet, they should simply cross out the error, initial it and write in the correct information. Correction tape shall not be used or information shall not be transferred to a new attendance sheet. The original attendance sheet must be submitted for reimbursement.

Complete and accurate attendance sheets are due by 5pm on the fifth (5<sup>th</sup>) day of each month following the month in which services were rendered. If the fifth (5<sup>th</sup>) day falls on a weekend, or holiday, attendance sheets will be due by 5pm on the next business day following the fifth (5<sup>th</sup>). Payments for correct and accurate attendance sheets received by the fifth (5<sup>th</sup>) of the month will be processed no later than the last day of the month. Any attendance sheet submitted after 5pm on the

fifth (5<sup>th</sup>) day of the month may be processed no later than the last day of the following month. For example, an attendance sheet submitted on August 7<sup>th</sup> may not be processed and mailed until September 30<sup>th</sup>.

## **2. Incomplete Attendance Sheet(s)**

If an attendance sheet is incomplete or have missing documentation required for a reimbursement to be processed, a Provider Reimbursement Notice (PRN) will be issued to the participant and a copy to provider indicating that the reimbursement was not made because of the following reason:

- Missing Signature and/or date of signature from either the participant or the provider at the end of each month, attesting under penalty of perjury, that the information provided on the attendance sheet is accurate
- The full name of the child receiving services must be provided on the attendance sheets (if it occurs more than once, participant or provider must come into the office for completion)
- The month/year is not reflected on the attendance sheet (if it occurs more than once, participant or provider must come into the office for completion)

Important: If an attendance sheet is received on or before the fifth (5<sup>th</sup>) of the month, but is missing one or more of the items listed above, and depending upon the date of completion, the attendance sheet will be considered late and may be processed the following month.

## **3. Invalid Attendance Sheet(s)**

The California Department of Education (CDE) code of regulations 10865(b)(1) requires that attendance sheets be filled out properly by the participant or other adult authorized by the participant. CDE has directed all child care contractors to develop a policy to ensure that attendance sheets are completed on a daily basis using actual times. This policy will be strictly enforced when attendance sheets are submitted that appears to have not been filled out on a daily basis with ACTUAL TIME IN and ACTUAL TIME OUT.

In an effort to support participants and providers and to comply with all regulations, the following three step policy shall be implemented when suspect attendance sheets are received:

Step 1: Participant will be contacted by the Child Care Assistant Manager to verbally warn them the problem with the attendance sheet and explain how to complete the form correctly. Participants will be advised the next time this occurs, they will receive an advisory letter.

Step 2: An Advisory Letter will be sent to the participant, and copied to the provider, that explains the exact problem with the attendance sheet and includes information on how to complete the form correctly. Participants will be advised the next time this occurs they will be asked to come in to the office to review attendance sheet procedures with their Child Care Assistant Manager.

Step 3: An appointment will be set up between the participant and Child Care Assistant Manager to review attendance sheet policies. The participant will be advised should the problem occur a fourth time, they will be disenrolled from the program for failure to comply with program policies. At this time the provider will be mailed a letter indicating the participant has been to our office or via telephone to review policies

and has been warned of possible termination.

Step 4: Participant will be disenrolled from the child care program. Participant and provider will receive appropriate documentation regarding termination.

At the beginning of each fiscal year (July 1<sup>st</sup>), any steps participant previously had will reset. Participant will start at Step 1.

#### **4. Definition of Broadly Consistent**

In an effort to ensure the full use of the certified child care, participant's hours of care on the attendance sheet must be broadly consistent with the child care agreement. Broadly consistent is defined as participant's utilization for child care being between eighty (80%) to one hundred twenty (120%) percent from the certified child care agreement.

*Example: If the certified need for the month of February is a maximum of 180 hours per month, utilization for child care must be no less than 144 and no greater than 216 hours for February in order for CSB to reimburse without contacting participant.*

- When the participant's utilization of the certified child care agreement falls below the 80% or over 120% threshold, the following shall occur:
  - The participant will be called to discuss the low or high use of child care based on the monthly attendance sheet submitted. The Child Care Assistant Manager will inform participant of their right to continue using child care based on their approved certified hours regardless of a change in participant's need or if services may need to be increased.
  - For participants with a variable schedule and/or unpredictable schedule, reimbursement will be based on the actual days and hours for which services were provided, but no more than the maximum certified need for services.

Please Note: Absences due to illness or emergency will be considered prior to Child Care Assistant Manager contacting the participant. On a case by case, Child Care Assistant Manager may contact the participant if child has excessive absences on a monthly basis.

#### **5. Reduction in Reimbursement**

It is the intent of CSB to reimburse child care providers for the care provided. However, there are limitations in which CSB cannot reimburse child care providers. The following are possible examples that reimbursement will be reduced by CSB:

- Participant started child care services prior to approval from the Child Care Assistant Manager
- Provider was NOT available to provide child care (includes when the provider is sick, days not listed on the Provider Self Declaration, etc.)
- Any child care used by the participant when the hours and/or days of child care fall outside of the

### Child Care Agreement

The provider must notify CSB if a participant withdraws from care without advance notice, has been absent for five (5) or more days without knowledge.

The provider may charge the participant and obtain payment directly from the participant for these absences. It is the participant's responsibility to pay any charges for unauthorized care to the provider.

A Provider Reimbursement Notice (PRN) will be issued to the participant and a copy to provider regarding a reduction for the above reasons.

### 6. Denial of Reimbursement

Attendance sheets may not be reimbursed and may be denied by CSB for any, but not limited to, the following reasons:

- They are received sixty (60) days after the month of which services were rendered (*i.e. an April attendance sheet received in July will not be reimbursed*).
- If after sixty (60) days after the month of which services were rendered, parent or provider fails to complete the full name of the child receiving services on the attendance sheet.
- If after sixty (60) days after the month of which services were rendered, parent or provider fails to complete the month/year on the attendance sheet.
- If after sixty (60) days after the month of which services were rendered, parent and/or provider fails to sign or date under penalty of perjury, that the information provided on the attendance sheet is accurate.
- Provider was not approved at the time child care services were provided, no exceptions.
- Participant or child were not approved at the time child care services were provided, no exceptions.

A Provider Reimbursement Notice (PRN) will be issued to the participant and a copy to provider regarding a non-reimbursement for the above reasons. Exceptions may apply to some of the above reasons, however, must be approved by a supervisor prior to reimbursement.

### B. Temporary Suspension of Services

A family may request a leave of absence from the program if the family temporarily does not have a need for subsidized child care. They may contact their Child Care Assistant Manager to request the leave over the phone or submit a written request for a temporary leave from services. CSB may grant the family a limited term service leave for no more than twelve (12) consecutive weeks per fiscal year, except when the participant is on a maternity or medical related leave of absence from his/her employment or vocational training.

Maternity leave, or medical limited term service leave, shall not exceed sixteen (16) consecutive weeks in duration. During this time no child care services shall be provided nor be claimed for reimbursement. Participants may be required to provide documentation from their physician prior to going on leave and

again when released.

At the time of authorized reinstatement, when the service leave ends, CSB cannot pay another registration or other new provider charges.

Please Note: It is important to remember that providers do not have to hold child care spaces throughout the leave and participants may need to seek a new child care provider(s) upon their return from leave.

### C. Confidentiality

The use or disclosure of information about the child and his/her family is limited to purposes directly connected with administering the program. When helping participants/families move to another subsidized program, information about the participant/family may be exchanged and the other program or provider is then bound by these same confidentiality guidelines. Participant or their authorized representatives may review the case file upon request and at the time and place considered reasonable by CSB. Participant may only review the forms or other documentation/information that they have provided CSB and are in their own case file.

When a Contra Costa County employee or a client to whom an employee has a relationship with as defined above is applying or receiving child care services, the case will be considered Confidential. Employees will not process any action involving their own case, or the cases of family members or those with whom they have a relationship like a family member or close friend. Employees who are not sure if there is a conflict of interest should check in advance through their supervisor to ensure that this policy is not violated. Files considered confidential will be locked in a designated location of which only the authorized employees and supervisors will have access.

### D. Release of Information

CSB is authorized to discuss information regarding the family's child care services and eligibility with other agencies as appropriate. Examples may include but not limited to other Social Services Programs, CFS, employers, schools, child care providers, licensed physicians. Prior written consent from the participant may be asked by CSB. The participant's eligibility may be reviewed by representatives of the State of California, the Federal Government, independent auditors, or others as necessary for the administration of the program.

### E. Fraud Policy

Fraud is the knowing misrepresentation of facts made with the intent to obtain something to which one is not entitled. Fraud exists when an individual:

- Makes a false statement or representation to obtain benefits, or continuation of benefits that they are not eligible to receive
- Fails to disclose information, which if disclosed would result in denial, reduction, discontinuance of child care benefits
- Accepts benefits knowing she/he is not entitled to them

The California Department of Education (CDE) requires that CSB create a Fraud Policy, which applies to program participants and providers receiving reimbursements through CSB. If fraud is suspected, CSB will initiate investigation, pursue collection of payments and may seek legal assistance made through fraudulent participant and/or provider action.

Any participant or provider whose participation is disenrolled under the Fraud Policy will not be eligible to participate in the CSB CalWORKs Stage 2 & CAPP Child Care Program for a minimum of twelve (12) months. Any past debts or expenses must be paid in full prior to return.

#### **F. Grievance Policy**

It is the policy of CSB to resolve any participant or provider grievances. What is a grievance? A grievance is a complaint over a situation or an action to be deemed wrong or unfair. There will be no retaliation, formal or informal, against the participant and/or provider who file a grievance. All participants and/or providers are encouraged to first speak with the Child Care Assistant Managers to attempt to resolve any issues that may arise. If the issue is not resolved to the participant and/or provider's satisfaction, the participant and/or provider may file a written request within ten (10) calendar days from the date of complaint. The written request should be submitted to the Program Supervisor.

Upon receiving participant and/or provider's written request, the Program Supervisor will review the complaint and meet with the participant and/or provider by phone, or by appointment, to discuss the issue within ten (10) calendar days of receiving the complaint. If the participant and/or provider still feels dissatisfied, they may submit a written request for the issue to be elevated to a staff at least one level higher than the Program Supervisor who made the contested decision. The participant and/or provider will be contacted within ten (10) calendar days of receiving the complaint and given an opportunity to present their concerns. The decision at this level will be final.

#### **G. Uniform Complaint Policy**

It is the intent of the Community Services Bureau to fully comply with all applicable state and federal laws and regulations.

Individuals, agencies, organizations, students and interested third parties have the right to file a complaint regarding Community Services alleged violations of federal and/or state laws. This includes allegations of unlawful discrimination (ED Code Sections 200 and 220 and Government Code Section 11135) in any program or activity funded directly by the State or receiving federal or state financial assistance. Complaints must be signed and filed in writing with:

The California State Department of Education Early Education  
and Support Division Complaint Coordinator  
1430 N Street, Suite 3410  
Sacramento, CA, 95814

If the complaint is not satisfied with the final written decision of the California Department of Education, remedies may be available in federal or state court. The complainant should seek the advice of an attorney of his/her choosing in this event.

A complainant filing a written complaint alleging violations of prohibited discrimination may also pursue civil law remedies, including, but not limited to, injunctions, restraining order, or other remedies or orders.

## H. Sexual Harassment

It is the policy of Contra Costa County to maintain a work, service and program environment free of discrimination, harassment, or intimidation based on sex, gender, age, race, religion, national origin, ancestry, marital status, sexual orientation, disability or medical condition. These policies are also mandated by state and federal law. It is the policy of the Community Services Bureau to comply with all applicable state and federal statutes and regulations prohibiting discrimination in employment, contracting, buildings, facilities, and provision of services. Reports of violations of these policies will be promptly investigated and appropriate disciplinary action taken if warranted.

## I. Zero Tolerance

CSB prohibits inappropriate behavior towards staff, or in the presence of families, children or providers on the program. Such use of abusive/foul language, intimidating actions (including belligerent emails and voicemails), physical harassment, destruction of property, threats to staff, etc., will be documented and may lead to termination from the program.

## J. Disenrollment Policies

Child Care services may be disenrolled for any, but not limited to, the following reasons:

- Failure to maintain required ongoing need and/or eligibility at recertification
- Failure to recertify in a timely manner
- Failure to pay family fee or co-payment
- Failure to make payments to licensed exempt in-home providers in a timely manner
- Failure to use services for sixty (60) consecutive days, or two (2) consecutive months
- Violation of the Zero Tolerance policy towards staff
- Failure to comply with the State mandates requirements of the program
- Families income exceeds the state income ceiling
- Children are no longer age appropriate for the program with which they are enrolled, and family cannot provide required documentation to maintain services past that age (i.e. IEP)
- Failure to maintain a 2.0 GPA if services are based on a vocational training need
- Failure to abide by attendance polices and reimbursement guidelines
- Contract funding has been exhausted

## K. Notice of Action and Appeal Process

Whenever CSB approves, denies, terminates or updates a change regarding participant's child care, CSB will issue the participant a Notice of Action and send an informational copy to the provider(s). The Notice of Action will notify the participant of the following:

- Tell participant what action is being taken (approval, denial, recertification, change or



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termination)

- The reason for the action
- The effective date of the action
- The date participant has to appeal CSB's action

If a participant disagrees with an action taken by CSB, the participant may file an appeal request for a hearing with Employment and Human Services Department Appeals Unit. To request a hearing, participant must complete the back page of the Notice of Action no later than the appeal's date on the first page of the notice and mail or deliver the notice to the following address:

*Office of Appeals Coordinator  
400 Ellinwood Way  
Pleasant Hill, CA 94523  
(925) 677-2900*

At the local hearing, the Appeals Officer will explain the reason for the hearing and will ask both CSB representative and participant to swear under oath. The hearing will be recorded by the Appeals Officer. CSB will state the reason for the Notice of Action and provide any supporting documentation that supports their action. The participant or authorized representative will be able to explain the reason why they think the action on the Notice of Action is wrong. The participant may bring any documentation that supports their reason why the action was wrong.

The Appeals Officer will make a decision based on the information provided at the hearing. Within ten (10) calendar days after the local hearing, the Appeals Officer will mail their written decision.

If the participant disagrees with the written decision of the local hearing, the participant may request a review of the local decision by the California Department of Education. The request must include the following information:

- A copy of both sides of the original Notice of Action with which participant disagrees
- A copy of the written decision letter from the local hearing; and
- A statement explaining why participant disagrees with the local Appeals Officer's decision.

Participant may mail, fax or deliver their request within fourteen (14) calendar days from the date of local agency's decision letter to the following address:

California Department of Education Early Education and Support  
Division ATTN: Appeals Coordinator  
1430 N Street, Suite 3410  
Sacramento, CA 95814  
Phone: (916) 322-6233  
Fax: (916) 323-6853

CDE will review the information provided and may contact the participant or CSB if necessary. CDE will have thirty (30) calendar days to make a decision and mail a final decision letter to the participant and CSB. CDE's decision is the final administrative decision and CSB will follow CDE's decision.

## Part III. Provider Participation

### A. General Requirements - Parental Choice

CSB policies provide for parental choice in selecting a child care provider. Participants are responsible for selecting the child care provider and the type of care, which they feel best, meets the needs of the family and meets enrollment requirements. However, CSB may reserve the right to deny or terminate a provider for the health and safety of the child/ren. Participants also have the right to change providers (up to two [2] changes per fiscal year) while they are participating in the child care program (unless the participant can provide reasonable concerns for more changes). Participants may choose the following types of care while enrolled in one of our programs:

#### 1. Licensed Child Care Centers, Licensed Exempt Centers & Licensed Family Child Care Homes

Child care centers and family child care homes are all licensed by the California Department of Social Services Community Care Licensing division, which ensures all standards of health and safety criteria are being met. These programs will be required to submit and comply with the following:

- A complete Child Care Provider & Parent Statement by both the participant and provider
- A complete Agreement For Direct Payments To Child Care Providers by both the participant and provider
- A complete Provider Self Declaration listing a maximum of ten (10) non-operational days charged to families
- A copy of their current license
- A copy of their current policies, rules and rates
- A complete W-9 Form (request for Taxpayer Identification Number and Certification)
- Provide services to all eligible children on a non-discriminatory basis, giving equal treatment and access to services without regard to race, color, creed, religion, sex, national origin, or any other category that is prohibited by law
- Providers must report observed and/or suspected child abuse to the local police departments and/or Children and Family Services and refrain from all forms of punishment, cruelty, and/or physical/corporal punishment
- Providers must maintain confidential child and family records and other information with the exception of authorized disclosures to CSB staff or other authorized State or Federal agency staff in accordance with the law
- Allow CSB to visit licensed facilities if requested
- Provide care for children only during the period authorized
- Enter into Child Care Provider Agreement with CSB as an independent contractor and in no way be considered an employee of CSB or any of its funding sources
- Hold CSB harmless for any damages to person(s), or property, which arise out of the delivery of services under agreement with CSB

- A statement signed by the provider that the child care and development services being provided do not include religious instruction or worship. An exception may be for those participants enrolled in the Alternative Payment Program (CAPP).
- Sign the CalWORKs Stage 2 & CAPP Child Care Participation Program Handbook Acknowledgement of Receipt understanding and following CSB's policies

## 2. Licensed-Exempt Providers

Licensed-exempt providers are not licensed by the State of California. Participants are responsible for hiring, terminating services, and setting up the days and hours when care will be used. Licensed-exempt child care providers must be on the Trustline Registry or be exempt from Trustline in order to participate as an approved child care provider. The following are types of License-Exempt Providers:

- License Exempt Providers Exempt from Trustline  
Who is exempt from Trustline? Providers who are the child/ren's grandparent, aunt or uncle by blood, marriage or court decree are exempt from the Trustline registration. Participant and provider must complete the Trustline Exemption Form as well as provide proof of relationship between the child and the provider.

*Example: If the chosen provider is the child's grandparent, the participant may submit their birth certificate to demonstrate that provider is their parent and therefore the child/ren's grandparent.*

If no documentation can be provided, the grandparent, aunt or uncle must complete the Trustline Registration Process and be cleared and placed on the Trustline Registry before services can be approved by the Child Care Assistant Manager.

- License Exempt Providers not exempt from Trustline  
License exempt providers not exempt from Trustline, must go through the Trustline Registration Process to get fingerprinted through the Department of Justice (DOJ) and the Federal Bureau of Investigation (FBI). The provider must be cleared and placed on the Trustline Registry prior to child care services being approved. Participants must contact their Child Care Assistant Manager to request a Trustline Application.
- Provisional License Exempt Providers (not exempt from Trustline)  
In cases where the participant has an immediate need for child care services, the participant is allowed to select a provisional child care provider. However, the Provisional child care provider must go through the Trustline Application Process to get fingerprinted through the Department of Justice (DOJ) and the Federal Bureau of Investigation (FBI). The provider MUST be cleared and placed on the Trustline Registry within thirty (30) days in order to be eligible for reimbursement. If the provider is not cleared within the thirty (30) days, no reimbursement can be given for any child care services provided. Services will be approved on the day provider was cleared and placed on the Trustline Registry.

Participants must also submit the following documentation regarding their chosen license exempt provider:

- A complete Child Care Provider & Parent Statement by both the participant and provider (indicating the hours and rate of pay for child care)
- A complete Agreement For Direct Payments To Child Care Providers by both the participant and provider
- Health and Safety Self-Certification Form indicating the following:
  - The provider's name, date of birth, address, phone number and social security number
  - A description of the provider's qualifications and experience
  - A health statement, including Tuberculosis clearance
  - A statement from the parent that he/she has interviewed and approve of the provider
  - Names and ages of all other adults residing in the home where the child care is provided
  - All forms signed by both the parent and provider, as appropriate
  - The location where the care is to be provided
- Health & Safety Facility Checklist (a supplement to the Health & Safety Self Certification form)
- A complete W-9 Form (request for Taxpayer Identification Number and Certification)
- A copy of provider's California driver's license or a valid California ID verifying the provider to be at least eighteen (18) years of age
- A copy of provider's Social Security Card
- Provide care for one (1) family at a time and only during the period authorized
- Enter into Child Care Provider Agreement with CSB as an independent contractor and in no way be considered an employee of CSB or any of its funding sources
- Hold CSB harmless for any damages to person(s), or property, which arise out of the delivery of services under agreement with CSB
- Sign the CalWORKs Stage 2 & CAPP Child Care Participation Program Handbook Acknowledgement of Receipt understanding and following CSB's policies
- In-Home Child Care Provider (*for In Home Licensed Exempt Providers only*)

License-exempt providers must only provide care for only ONE family at one time other than their own. If it is found that a license-exempt provider is providing care for two (2) or more families at one time, they may be terminated as a provider and the families will need to find an alternate provider.

In Home Licensed Exempt Providers – Since child care providers are independent contractors and therefore not employees of CSB, CSB is not held responsible for federal and state tax obligations. If it is determined that the child care provider performs child care in the home where the child resides, the participant may be considered to be the employer of the child care provider (domestic worker) and will be responsible to ensure

the child care provider receives minimum wage, social security taxes, state worker's compensation and unemployment requirements. In order to ensure that minimum wage is being met, the participant must have at a combination of at least three to four (3-4) children depending on child's age, receiving child care services. In-home licensed exempt child care may be subject to Federal and California laws pertaining to household employees.

Please Note: Families transferring directly from CalWORKs Stage 1 to CalWORKs Stage 2 that have an In Home Licensed Exempt Provider will be given a timeframe to find alternate child care.

1099 Hotline - Contact (877) 375-0312, during tax season if 1099 is not received.

## B. Oliver's Law

Participants have the right to receive information regarding any substantiated or inconclusive complaint about any licensed child care provider. That information is public and can be acquired by calling Contra Costa County's local licensing office at (510) 622-2602.

## C. Rate Sheets

Licensed Providers shall submit a statement of their current rates to CSB. Rates must be the same for both subsidized and private paying families. If the provider charges more than the current Regional Market Rate allows CSB to pay, the participant will be responsible to pay the difference directly to the provider. If a provider offers any discount for siblings, the subsidized family will offered the same discount.

Providers must submit a written thirty (30) calendar day advanced notice addressed to the Program Supervisor of any changes to their rates; all rate increases are subject to availability of funds. New rate increases will take in effect thirty (30) calendar days after receipt of notice. CSB will only accept one (1) rate change from providers per fiscal year (July 1<sup>st</sup> – June 30<sup>th</sup>).

## D. Child Care Agreement

Upon approval or update of child care services, the Child Care Assistant Manager will issue a Notice of Action indicating initial approval for services or change in services and will be accompanied by a *Child Care Agreement* that will outline the schedule approved for services as well as indicate if the child has a Family Fee and/or Co-payment. It is the participant's responsibility to review the approved child care agreement and notify the Child Care Assistant Manager of any questions.

Important: If provider starts providing services before the agreement has been approved, the participant will be responsible to reimburse for any services rendered before the certificate start date on the *Child Care Agreement*.

## E. References to Written Information

All providers are subject to the general policies described in the CalWORKs Stage 2 & CAPP Child Care Participation Program Handbook. Providers are encouraged to become familiar with the parental

requirements, as well as those identified for child care providers.

## F. Limitations on Child Care Reimbursement

### 1. Regional Market Rate (RMR)

Beginning January 1<sup>st</sup>, 2018, California Department of Education required all agencies to implement ceilings at the 75<sup>th</sup> percentile of the 2016 Regional Market Rate Survey. Licensed exempt child care is reimbursed up to 70% of the Family Child Care Home rates. This is referred to as the Regional Market Rate (RMR). *This rate is subject to change, if directed from the California Department of Education (CDE).*

Children attending less than thirty (30) hours of child care per week will be reimbursed at the part-time benefit ceiling and children attending thirty (30) hours or more will be reimbursed at the full time benefit ceiling. Those families that have variable schedules will be assessed by the Child Care Assistant Manager and assigned the most appropriate ceiling for their needs.

Should the participant choose a provider with a rate exceeding that exceeds the maximum subsidy amount, the participant will be responsible in paying the difference. This is referred to as a co-payment. This is paid by the participant to the provider directly and not accounted for by CSB (see example on Share of Cost-Co-Payments).

If the provider has a registration fee (*licensed providers only*) the rate for reimbursement will be determined by State guidelines and may be paid no more than once a fiscal year if the provider meets eligibility requirements.

### 2. Provider Days of Non-Operation

CSB will only reimburse for up to ten (10) days of non-operation (per fiscal year) to a licensed provider when the center, or family child care home, is closed if they fall on a contracted day. The provider **MUST** list the days of non-operation on the *Provider Self Declaration* form to be eligible to receive payment. If more than ten (10) days are listed, Child Care Assistant Managers will review the non-operational days with provider to determine which of the ten (10) would be reimbursed. Days of non-operation may include, but are not limited to the following:

- Holiday (i.e. New Year's Day, Christmas, Labor Day)
- Provider Vacation Days
- Staff Training/Development Days

This does not apply to child care in which the provider charges an hourly rate or has a drop-in rate.

### 3. Instructional Minutes for School Age Children

Providers will **NOT** be reimbursed for child care provided for a school age child/ren care during instructional minutes, whether they are attending public or private schools.

#### 4. Reduction or Denial of Reimbursement

See Reimbursement Policy.

#### G. Multiple/Alternate Providers

CSB can only reimburse one provider per child for child care services. However, there are some exceptions:

1. If a family's need exceeds the hours of operation of the first provider, the participant may add an alternate provider to cover the hours the primary provider is closed. Child Care Assistant Manager must approve the alternate child care provider prior to the use of care. CSB will contract separately with the alternate provider for child care services. If participant begins the use of alternate provider before approval from Child Care Assistant Manager, participant must reimburse alternate provider for any unauthorized care.
2. If a child's usual child care provider is closed, or if the child is sick and cannot attend the usual care, the participant may request to seek an alternate child care provider. Child Care Assistant Manager must approve the alternate child care provider prior to the use of care. CSB will contract separately with the alternate provider for child care services. Upon approval of the alternate provider, reimbursement for alternate provider when primary provider is closed is limited to 10 days per fiscal year. Reimbursement for alternate provider when child is sick and cannot attend primary provider is also limited up to 10 days per fiscal year. CSB may make an exception based on the illness and if participant provides written documentation from physician.

#### H. Participant's Rights to Change Providers & Rights to Terminate Services

Participants have the right to change their providers, up to two (2) per fiscal year, unless they can provide the Child Care Assistant Manager with reasonable concerns for more changes. CSB asks all participant to provide a written (preferable), or verbal, two (2) week notice to their licensed provider regarding the termination of care. The Child Care Assistant Manager will follow up with any notifications necessary.

Should the participant not give a two (2) week notice to the licensed provider, CSB will work with the licensed provider and offer any reimbursement as required by the licensed provider's established policies and procedures submitted with the initial approval of care (not to exceed two [2] weeks). Participants may be disenrolled from the program due to abandonment of care.

**IMPORTANT:** The attendance sheet must meet the minimum requirements in order to honor the two week notice when the participant does not give a two week notice to their child care provider. See *Reimbursement Policy*.

#### I. Provider's Rights to Terminate Services

A licensed provider may terminate services with cause in adherence to his/her established policies and procedures and with a two (2) week advance notification to the participant and the Child Care Assistant Manager. Should a licensed provider terminate a family without notification, CSB will not reimburse any days past the child's last day of care.

#### J. CSB's Rights to Terminate a Provider

CSB reserves the right to terminate a provider from participation with or without a two weeks' notice. Reasons for termination may include but are not limited to the following:

- Child/ren's health and safety is at risk (*all providers*)
- Closure or denial of Trustline Registry (*licensed-exempt providers*)
- Child care license revoked (*licensed providers only*)
- Falsifying attendance sheets in any manner (*all providers*)
- Charging subsidized families more than non-subsidized families (*licensed providers only*)
- Providing care for more than one family other than their own at one time (*licensed-exempt providers*)
- Using abusive language and behavior to staff, children or participants (*all providers*)



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**Part IV Staff Roles and Responsibilities**

**A. Stage 2/CAPP Unit Clerks**

- Administrative Support to Unit Managers
  - Program Calendars
  - Form Revisions
  - Mass Mailings
  - Other clerical tasks as assigned by Assistant Managers
  - Complete Reports (such as 801 A Report)
- Reimbursement Calculations
  - Collect, review and distribute incoming CCAREs to appropriate staff
  - Perform initial reimbursement calculations for Assistant Managers
- Incoming Phone Calls
  - Check and empty Stage 2/CAPP Unit General Voicemail
  - Return all calls within 24 hours of retrieving the message
  - Answer and forward calls to appropriate staff member
- Mail Process
  - Log all incoming mail in database
  - Forward mail to appropriate staff member
- Scanning Process/Document Record Keeping
  - Scan and Index all documents into Northwoods Compass database
- Stage 1 Transfers
  - Prepare and send Welcome Packets
  - Prepare Family Files
  - Coordinate with Unit Manager on case assignments
- Intake Applications
  - Prepare and mail intake packets
  - Collect and verify all documentation
  - Forward packet to appropriate Assistant Manager upon completion
- Family Recertification's

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- Prepare and mail recertification packets
- Collect and verify all documentation
- Forward packet to appropriate Assistant Manager upon completion
  
- Suite Support
  - Monitor office supplies
  - Monitor Postage Meter
  - Monitor office equipment

### B. Stage 2/CAPP Unit Child Care Assistant Managers (CCAM)

- Case Management
  - Initial intake for new/transferred families
  - Verify documents
  - Coordinate with referring agencies about prior case information
  - Review selection of provider(s)
  - Monitor families need and eligibility
  - Family/Provider Correspondence as needed
  - Recertify families need/eligibility for services at minimum once annually
  - Termination procedures where appropriate
  
- Process Reimbursements
  - Review calculations
  - Process payments into CalWIN system for fiscal review/release
  
- Attend Appeals hearing if needed
  
- Monitoring/Audits/Reviews
  - Quarterly monitoring of selected family files
  - Assist Unit Manager with fiscal and/or state audits and reviews of program
  - Prepare family files as needed for reviews

### C. Stage 2/CAPP Unit Manager – (CSM)

- Reports
  - Monthly Report to Program Director
  - Monthly liaison to fiscal
  - Fiscal Audits/State Reviews as scheduled
  
- Personnel
  - Supervise Student Worker Assignments

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- Supervise Field Intern Assignments
- Supervise Clerks
- Supervise Child Care Assistant Managers
  
- Program Handbook
  - Revisions per CDE regulations
  - Annual Update if applicable
  
- CDE Regulations
  - Monitor Management Bulletin Releases
  - Participate in CDE conference calls regarding program regulations as needed
  - Review Title 5 and Education Codes as they pertain to program implementation.
  
- Client/Provider Correspondence
- Stage 1 Transfer Process
  - Monitor incoming Stage 1 transfer process
  - Assign cases to CCAMs
  - Review potential cases to be transferred out to Child Care Council
  
- Monitoring
  - Review monthly reimbursements
  - Monitor CCAM Caseloads
  - Review terminations
  - Monitor Unit calendar
  
- Miscellaneous
  - Order office supplies for Suite
  - Approves requests for equipment/work orders

**D. Stage 2/CAPP Fiscal Support (Accountant III)**

- Review and release payments to providers in CalWIN in the absence of Program staff
- Monitor program budgets
- Release payments for Maintenance of Effort contracts
- Submit to State CDE/ELCD monthly Fiscal and Caseload reports
- Submit to CDE projection request for additional funding in excess of MRA
- Submit year-end financial reports and schedules to External Auditors
- Correspond with Unit Manager/Program Manager

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**E. Stage 2/CAPP Program Manager (ASA III)**

- Program Support for CDE/ELCD Programs
- State Correspondence/Management Bulletins
- Liaison with CDE/ELCD
- Quarterly Monitoring
- CDE/ELCD Contract initiation/renewal
- Reports/Program Self-Assessments to CDE/ELCD
- Supervise Unit Manager (CSM)
- Liaison with Stage 1/WFS, Child Care Council and CalWIN
- State Audit/APMU/Independent Audit
- Review MOE Payments
- Agency's CWDA Child Care Representative

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## SECTION 4-LOW-INCOME HOME ENERGY ASSISTANCE PROGRAM

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Policies and Procedures  
Section 4: Low-Income Home Energy Assistance Program

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## A. Introduction

### 1. Program Overview

The Low-Income Home Energy Assistance Program (LIHEAP) is a federally-funded program that assists low-income households with their utility bill. Eligibility is based on the household's total monthly income that is provided by Department of Community Services and Development on a yearly basis. This assistance is targeted to households with low income and high energy costs, taking into consideration households with elderly, disabled persons, and children under six. The amount of assistance is based on the number of household members, total gross household income, the cost of energy within Contra Costa County and funding availability.

In addition to helping with a household's utility bill, LIHEAP offers free weatherization. Weatherization is the process of making a household more air tight and energy efficient. Weatherizing a home can help lower a household's energy usage and utility costs.

### 2. Types of Assistance Available

#### i. Utility Assistance

HEAP: Pay the amount eligible of an applicant's utility bill.

Fast Track: LIHEAP funds are available in case of a crisis/emergency situation. Staff is required to resolve an energy crisis situation within forty-eight (48) hours and a life threatening energy situation within eighteen (18) hours.

#### ii. Weatherization Assistance

Weatherization: The weatherization program provides services designed to reduce heating and cooling costs to improve the energy efficiency of a home, while safeguarding the health and safety of the household. Weatherization is supported through the partnership with Department of Conservation and Development (DCD).

ECIP EHCS: LIHEAP funds are available to low-income families in case of a crisis/emergency situation. DCD staff is required to resolve an energy crisis situation within forty-eight (48) hours and a life threatening energy situation within eighteen (18) hours.

### 3. Service Center Locations

- i. LIHEAP Utility Assistance: 1470 Civic Ct. Suite 200, Concord, CA 94520, Phone: 925-681-6380, Fax: 925-229-6784
- ii. Weatherization Assistance: 30 Muir Rd, Martinez, CA 94553, Phone: 925-674-7214, Fax: 925-646-9339

## B. LIHEAP Eligibility Guidelines

### 1. General Guidelines

Applications are received via mail, email, fax, or drop-in. Applicants for all utility assistance and/or weatherization programs must meet the following for eligibility:

- Must be 18 years of age or older
- Be a resident of Contra Costa County
- Meet the definition of a household
- Housing unit must meet the definition of a dwelling
- Provide proof of citizenship or alien status
- Meet the income guidelines and provide proof of income from all sources for all members of the household.
- Be responsible for energy costs and provide copies of utility bills
- Receive energy/budget counseling
- Meet agency's priority plan
- Submit all applicable documentation to complete application process. Other eligibility requirements for Fast Track Assistance/ECIP EHCS/SWEATS must be submitted.

### 2. Household Composition

An eligible household is defined as an individual or group of individuals, related or unrelated, who share residential energy and have an energy cost.

Ineligible households for utility assistance consist of the following:

- Subsidized households that do not pay any out of pocket energy costs.
- Persons living in licensed facilities (nursing homes, assisted living, etc.).
- Temporary shelters or group homes with residents who have no energy expense or who pay a nominal fee to live there.
- Single room dwelling, within a larger dwelling and the single room dwelling is not considered a separate household.
- Persons who have no physical address.
- Individuals who previously received Utility Assistance (UA) in another LIHEAP household during the same program year are considered ineligible household members to receive services. However, his/her income is counted in the household's total income.
- Applicants under the age of 18 who are not legally emancipated and do not have a parent or legal guardian to apply on their behalf.

Ineligible households for weatherization consist of the following:

- Persons living in licensed facilities (nursing homes, assisted living, etc.).
- Persons who reside in only one room within a larger dwelling and is not considered a separate household.



- Persons who have no physical address.
- Applicants under the age of 18 who are not legally emancipated and do not have a parent or legal guardian to apply on their behalf.

The following exceptions on ineligible household members apply to both Utility Assistance and Weatherization:

- Live-in Attendants - Individuals who reside within a household to provide necessary medical services and whose services are paid for in part or in full by a third party.
- Persons living in multi-unit buildings - If a building contains more than one housing unit, but has only one meter or tank that is shared by all the units, each unit may contain a separate household if each one functions as a separate economic unit (also known as submetered).
- A person out of the home for reasons of employment, education, hospitalization, etc., who continues to support or be supported by the unit and who intends to return to the unit, will remain a member of the household.
- A dependent child who is a student living away from his/her primary residence to attend an educational facility is considered to be a member of the primary residence.

### **3. Housing Unit Must Meet the Definition of a Dwelling**

Housing unit must meet the definition of a dwelling in order to be eligible for assistance. Below are examples of a housing unit that are considered an eligible dwelling:

- A housing unit is a house, an apartment, a mobile home, a group of rooms, or a single room that is occupied (or if vacant is intended for occupancy) as separate living quarters.
- All dwellings must be a permanent building and located in Contra Costa County. Applicants can have a mailing address in another county/state, but the location where they receive utility services must be in Contra Costa County.
- Applicant must complete the Intake Form CSD 43

The following housing units are considered ineligible dwellings:

- Applicants renting a room in someone else’s home (Exception: applicant provides proof that his/her living arrangement adheres to the definition of “separate living quarters”)
- Applicants living in transitory, tent or temporary encampments
- Applicants living in board-and-care facilities, nursing or convalescent homes, or in jail or prison
- Applicants that are homeless

There are exceptions on dwelling eligibility and staff may need to review the list below to determine if a housing unit is eligible for assistance. Below is a list of the exceptions:

- Applicants living on boats, in a marina with a dock number and utility hook-up, are eligible for Utility Assistance.
- Applicants living in mobile homes or RVs are ineligible for energy and weatherization services unless they meet the following criteria:

- I. The dwelling must not be mobile (i.e., wheels have been removed, attached porch, etc.).
- II. The dwelling must have resided in the same location for a reasonable length of time.

#### 4. Citizenship and Alien Status

Applicant must be a permanent and legal United States resident and complete a Statement of Citizenship or Non-Citizen Status for Public Benefits Form (CSD 600). Federal law requires that all public agencies verify that an applicant is a United States (U.S.) citizen, national, or an alien in a qualified immigration status. A copy of the documentation to verify their qualified status must be retained in the applicant file. An individual is a U.S. citizen if:

- Born in the U.S. regardless of the citizenship of his/her parents
- Born outside of the U.S. to U.S. citizen parents
- Born outside of the U.S. of alien parents and has been naturalized as a U.S. citizen. A child born outside of the U.S. of alien parents automatically becomes a citizen after birth if his/her parents are naturalized before he/she becomes age 16
- U.S. territories that include: American Samoa, Guam, the Northern Mariana Islands, Puerto Rico and the Virgin Islands.

Applicants must submit acceptable verification of their citizenship and/or alien status. The following is a list of acceptable verification:

- U.S. birth certificate
- U.S. passport
- Naturalization certificate, N-550 or N-570. Certificate cannot be copied, but agency should review, verify and document in the file that the “naturalized certificate was “verified and valid”
- Report of birth abroad of a U.S. Citizen FS-240
- U.S. Citizen Identification Card, I-197
- Certificate of Citizenship, N-560 or N-561
- Statement provided by the U.S. consular officer certifying the individual is a U.S. citizen
- American Indian card with a classification code KIC
- Documentation of direct receipt of SSI or SSA benefits
- DD 214 – Military Separation – This document must show a U.S. place of birth.
- REAL ID Card

Applicants who are ineligible to participate in the utility assistance and/or weatherization programs with public agencies are:

- Individuals who hold an INS I-94 who are admitted as temporary entrants (such as students, visitors, tourists, diplomats, etc.).
- Aliens who have no other INS document.
- Individuals possessing an Individual Taxpayer Identification Number (ITIN). An ITIN does not create an inference regarding the person’s immigration status. An ITIN is issued by the U.S. Internal Revenue Service to individuals who are required to have a U.S. taxpayer identification number but who do not have, and are not eligible to obtain, a Social Security Number issued by the Social Security Administration.
- Individuals possessing an ID card issued by a foreign consulate

- California Driver's licenses and identification cards with “Federal Limits Apply” issued prior to January 22,2018.

## 5. Income Guidelines

Applicants must meet the income guidelines provided by Department of Community Services and Development each program year. Staff must obtain income documentation supporting the total gross monthly income earnings stated on the Energy Intake Form (CSD 43). Income documentation for all household members must be within 6 weeks of the application intake date, and must comply with the stated acceptable forms of income documentation referenced below.

Countable Income includes:

<b>Income Type</b>	<b>Definition</b>
Annuities, Pensions, Retirement	Includes Rail Road retirement
Assistance payments	Retirement Survivor Disability Insurance, Supplemental Security Insurance (SSI), General Assistance, Cal Works
Business income	Income from business, less business operational expenses
Capital gains or losses	For self-employment only
Cash gifts (regular basis)	Must provide regular support for an individual or for the family
Child support	Include child support for the household receiving it
Declaration of personal income	Irregular income resulting from occasional sources such as yard work, childcare, collecting cans/bottles, donating blood/plasma
Dividends, Interest & Royalties	If withdrawn
Foster care payments	Include foster care payments received for foster children or foster adults living alone.
Government Employee Pensions	
Insurance or annuity payments	Military family allotments, Military retirement
Jury duty pay	
Military pay	
Payment from government sponsored programs	Such as agricultural programs
Payment on behalf of the household	Must provide regular support for the family
Railroad Retirement	
Social Security Benefits	Net amount of the check, excluding the amount deducted for Medicare
Spousal support	
Strike benefits	
Training allowances	From Federal and State Employment programs, only the portion that pays or reimburses for living expenses
Tribal payments from casinos	Per capita payments
Trust disbursements	Regular
Unemployment insurance	
Veteran’s Benefits	

Wages, salaries, commissions, bonuses, profit sharing, tips, vacation pay, severance pay, sick leave, royalties and honoraria which result from the applicant's work or service	Count all gross income received for the period used to determine income eligibility
Worker's compensation	

Applicants claiming no income must reveal their source(s) of support. If there is zero income reported; Certification of Income And Expenses Form (CSD43B) must be completed by the applicant and included in the file. If applicant is reporting zero income for a consecutive year, a Certification of Income And Expenses form will need to be completed by the applicant PLUS include documentation of monthly expenses (a letter from the person/agency that supports the applicant's rental, food and/or utility expenses). An example of documentation can be a print out of applicant's food stamps, a letter from housing authority, a declaration from the person that supports the applicant's rental expenses. Staff must obtain written or verbal verification of regular support from others reported on the form. Eligibility will be based on documentation submitted with the form or verified during the follow-up.

For DOE only: All applicants applying for Department of Energy (DOE) services with zero income may complete a self-certification after all avenues of documenting income eligibility are exhausted. Evidence of the various attempts at proving eligibility must be contained in the applicant file, including a notarized statement signed by the applicant that they have no other proof of income. If 120 days pass and the applicant's income eligibility for DOE needs to be re-established, they will follow the same "Zero Income Notarization" rules that apply to an applicant entering through the DOE program. On an exceptional basis, if Weatherization staff cannot obtain a notarized self-certification statement, Weatherization will follow their policies and procedures for next steps.

## 6. Utility Bill

Applicants must be responsible for energy costs and provide copies of utility bills. Utility bill(s) must contain a billing period of at least 22 days and be current and within 6 weeks of the application intake date. Documentation such as a photo identification and the completion of Account Holder Authorization and Consent Form (CSD 081) is required if name on the account is different from the name on the Energy Intake Form (CSD 43). The person on the utility account must be at least 18 years of age or older. The utility bill must provide the amount of the household's current energy costs and the following:

- Service address - In rural areas, the service address can be descriptive (Example: 3rd house on the left, past the gas station, etc.)
- Account number
- Name of the utility company
- Customer's name
- The dollar amount of a full month's energy costs (at least 22 days), some exceptions may apply.
- Fast Track applications: The documentation must include the total amount due on the bill (current and past due and all other charges). Applicants must include in addition to current monthly utility bill, a past due, 15 day, 48 hour, or shut off notices.

The following are considered unacceptable utility bill verification:

- Closing bills
- Altered bills
- Service address on the utility bill does not match the applicant's service address
- Outdated utility bill
- Deposit accounts or accounts in collections
- Business / Commercial Accounts
- Bill Less than 22 days

When the applicant is attempting to establish service at a new address and changes from the old account are transferred to the new account, CSB will make an exception and accept utility bill. This will also apply when applicants are trying to re-establish services on a closed account (due to non-payment) at the same address, which has no current charges. The issue date of the bill is to be used to determine if it is current. Since the service period will not be current, the current energy charges for that utility will be set to zero on the application. When re-establishing service on a closed account, staff must correspond with the utility company to verify the applicant is re-establishing service. LIHEAP assistance can only be provided when the service is re-connected. LIHEAP cannot be used to pay for an outstanding balance on a closed account if a new account is not established.

To qualify for services when utilities are included in the rent, the applicant must submit documentation that must include the following:

- Date
- Tenant/Customer's Name
- Service Address
- The amount of rental charges covering energy expenses
- Landlord's signature
- Photocopied and faxed letters of utility cost verification

Staff must keep a dated copy with a wet signature on file for each multi-family dwelling. Letter must contain service address, date, and the location of the original signature.

This document may be photocopied for insertion into the applicant's file of other tenants in that building. A newly signed landlord letter must be obtained each program year.

Acceptable Documentation must be current to six weeks from intake date and may include one of the listed documents below:

- Original or faxed letter signed by landlord/manager
- Rental receipt that indicates utilities included in rent
- HUD statement showing zero utility allowance

## **7. Energy/Budget Counseling**

Applicants must complete Client Education Confirmation of Receipt Form (CSD 321) verifying of energy conservation education and/or budget counseling were provided by staff.

## **8. Priority Plan**

Applicants must meet CSB's priority plan (for Utility Assistance Only) or meet DCD's priority plan (for Weatherization, LIWP and DOE). CSB will make every attempt to assist the vulnerable population with the lowest income and highest energy cost.

Vulnerable population consists of:

- families in the household who have children 5 years or younger
- elderly members (60 years or older)
- have a permanent and/or temporary disability

Documentation of vulnerable population must be in applicant's file.

Please note: Staff is not required to obtain written documentation to verify disability for any disabled household members, however, it will be to the discretion of staff to request it from the applicant, should it be reasonable.

## **9. File Documentation**

All applications must have the following documents in their file:

- Energy Intake Form (CSD43)
- Statement of Citizenship or Non-Citizenship Status for Public Benefits (CSD 600)
- Provide a copy of a current monthly utility bill plus any past due notices if applicable
- Copies of the total gross monthly income for ALL household members 18 years and older
- If applicable, Certification of Income and Expenses (CSD 43B)
- Client Education Confirmation of Receipt (CSD321)
- If Applicable: Birth Certificates or documentation verifying any children ages 0-5 in the household and ID required for any household members 60 years or older.
- If Applicable: Account Holder Authorization and Consent Form (CSD 081)

## **10. Utility Bill Balances for Utility Assistance**

Applicants with a credit balance on their account that is more than double the monthly gas and electric charges must re-apply when the credit balance has been exhausted. A denial notice will be mailed to the applicant.

HEAP or Fast Track payment must bring applicants to zero balance. If payment doesn't bring the balance to zero, the applicant must first make a co-payment to their utility company before a pledge can be made. Proof of payment must be verified by our staff to the utility company prior to pledge being made. On a case by case basis for Fast Track, if the utility bill is higher than the eligible amount, but the eligible amount is sufficient to avoid services being shut off; the application will be processed. If there was an agreement made to avoid services in being shut off between the applicant and their utility company, staff must document the agreement in the applicant's file. All Fast Track applications will be pledged by staff to the utility company. A pledge is defined as a promise to pay from LIHEAP to utility company.

## **11. Incomplete Applications**

Once the application is received via fax, mail, walk-ins or email, an acknowledgement letter has to be sent within 15-days of the intake date. Review the application and if there are any missing items to complete the application process, identify the document(s) that are still missing. Staff will complete the following:

- i. Complete the Missing Documentation Letter. The letter indicates that our agency will give the applicant ten (10) working days to submit the requested missing documentation requested in order to process application. The form will have HEAP's fax number if they choose to fax it to our office. If applicant does not submit the requested documentation within the timeframe given, their application will be denied. Missing Documentation Letter will have:
  - Applicant's full name
  - Appropriate box(es) checked of the missing documents
- ii. Staff will print two (2) copies of the Missing Documentation Letter (one to be mailed to the applicant and the other to retain with the file).
- iii. Incomplete file will be placed in the file cabinet labeled Pending Files drawer.

## **12. Incomplete Fast Track Applications**

If there are any missing items to complete the application process, identify the document(s) that are still missing. Staff will do a courtesy call to applicant to discuss and request missing documentation. Staff will follow up with completing the Missing Documentation letter giving the applicant ten working days to submit the missing documentation requested in order to process application (please see steps 1-3 above).

Upon receiving missing documentation, the application will still be processed as Fast Track. If applicant makes a payment arrangement with PG&E to avoid disconnection after submitting an application, staff will honor the application as a Fast Track.

When an applicant does not submit the requested documents within the timeframe given, staff will mail a denial letter for Incomplete Applications (see procedures for Denial Letters For Incomplete Applications).

## **13. Ineligible and Denied Applications**

If an application is ineligible for HEAP or Fast Track services, notification of ineligibility will be mailed in writing. Reasons for ineligibility may include, but are not limited to:

- Agency is out of funds
- Facts concerning applicant's eligibility/income calculation are in dispute
- Household does not meet the agency's priority plan (and no disputed facts concerning applicant's eligibility could impact plan determination)

Reasons for denial may include, but are not limited to:

- Exceeds maximum income guidelines
- Missing or insufficient information
- Household already served

All “DENIED” applications shall receive written notification explaining the reason for the denial and advising the applicant of their rights to appeal. Provide the applicant 10 working days if needed and the opportunity to submit additional information needed to prove eligibility.

A letter describing the reason for their ineligibility/denial will be mailed to the applicant and one placed in their file. Denial letters will include an appeal notice (LIHEAP APPEAL FORM).

## C. Appeal Procedure

### 1. General Description

Contra Costa County residents are entitled to apply for assistance from the Low Income Home Energy Assistance Program (LIHEAP) with their energy cost. The LIHEAP program is funded by the state and federal government, and is administered by the State Community Services and Development Department in Sacramento.

Our goal at Contra Costa County Community Services Bureau is to serve the applicant, the best we can. If the applicant has provided all the necessary documentation and meets the income and program guidelines for service they will be approved for assistance.

In the event the application has been denied for assistance; the applicant has the right to appeal that decision. The applicant may complete and submit the LIHEAP APPEAL FORM that is mailed along with the denial letter. The applicant has within ten (10) working days from the date of the denial letter to complete and submit it to the office. They may provide any additional proof to determine eligibility.

Upon receiving the LIHEAP APPEAL FORM, it will then be forwarded to a staff where he/she will review the LIHEAP APPEAL FORM along with any additional proof submitted by the applicant to determine eligibility. After reviewing the information submitted, the staff will either overturn the denial and process the application or agree with the denial. If the application was approved, the applicant is notified by letter within five (5) working days of the approval of the application. However, if denial stands, the staff will forward the LIHEAP APPEAL FORM along with his/her notes of the review to the next designated staff.

The next designated staff will review the information and either overrule the staff’s decision or agree with the current decision. Applicant is notified by letter with the LIHEAP APPEAL FORM within five (5) working days of the decision. The next designated staff will scan the decision letter along with the supporting documents into the HEAPAPPs Folder under PY Appeals Folder.

If applicant does not agree with the decision made by the designated staff, the applicant may complete another LIHEAP APPEAL FORM. The LIHEAP APPEAL FORM will then be forwarded to the Program Manager where he/she will review the information and either overrule the designated staff’s decision or agree with the current decision. Then applicant is notified by letter within five (5) working days of the Program Manager’s decision after his/her review.



If satisfaction is not reached, the applicant still has the option to appeal at the State level by contacting the Department of Community Services and Development in Sacramento, CA by writing to:

California Department of Community Services and Development  
2389 Gateway Oaks Drive, Suite 100  
Sacramento, CA 94833  
(866) 675-6623

#### **D. LIHEAP/Fast Track Complaint Procedure**

- Any complaints are to be handled immediately by staff who receives the complaint.
- Any complaints that cannot be resolved by the first contact staff in a reasonable amount of time are to be passed to the next designated staff.
- If the complaint cannot be resolved at this level; it will be forwarded to the Assistant Manager or designee

Upon resolving the complaint, a written dated account is to be made and filed in the complaint log.

#### **E. Weatherization Referrals**

##### **1. General Description**

After the interview process is complete and the applicant is eligible for Utility Assistance, staff will ask and offer weatherization for the applicant's homes. Staff will ask if they are renters or homeowners. Staff will explain that weatherization will improve their home to make it more energy efficient. This could include windows, doors, caulking, weather stripping, heaters, water heaters, stoves, refrigerators and more. All work conducted by weatherization is done at NO COST to landlords with eligible tenants, or eligible property owners.

##### **2. Weatherization for Rental Units**

If the applicant is renting, they must first ask their landlord to fill out and sign the Energy Service Agreement for Rental Units and Post Weatherization Lead Forms. This is giving the weatherization program permission to go in the home and perform an assessment of the measures needed and perform the weatherization work. The Post Weatherization Lead Form is the only item not paid by the program and the cost is between \$200 and \$400. If the landlord does not wish to pay this they can select wish not to pay and sign the form.

##### **3. Weatherization for Home Owners**

If the applicant owns the home and is eligible for services the applicant can fill out and sign the Energy Service Agreement for Owner and Post Weatherization Lead forms. This is giving the weatherization program authorization to inspect and perform an assessment of the measures needed and perform the weatherization work. The Post Weatherization Lead Form is the only item not paid by the program and the cost is between \$200 and \$400. If the owner does not wish to pay this they can select 'wish not to pay and sign the form.

Staff will provide to applicant the Weatherization Forms upon applicant's interest, which includes the following:

**i. For Rental Units:**

- Weatherization Program Checklist for HEAP clients
- Energy Service Agreement for Rental Units
- Energy Service Agreement for Rental Units – Mechanical Ventilation
- Energy Service Agreement for Rental Units – Wall Insulation
- Post Weatherization Lead Presence Test
- CSD Form 081 Client/Customer Consent Form and Authorization

**ii. For Owner Occupied Units**

- Weatherization Program Checklist for HEAP clients
- Energy Service Agreement for Owner Occupied Units
- Energy Service Agreement for Owner Occupied Units – Mechanical Ventilation
- Energy Service Agreement for Owner Occupied Units – Wall Insulation
- Post Weatherization Lead Presence Test
- CSD Form 081 Client/Customer Consent Form and Authorization

After the forms are completed and signed by the applicant, the applicant must send all documents to the Weatherization office by email at [Weatheri@dcd.cccounty.us](mailto:Weatheri@dcd.cccounty.us), mail to 30 Muir Rd., Martinez, CA 94553, visit the weatherization website (<http://www.contracosta.ca.gov/4336/Weatherization>) or fax at (925) 646-9339. As soon as the Weatherization Program receives the forms, the Weatherization office will contact HEAP to request the applicant's LIHEAP application. At that time, staff will fax the documents to the Weatherization Program. As soon as the Weatherization Program has a completed application; it will then be reviewed and all eligible applicants will be contacted to start the weatherization home improvements. This will ensure the applicant's home is more energy efficient and will save money on their utility bill.

## **F. LIHEAP and DOE Deferrals**

### **1. Purpose**

Employees of the Contra Costa County LIHEAP Programs and Department of Energy (DOE) Weatherization Program have the right and responsibility to provide services in a safe and effective manner without undue hazard to intake and assessment staff, installation crews, inspectors, and the households we serve.

### **2. Scope**

Employees of the Contra Costa County LIHEAP Programs and DOE Weatherization Program are to adhere to the California Department and Development of Community Services' (CSD) Deferral Policy when determining eligibility for LIHEAP Programs or DOE Weatherization services up to and including denial of any and all services.

### 3. Description

The Contra Costa County LIHEAP Programs and DOE Weatherization Program staff will consult with the Program Manager when any of the following potential deferral conditions are created:

- Any act that that is physical or verbal abuse; or
- Any threatening behavior or action which is interpreted to carry the potential to:
  - Harm or endanger the safety of others;
  - Result in an act of aggression; or
  - Destroy or damage property.

Items to report may include, but not limited to:

- Verbal abuse/Foul Language;
- Falsification of Information;
- Harassment;
- Feeling unsafe or uneasy while working with an applicant;
- Threatening Violence
- Detection of Substance Abuse; or
- Discrimination

What should staff do if this occurs at the LIHEAP front desk or no Manager is available?

- If this situation occurs in the front desk and the applicant is not cooperating, contact the manager to calm the situation.
- If the applicant's behavior is threatening to staff or manager, LIHEAP has the right to refuse service and ask them to leave the office and close the main door for safety.
- Applicant's application will not be accepted for eligibility.
- A panic button is available under the front desk counter; it can be pressed if staff is feeling unsafe while working with an applicant. Once the button is pressed, an alert will be sent to the Sheriff Department in which they will show in approximately 15 minutes.

In addition, the Contra Costa County Weatherization Program complies with the California Department and Development of Community Services' (CSD) Deferral Policy requirements that:

- Weatherization agencies are required to take all responsible precautions against performing work on homes that could subject workers or applicants to health and safety (H&S) risks.
- Applicants must be informed about identified problems and safety concerns, and the reason why weatherization services must be deferred.
- The decision to defer work in a dwelling, or in extreme cases, to provide no weatherization services, is difficult but necessary in some cases.
- Decision to defer must take place upon discovery, or as soon as practicable. This does not mean that assistance will never be available, but that work must be postponed until the problem(s) can be resolved. Deferrals do not have an "expiration date".

The Contra Costa County Weatherization Program staff will consult with the Program Manager when any of the following potential deferral conditions are found:

- Applicant has a health condition that would be made worse by weatherization.
- Home’s mechanical, electrical, or plumbing system is in such despair that failure is imminent/not correctable within the program.
- Home is condemned, under rehabilitation, or applicant’s “hoarding” and/or structural issues make full assessment and/or diagnostic tests not feasible.
- Moisture issues are so severe that they cannot be fixed under Minor Envelope Repair.
- Combustion appliance safety or Indoor Air Quality fail exists that cannot be reasonably corrected within program parameters.
- Lead-based paint present that would create hazard if disturbed.
- Applicant is uncooperative, abusive, or threatening to weatherization team members.
- Illegal activities are taking place in the home.

The Contra Costa County LIHEAP Programs and DOE Weatherization Program has a Zero Tolerance policy that prohibits illegal activity and/or inappropriate behavior towards staff or subcontractors. Such use of abuse/foul language, intimidating actions (including belligerent emails and voicemails), physical harassment, destruction of property, threats to staff, etc., will be documented and will lead to termination from the program and future Deferral from services.

## **G. Quality Assurance:**

### **1. General Description**

To ensure quality control is being met, staff will conduct random file review of a minimum of 20 files per month.

### **2. Procedures**

Staff will use the Utility Assistance Quality Control File Review form to conduct the file reviews. Any errors found in the file, will be corrected in RED and documented on the file review form. The Utility Assistance Quality Control File Review form will be collected from staff and used as a tool for the Program Manager or designee to identify any trends or errors for training purposes.

Program Manager or designee shall update the Utility Assistance QA File Review Results. The Utility Assistance QA File Review Results shall be saved by month to monitor the progress or trends.

### **3. File Review between Community Services Bureau and Department of Conservation and Development**

To ensure quality control is being met between agencies, CSB and DCD will monitor each other’s application files at least on a quarterly basis.

## H. Confidentiality

### 1. General Description

When a Contra Costa County employee or an applicant to whom an employee has a relationship with is applying for the LIHEAP program, the application is considered Confidential.

### 2. Procedures

Applications considered Confidential will be handled by the assigned staff or designee. Assigned staff or designee will review and determine eligibility. Program Manager or designee must review and sign off on the application before application is processed by assigned staff. All confidential applications will be kept locked in a filing cabinet of which only designated staff will have access to.

## I. FRAUD

### 1. General Description

Staff who have a good reason, supported by documentary evidence or firsthand knowledge, to suspect that an applicant, utility company employee, another agency, etc, is knowingly, by means of misrepresentation, obtaining, attempting to, or assisting someone else to obtain benefits for which the applicant is ineligible, should report such concerns to an appropriate supervisor.

### 2. Procedures

Fraud is defined as a crime involving a material representation relating to a past or an existing fact which is: false; made with knowledge of its falsity; or in reckless disregard of the truth made in order to obtain a benefit or something of value. Factors to be considered may include, but not limited to:

- Whether the incorrect or unreported information affects eligibility
- Whether the correct information was, in fact, known to the applicant
- Whether the applicant fully understood the eligibility requirements and their responsibility for reporting information
- Whether material facts were deliberately/intentionally altered or withheld

Staff can evaluate the information provided by applicants and request additional information when reasonably necessary to verify income and their eligibility factors. The agency may deny services if the information appears to be insufficient or contradictory, and give the applicant an opportunity to appeal. If the applicant has a fraud case with PG&E for any illegal activity, the application will be denied. They can reapply once their PG&E account is in good standing.

CONTRA COSTA COUNTY EMPLOYMENT & HUMAN SERVICES  
DEPARTMENT COMMUNITY SERVICES BUREAU

# POLICIES AND PROCEDURES

SECTION 5-Financial &  
Administrative Requirements  
**2019-21**

Board of Supervisors Approved: 07/30/19

2019-21  
Policies and Procedures  
Section 5: Financial and Administrative Requirements

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## Part I. Financial Requirements

### A. Advance Amount for Travel

Advance amounts for travel are not allowed for County employees.

### B. Travel Reimbursement-County Employees

County employees are allowed compensation for mileage, meals and miscellaneous other travel expenses. Eligible individuals are entitled to claim reimbursement for actual, reasonable, and necessary expenses arising from the discharge of their official duties, subject to limitations established by law and policy.

#### 1. Mileage

As authorized by the department head or designee, use of private automobiles may be reimbursed for mileage between an individual's normal work location and other designated work locations. The reimbursement rate is set by the County, adjusted periodically to conform to IRS approved rates. Please see note in item #4 below for the time frame of submitting mileage reimbursements.

#### 2. Meals

Actual expenses, including tax and gratuity, for individual meals will be reimbursed. However, such reimbursement shall not exceed the following individual maximums:

- Breakfast: \$10.00
- Lunch: \$20.00
- Dinner: \$35.00

When away from the normal work area for an entire day, individuals eligible for meal reimbursement may claim reimbursement for the actual cost of each individual meal, notwithstanding the maximum per meal amounts specified above. However, the total amount claimed for the day shall not exceed \$65.00.

#### 3. Other Travel Expenses

- Bridge tolls, parking; Telephone and facsimile charges required in connection with County business; BART or bus fares; and Tips, parking, and checking fees in accordance with local custom.

See County Admin Bulletin #204.13 (02-20-08) regarding expense reimbursement and #111.8 (07-13-10) regarding travel.

### C. Travel Reimbursement-Parent Reimbursement for Policy Council Activities

Per HSPS 1304.50(f), Policy Council, Policy Committee, and Parent Committee reimbursement- Grantee and delegate agencies must enable low-income members to participate fully in their group responsibilities by providing, if necessary, reimbursements for reasonable expenses incurred by the members (i.e. childcare and transportation).

Parents requesting reimbursement should complete and submit Form CSB 325 to the Clerk of the Policy Council who will verify the request and determine the amount of reimbursement. After approval is received from the authorized CSB Manager or Supervisor responsible for Policy Council, a check will be issued, no later than 30 days after the request.

Reimbursements are given for approved Policy Council activities only (i.e. monthly PC meetings or committee meetings). Exceptions must be preapproved before reimbursements are issued. Mileage is calculated using distance from home to meeting location. Childcare hours include reasonable travel time to and from meetings and is based on reasonable arrival time to the approved activity.

Representatives from the Policy Council attending conferences and out-of-area meetings will be given a per diem allotment for meals and ground transportation, and reimbursed for childcare expenses. Representatives from community partners attending conferences and out-of-area meetings will be reimbursed for meals and ground transportation. Travel requests must be submitted a minimum of 30 days prior to the travel date to allow ample time for approval and advance processing. Upon return from the trip, Liquidation of Cash Advances requires that all receipts must be submitted to the appropriate PC staff person no more than 7 days after return from travel.

If receipts are not received within the 7 day timeframe, a verbal reminder will be given by the authorized CSB Manager or Supervisor responsible for Policy Council.

If receipts are still not received after a reasonable amount of time, a certified letter will be sent to the representative and a copy will be maintained in the CSB PC travel files.

Failure to return receipts within the allotted time will prevent the opportunity to attend future conferences and can prevent reimbursement for other PC activities.

*\*Note-Approved travel reimbursement rates are provided to parents at the beginning of each program year and prior to travel.*

### D. Using Employee's Own Funds for County Expenditures

Only in an emergency should an employee use his/her own funds or personal credit cards to purchase materials/services for a County purpose. An "emergency" is when:

- An event occurs which requires material or service to correct a safety hazard, or to prevent damage to facilities or equipment.
- A significant program need occurs which will have a significant impact on the goals of the program.
- Note: Lack of planning is not considered an emergency.

- While it is not encouraged, employees may purchase minor items that would not meet the criteria of an emergency as stated above. The purchase of minor items that are required to meet program needs must:
  - Be approved by the Assistant Director (AD) in writing if under \$100.00.
  - Anything over \$100.00 must be approved by the Director, Division Manager or designee.

## E. Reimbursement for Expenses – Employees

Employees will be reimbursed for approved, necessary eligible expenses, provided that reimbursement requests are made on the appropriate forms, in a timely manner and with receipts. When employees incur expenses for an approved purpose, one of the following procedures occurs for getting reimbursed:

### 1. Petty Cash

Most of the emergencies involving minor purchases can be met by use of the department's petty cash fund maintained in each Division Administrative Office. Normally, this fund is to be used for general office needs and for minor emergency requirements. A supervisor or employee may present a request for petty cash approved by an Assistant Director, to the Petty Cash Fund Custodian for payment.

### 2. Demand (Form D15\*)

In the event you are unable to get payment from the petty cash fund, you may use the Demand (Form D-15) to get reimbursed. This form is to be used to reimburse employees for non-travel related purchases. This form should be used for items of small value, as defined above, not related to travel or entitlements.

\*See EHSD Intranet> Community Services> CSB Forms > Fiscal > Demand D15)

### 3. Employee Travel Demands\*

This form is designed for reporting an employee's expenses relating to travel, mileage, or for other employee benefits or entitlements such as training costs. It will normally not be used for any other purpose. The purpose for each expense must be shown; for example, mileage should show the destination, and the reason for the trip (See Employee Handbook).

Note: County regulations allow you to include expenses for only one month on a single Travel Demand. For example, if you have expenses for May and June, you may not combine expenses on one form, but must submit two separate forms - one for May and one for June. Demands are to be submitted to your immediate supervisor for approval. Claims should be submitted within one month of completion of travel. The Bureau has no obligation to pay travel expense reimbursement submitted more than three months following completion of the travel. If an employee has over three months of mileage reimbursement to claim, the employee must submit a request letter, stating the reason for submitting a late claim, to Bureau Director or designee for approval.

\*See EHSD Intranet> Community Services> CSB Forms > Fiscal > Travel Demand (Form M8154 Rev. 11/09)

## F. Use of Procurement Cards

County Procurement Cards are assigned to an employee at the discretion of the EHSD Director and CSB Director. Card holders must abide by all policies as stated in the Procurement Card Manual, County Administrative Bulletin 111.8, and County Administrative Bulletin 204.13.

CSB card holders must obtain written approval from a Senior Administrative Manager prior to making a purchase to ensure that all expenditures are known about at the time the Approving Official is reviewing and approving the monthly Statement of Account.

- The Procurement Card is to be used for official County business purposes only and may not be used for any personal transactions.
- Card holders are responsible for adherence to all County Policies and Procedures regardless of whether a transaction is allowed at the point of sale.
- The Procurement Card is not intended to avoid or bypass appropriate purchasing procedures.
- Each card has a preset transaction, 24 hour, and billing cycle spending limit which varies by card. Employees are not authorized to exceed their spending limits.
- Disputes to charges must be made as quickly as possible per County Procurement Card manual.
- Authorized Purchases include:
  - Small Tools/ Computer supplies
  - Safety/ First Aid
  - Books/Subscriptions
  - Office Supplies (If not available through our office supply contractor)
  - Conference Registration/ Travel ( an approved travel request is still required)
- Unauthorized Purchases include:
  - Repetitive purchases better served under a blanket purchase order
  - Meals/ Alcohol /Entertainment
  - Local/ Long distance telephone charges/Internet connection costs
  - Parking/Fuel
  - Committee membership/Professional Membership Dues
  - Services of any kind
  - Items to be reimbursed through a travel demand
  - Items available under a County Contract
  - Cash/ Gift Card/ Gift Certificate/ Money Order, etc.
  - Fines/Donations
  - Any expense prohibited under County Administrative Bulletins.
- A log must be kept of all purchases which includes:

- Charges split between the appropriate org codes
- Original sales receipt/ credit or return receipts/packing slips

## G. Other Compensation

Refer to Contra Costa County Personnel Policies and Procedures.

## H. Salary

Employee salaries are set according to procedures established by the County Board of Supervisors and the Memorandum of Understanding as agreed to by the Board and collective bargaining units.

The Salary schedule and range of steps for Community Services Bureau classifications is available in each work location.

New employees generally are appointed at the minimum step of the salary range established for the particular class of positions to which the appointment is made. The appointing authority, however, may fill a particular position at a step above the minimum of the range.

Upon satisfactory completion of the probationary period, employees receive a salary increase to the next step.

The performance of each employee, except those employees already at the maximum salary step of the appropriate salary range, is reviewed on the employee's anniversary date to determine whether the salary of the employee is to be advanced to the next higher step in the salary range. Advancement is granted on the affirmative recommendation of the appointing authority, based on satisfactory performance by the employee. The appointing authority may recommend denial of the increment or denial subject to one additional review at some specified date before the next anniversary, with the date set at the time the original report is returned. This decision may be appealed through the Grievance Procedure.

Except as provided by County procedures, increments within range shall not be granted more frequently than once per year, nor shall more than one step within range increment be granted at one time, except as otherwise provided in deep class resolutions. Nothing may be construed to make the granting of increments mandatory on the County.

If an operating department verifies in writing that an administrative or clerical error was made in failing to submit the documents needed to advance an employee to the next salary step on the first of the month when eligible, the advancement will be made retroactive to the first of the month when eligible.

A part-time employee is paid a monthly salary (in the same ratio to the full-time monthly rate to which the employee would be entitled as a full-time employee) as the number of hours per week in the employee's part-time work schedule bears to the number of hours in the full-time work schedule of the department.

Any employee who is appointed to a position of a class allocated to a higher salary range than the class previously occupied - except as provided by County procedures - receives the salary in the new salary

range, which is next higher than the rate received before promotion. If this increase is less than five percent, the employee's salary is adjusted (to the step in the new range which is at least five percent greater than the next higher step), provided that the next step does not exceed the maximum salary for the higher class.

Any employee who is demoted (except as provided under Contra Costa County procedures) will have the salary reduced to the monthly salary step in the range for the class of positions to which he or she has been demoted next lower than the salary received before demotion. If this decrease is less than five percent, the employee's salary will be adjusted to the step in the new range which is five percent less than the next lower step provided that the next step is not less than the minimum salary for the lower class.

Whenever a demotion is the result of layoff, cancellation of position, or displacement by another employee with greater seniority rights, the salary of the demoted employee will be the step on the salary range which would have been achieved if the employee had been continuously in the position to which he/she has been demoted, all within range increments being granted.

Whenever any employee voluntarily demotes to a position in a class having a salary range lower than that of the class from which he/she demotes, the salary remains the same if the steps in the new demoted salary range permit. If not, the new salary is set at the step next below the former salary.

#### **I. Bilingual Pay Differential**

A salary differential of one hundred dollars (\$100) per month is paid to incumbents of positions requiring bilingual proficiency as designated by the appointing authority and the Bureau Director of Human Resources.

The bilingual salary differential is prorated for employees working less than full-time and/or who are on an unpaid leave of absence for a portion of any given month. (Refer to Contra Costa County Management Handbook.)

#### **J. Accounting Certificate Differential**

Incumbents of Management professional accounting, auditing or fiscal officer positions who are duly qualified as a CPA, CIA, CMA or CGFM shall receive a positive differential of five percent (5%) of base monthly salary. (Refer to Contra Costa County Management Handbook.)

#### **K. Management Longevity Pay**

Employees who have completed ten (10) years of appointed service for the County shall receive a two and one-half percent (2.5%) longevity differential.

Employees who have completed fifteen (15) years of appointed service for the County shall receive an additional two and one-half percent (2.5%) longevity differential. (Refer to Contra Costa County Management Handbook.)

#### L. Management Paid Personal Leave (Admin Leave)

Un-represented management employees (exempt from payment of overtime) receive paid administrative leave (94 hours per year) annually.

All management employees exempt from payment of overtime are authorized paid administrative leave credit for each year, in accordance with current Contra Costa County policies.

Use of administrative leave credits may be requested whenever desired by the employee; however, approval of requests is subject to the same department process as used for vacation requests.

All unused paid administrative leave will be canceled on December 31 of each year. For further information on management paid administrative leave, see Contra Costa County Admin Bulletin #423.3 (06-23-98).

#### M. Unemployment Compensation

Employees of Contra Costa County may be eligible for unemployment compensation. The cost of unemployment compensation is borne by the County. To qualify for unemployment compensation, an employee must:

- Be unemployed and registered with the State Employment Development Department for work
- Have separated for good cause
- Have received minimum base-period wages as currently established by State law or regulation
- Comply with regulations in regard to filing claims
- Be available to immediately accept suitable work
- Be actively seeking work
- Be physically able to work

On all voluntary resignations, a Notice of Voluntary Termination of Employment (AK-219) must accompany the Notice of Separation (AK-16), and must be immediately forwarded to the

Personnel Office, Records Division.

On non-voluntary separations, complete details must be attached to the separation notice (with the exception of rejection of probation separation). Refer to County Admin Bulletin #420.1 (01-19-81) for further information.

#### N. Vehicle Use

The County establishes policies on the use and operation of vehicles, both County-owned and privately owned, on County business.

Please see County Admin Bulletins #507.8 (02-20-08), County Vehicle Operation, and #535 (05-20-10), Use of Private Vehicles, for further information.

NOTE: For Contra Costa County's Policies and Procedures, please refer to the Contra Costa County's Administrative Bulletins and Management Handbook.

## O. In-Kind (Non-Federal Share)

### 1. Background

The Head Start Act stipulates that the Federal share of the total costs of the Head Start program will not exceed 80 percent of the total grantee budget unless a waiver has been granted (Head Start Act Section 640(b)). If the grantee agency fails to obtain and document the required 20 percent, or other approved match, a disallowance of Federal funds may be taken. Non-Federal share must meet the same criteria for allowability as other costs incurred and paid with Federal funds.

### 2. Definitions

- Allowable Cost: Third party in-kind contributions shall count toward satisfying a cost-sharing or matching requirement only where, if the party receiving the contribution were to pay for them, they would be an allowable cost. Allowable costs are determined by the tests of reasonableness, necessity and allocability as defined in Office of Management and Budget (OMB) Circulars A-21, A-87 and A-122.
- In-Kind: Property or services that benefit a grant supported project or program and are contributed by non-Federal third parties without charge to the grantee. In-kind contributions may consist of the value of real property and equipment and the value of goods and services directly benefiting the grant program and specifically identifiable to it. In-kind match is counted for the period when the services are provided or when the donated goods are received and used.
- Volunteer: An individual providing a service that is necessary to the operation of the Head Start program at no cost to a grantee agency.
- CSB Categories for third party in-kind contributions:
  - Classroom Help (CH): In-Kind to assist in the classroom.
  - Field Trip Help (FT): In-Kind to assist supervising children and their activities during a field trip.
  - Home Visits (HV): Volunteer at Home visits where parent is involved in child-directed activities.
  - Parent Meetings/Family Events (PM): Volunteer at Parent Meetings: Participating in site based events.
  - Policy Council Meetings/Subcommittees (PC): Volunteer at Policy Council and approved related events.
  - Home Activities (HA): Volunteer working on educational goals with child at home.
  - Donated Goods (DG): Materials donated directly to HS including land, buildings, or space that offset normal operating expenses.
  - Donated Services (DS): Time provided by professionals within the community on a professional level; i.e. Fire person, fence builder, mechanic, library aide, doctor, dentist, counselor and other professions.



**3. Values of third party in-kind contributions** will be determined and computed by CSB Fiscal Unit for the following contributions:

- Classroom Help
- Field Trip Help
- Home Visit Volunteer
- Site Meeting/Family Events Volunteer
- Policy Council Meetings/Subcommittee Volunteer
- Home Activities Volunteer

**4. Donated Goods and Services** (professional) will be determined by the community member or professional delivering the contribution within the standards of reason for the value and goods of the service.

**5-CSB Staff will adhere to the following procedures** for collection, documentation, calculation and record keeping of Third Party In-Kind contributions:

- Head/Lead Teachers: Daily/Monthly
  - Prepares CSB320 (CSB-320), in-kind form for classroom
  - Ensures proper completion of in-kind form-Full Name, Type of in-kind contribution, Service Time, signature of volunteer
  - Submit the CSB320 to Site Supervisor by 1st of each month with the 9400 sign-in sheets
  
- Site Supervisor Monthly
  - Ensures collection of in-kind forms from every classroom by the 1st of each month
  - Reviews and monitors forms for completion and accuracy
  - Sign form indicating review and approval
  - Follows up with any classrooms submitting zero or low in-kind
  - Submits the in-kind form to the Cluster Clerk by the 5th of each month with the 9400s
  
- Assistant Director Monthly
  - Reviews in-kind sheets and signs off
  - Follows-up with any sites submitting zero or low in-kind
  - Submits to Cluster Clerk for data entry
  
- Cluster Clerk Monthly
  - Calculates the total number of in-kind hours per activity for each site
  - Calculate EHS and, HS separately as directed by CSB fiscal unit
  - Inputs data into COPA/CLOUDS by the 20th of each month
  - If a cluster clerk receives in-kind forms after the 15th, hold for next month tracking
  - Maintains original documents
  
- Fiscal Annually
  - Determines the in-kind rate calculation for volunteer contributions (Non-professional)

- Monitor volunteer in-kind hours once a month Monthly
- Ensure proper value of in-kind rates and calculations
  
- CSM in charge of Parent Involvement / PC Clerk: Monthly
  - Reviews monthly in-kind data entered by Cluster Clerks
  - Reports in-kind hours by site as reported to CSM in charge of Parent Involvement
  - Reports in-kind hours by cluster as reported to Assistant Directors
  - Provides training and support, as needed, to teachers and/or Site Supervisors
  - Provides total in-kind contributions as needed or requested

## P. Reduced Days of Attendance Due to Emergency Conditions

### 1. Background

California Department of Education (CDE) Management Bulletin 10-09 which reminds Agencies that Education Code (EC) 8271 provides against loss of funds due to the circumstances that are beyond the control of the contractor.

It states that in the event that operating agencies are unable to operate due to incomplete renovations authorized by administering state agencies, or due to circumstances beyond the control of the operating agency, including earthquakes, floods, or fires, such programs shall not be penalized for incurred program expenses nor in subsequent annual budget allocations.

Circumstances beyond the control of operating contractors include, but are not necessarily limited to:

- Earthquakes
- Floods
- Fires
- Epidemics
- Impassable roads
- The imminence of a major health or safety hazard, as determined by the local health department or law enforcement agency
- A strike affecting transportation services for children provided by a non-agency entity
- Incomplete facility renovations authorized by the California Department of Education, pursuant to California *Education Code* sections 8277.1 and 8277.2
- State of California budget impasse

### 2. Policy

Whenever a contractor's days of operation are reduced for any of the above reasons, and the reduction in days of operation did not require the contractor to reduce staff through layoffs or unpaid furloughs, the contractor's governing board, or the executive office for contractors not having a governing board, must adopt a resolution that clearly and fully describes the nature of the emergency condition as well as the specific effect on program operations. The resolution should include:

- Dates program operation was necessarily suspended or substantially reduced
- Daily attendance for both certified and non-certified children for the week prior to the date operation was suspended or reduce

Whenever the contractor's days of operation are reduced because of a state budget impasse and this reduction requires the contractor to reduce staff through layoffs or unpaid furloughs, the contractor may request reimbursement for ongoing administrative and operational expenses that occurred during the emergency closure. The contractor's governing board, or the executive office for contractors not having a governing board, must adopt a resolution that clearly and fully describes the nature of the emergency condition as well as the specific effect on program operation. The resolution should include:

- Dates program operation was suspended
- A detailed list of actual program expenses incurred during the period of closure

### **3. Application Submission Requirements**

- Whenever an emergency closure happens at any of the CSB or Partner sites that meets the definition of Management Bulletin 10-09 as mentioned above, the Assistant Director (AD) with the responsibility for that site/ASA III (Partner Sites) will:
  - Inform their Division Manager, Child Development Accountant and State Liaison ASA III of such occurrence as soon as possible.
  - Obtain a copy of the verification for the emergency closure. This could be in the form of a utility notice, damage assessment report, unusual Incident/injury report etc.
  - Mark "Non Class Day" for all children affect by the emergency closure for all closure days on CLOUDS via the classroom wall pads or CLOUDS Manual Attendance module.
  - Obtain the daily attendance for both certified and non-certified children of the impacted classroom/site for the whole week prior to date of emergency closure. The attendance sheet should indicate site, classroom, number of children in that classroom, contract type(s) and date. Please use CLOUDS Manual Attendance Module to print the Attendance for the entire week.
  - Submit the closure verification and the attendance to the State liaison ASA III.
  - The State Liaison ASA III will use the above data, verify the attendance and contract types on CLOUDS/CDFS 8501, and submit a request for a board resolution to the Contracts Unit.
  - Once the board resolution is obtained, the State Liaison ASA III will submit the application to our Early Learning and Care Division (ELCD) consultant for approval in accordance with the Management Bulletin 10-09.
  - The ELCD and the Child Development Fiscal Services (CDFS) will jointly review

- and determine the actual program expenses incurred during the period of closure/reduced operations.
- The approval will be submitted to CSB Business System Unit and Fiscal Unit for processing of CDE's in CLOUDS System and reporting to CA Department of Education respectively.
    - Business Systems Unit will mark all children's Attendance as "Excused" for those closure days which were approved by CDE.
    - Business Systems Unit will update the affected 9400s
    - Business Systems Unit will provide a new CD 9500/8501 report to Fiscal Unit for processing.

## Part II. Administrative Requirements

### Subpart I. Monitoring

#### A. Purpose

CSB Ongoing Monitoring is a key management system for ensuring program quality and compliance with Head Start/Early Head Start Performance Standards, California Child Development Title V Regulations, California Desired Results and Environment Rating Scales, NAEYC Standards and Title XXII Child Care General Licensing requirements. Ongoing Monitoring ensures that the program is moving toward achieving its goals and objectives while providing high quality, comprehensive services to the ever-changing needs of the children and families served. CSB is committed to the continuous improvement of our programs through regular and ongoing monitoring of all aspects of our operations.

#### B. Methodology

The ongoing monitoring process is comprehensive in scope. The system provides a method to examine service delivery including the tracking of child and family outcomes on an ongoing basis and incorporates a process to connect the results to management systems. Staff at all operational levels participate in the ongoing monitoring process and any identified concerns are communicated in writing to the appropriate staff responsible. Corrections are validated according to specific timelines.

Ongoing monitoring occurs on a regular and routine basis to assess systems and program operations for evaluation and continuous improvement of our programs. It includes the review and evaluation of services and systems, documentation of results, tracking and analyzing areas of concern and correction, and validation that correction has been completed. Results of monitoring and completion of corrective actions for findings are shared by the Bureau Director or designee with: EHSD Director, Board of Supervisors, Policy Council, Assistant Directors, Site Supervisors and their staff. Results are used to conduct root cause analysis and develop plans for improvement and program planning.

### C. Multi-Level Monitoring

**1. Center-Level Monitoring** is conducted by Site Supervisors, Comprehensive Services Assistant Managers, Clerks, and Teachers for the purpose of monitoring day-to-day center operations, delivery of services, and overall health and safety of internal and external environments of children at the center for which they are assigned. Assistant Directors receive monthly reports from Site Supervisors that provide an overview of each of the centers they are assigned to track any concerns as well as highlight strengths and special activities occurring each month.

For partner centers, the CSB Partners Unit visits subcontracted centers weekly to monitor the delivery of services and health and safety to ensure ongoing communication. The delegate agency provides monthly communication reports to the Analyst responsible for partners and the delegate agency.

**2. Cluster and Content Area Monitoring** is conducted by Site Supervisors, Comprehensive Services Managers and Analysts responsible for a specific content or service area to ensure that staff are trained and comply with funding requirements and regulations around a specific content or service. CSMs and Analysts review trends across centers and services and identify risks or concerns and provide ongoing training as well as targeted training when needed.

For partner agencies, the designated Analyst reviews monthly reports and monitoring performed by the agencies and provides support and training as needs are identified. The delegate agency completes its own internal ongoing monitoring. Monthly reports on these activities, including corrective actions, will be submitted to the Analyst overseeing the Partner Unit.

**3. Agency-level monitoring** is conducted by the CSB Quality Management Unit (QMU). This unit is responsible for conducting compliance and quality monitoring of directly operated, partner and delegate agency centers in six key areas: center monitoring, comprehensive services compliance, need and eligibility, education file monitoring, curriculum fidelity, and Classroom Assessment Scoring System (CLASS™) observations. Corrections for non-compliances are completed by the responsible person at the center and are validated by QMU Comprehensive Services Assistant Manager(s) or designee. The members of QMU or designee will select a random sample of 50% of the non-compliant files and conduct a final review of correction and validation.

**4. File Monitoring:** Each directly operated; partner and delegate agency center is monitored once per year (July-June). A random sample of 30% of files is reviewed in the areas of need and eligibility, education and comprehensive services compliance. Areas of strengths and non-compliances are documented on CLOUDS. For centers that do not utilize CLOUDS, information will be extracted to communicate the findings on a Microsoft document version of the tool and feedback form. The site has seven business day to review non-compliances and send questions, concerns, and items that may be considered false non-compliances to the QMU. The monitors will be responsible for reviewing, investigating, and correcting any false non-compliance items on the tools as mentioned by the site, revise and communicate changes to tools if applicable. Four weeks after the 7 business day period, QMU staff will revisit the center to validate 50 percent of the files that had been flagged with items of concerns to ensure that they have been corrected, if applicable. Once validation is completed, QMU staff will send center the Quality Management Unit Feedback Form (CSB 791) to inform whether validation passed or failed. If the files do not pass the 50 percent validation review, a corrective action plan is required. Within eight weeks from validation results, a designee will complete the Quality Management Unit Feedback

Form (CSB 791) addressing a corrective action plan. A CSM or designee will validate the corrective action plan and verify that all corrections have been made. The Quality Management Unit Feedback Form whether center passed or failed validation, must be submitted to CSB-Monitoring@ehsd.cccounty.us within eight weeks from the date QMU staff sent validation results.

- i. **Center Monitoring:** Thirty percent sample of classrooms in the center receives a center monitoring. Areas of strengths and non-compliances are documented on CLOUDS forms. For centers that do not utilize CLOUDS, information will be extracted to communicate the findings on a Microsoft document version of the tool and feedback form. The site has seven days to send questions, concerns, and items that are considered false non-compliances to the QMU. The monitors will be responsible for reviewing, investigating, and correcting any false non-compliance items on the tools as mentioned by the site, revise and communicate changes to tools if applicable. Center based staff will correct non-compliances and document it on CLOUDS forms or Microsoft documents. QMU clerk will monitor to ensure that all corrections are documented within 5 weeks, or notify the Assistant Director or designee to follow-up, as applicable.
  
- ii. **Curriculum Fidelity Monitoring:** All directly operated, partner, and delegate agency classrooms are monitored for curriculum fidelity. QMU monitors the classroom using the Creative Curriculum Fidelity Checklist. Classroom must receive a score in fidelity of medium or better to be compliant. Non-compliant items are marked on the tools and the findings are documented on the feedback forms. After completing the observation period, the monitor will meet with the lead teacher and share observations and ask any questions as needed. Within three days, QMU staff will send the reports to the responsible persons. It is the expectation that all monitoring reports, regardless of type of findings, are shared with the team whose work was reviewed. The site has seven days to send questions, concerns, and items that are considered false non-compliances to the QMU. The monitors will be responsible for reviewing, investigating, and correcting any false non-compliance items on the tools as mentioned by the site, revise and communicate changes to tools if applicable.  
If there are no non-compliances, the feedback form is signed by the Assistant Director or designee and submitted to CSB-Monitoring@ehsd.cccounty.us within five weeks of monitoring.  
If there are non-compliances, with five weeks from the monitoring, the Site Supervisors will complete and sign a corrective action plan and submit it to the Cluster's Comprehensive Services Education Manager for approval. The Site Supervisor or designee will submit the signed Corrective Action Plan to CSB-Monitoring@ehsd.cccounty.us. An additional five weeks to have the Comprehensive Services Education Manager validate that the corrective action plan has been implemented and submits it to CSB-Monitoring@ehsd.cccounty.us.
  
- iii. **CLASS Monitoring:** CLASS™ Observations are conducted by a trained CLASS™ reliable observer working with the QMU. Fifty percent of the eligible preschool classrooms will be selected. Selected classrooms receive CLASS™ observations twice in the year. The following year, CLASS™ will be completed for the remaining classrooms that did not receive observations. Ratings below cut-off scores require a corrective action. CSB's CLASS™ cut-off scores for corrective action may vary from year-to-year as they are established after the National Designation Renewal System trigger scores have been made available. Teachers must receive a score of 6 or better in the domains of Emotional Support and Classroom Organization and a score of 3 or better in the Instructional Support domain. Classrooms review

two twenty-minute observations, twice per year. Within three days, QMU staff will send the reports to the responsible persons. It is the expectation that all monitoring reports, regardless of type of findings, are shared with the team whose work was reviewed. The site has seven days to send questions, concerns, and items that are considered false non-compliances to the QMU. The monitors will be responsible for reviewing, investigating, and correcting any false non-compliance items on the tools as mentioned by the site, revise and communicate changes to tools if applicable.

If there are no non-compliances, the feedback form is signed by the Assistant Director or designee and submitted to CSB-Monitoring@ehsd.cccounty.us within five weeks of monitoring.

If there are non-compliances, with five weeks from the monitoring, the Site Supervisors will complete and sign a corrective action plan and submit it to the Cluster's Comprehensive Services Education Manager for approval. The Site Supervisor or designee will submit the signed Corrective Action Plan to CSB-Monitoring@ehsd.cccounty.us. An additional five weeks to have the Comprehensive Services Education Manager validate that the corrective action plan has been implemented and submits it to CSB-Monitoring@ehsd.cccounty.us.

Data collected from monitoring is compiled into agency reports for review by staff, managers, the Policy Council and Board of Supervisors to inform of agency trends, strengths and areas in need of improvement. All reports and findings are shared with the partner and delegate agencies.

The Analyst overseeing the QMU compiles results and findings and distributes reports to senior management, Comprehensive Services Managers, Site Supervisors, center staff, Board of Supervisors, and the Policy Council twice per year. These reports are a high-level representation of the agency's compliance and non-compliance concerns in the five areas monitored by QMU. Comprehensive Services Managers and senior managers responsible for a content or service area review these bi-annual reports to identify trends and develop staff training.

The Bureau Director or her designees will monitor all administrative internal team members with responsibility over service areas. This may include periodic walk-through activities or unannounced visits to sites.

Additional information on multi-level monitoring is available in the Appendix of the Policies and Procedures.

#### **D. Fiscal Monitoring of the Delegate Agency by the Grantee**

The Grantee certifies that the Delegate Agency is complying with regulations and generally accepted accounting principles. Monitoring is conducted using the following format:

- Monthly Reports: Delegate Agency shall submit monthly financial reports that record cumulative and accrued expenditures and obligations through the end of the contract year. Monthly reports are due on the 20th of each month for the preceding month. Reports shall be submitted on Form M2092 (Monthly Financial Report) and shall include, at a minimum:
- Separate reports for Program Accounts 20 and 22

- Reimbursement reports for the Child Food Program
- Line item documentation of administrative expenditures
- Copies of contractor's monthly financial statement and payroll reports
- A separate monthly report summarizing the local share reported in the financial report.

### **E. Fiscal Officer or his/her Designee Reviews the Financial Information for Content and Consistency Before Reimbursing Monthly Expenditures**

Annual On-Site Monitoring: After the annual audit by a Certified Independent Accountant, the Grantee performs an on-site review of the Delegate Agency records using the OHS Monitoring Protocol. This procedure is performed no later than May of each year for the prior award year.

The following is monitored:

- **Accounting Records:** Records are reviewed to assure that they adequately identify the source and application of funds for contract-supported activities, and that they are maintained. Records are reviewed to make sure that they contain information pertaining to contract awards, authorizations, obligations, unobligated balances, assets, outlays, income, and liabilities.
- **Internal Controls:** Controls are reviewed for effectiveness, and that accountability is maintained for all contract cash, real and personal property, and all other assets. Contractor is reviewed for adequately safeguarding all such property and that property is used solely for contract purposes.
- **Budgetary Controls:** The actual and budgeted amounts for each contract allocation are compared. The grantee will conduct regular and routine monitoring including delegate agency annual management and fiscal systems review.

### **F. Center Visit Documentation**

The CSB Director, Assistant Directors, or other Administrative Managers may conduct unscheduled/unannounced monitoring visits at directly operated or partner agency sites. These visits are documented on the Center Visit Documentation form. Any issue requiring a corrective action is documented and validation of correction is assigned and verified upon completion.

### **G. Client Concern Tracking**

CSB maintains a log to record and track customer concerns/complaints.

#### **1. Site Supervisor and Comprehensive Services Manager Responsibility:**

- Site Supervisors and CSMs will document all customer complaints on the monthly log and submit to their AD or ASAIII monthly.
- A new sheet or document will be used each month. Do not combine months when submitting to AD/ASAIII. At this time this log is not yet posted on CSB Forms or Intranet and



so each SS/CSM should keep a blank template of this log on hand to start a new one each month.

- Complaints to be documented include all complaints from the public, enrolled families or families attempting to be enrolled.
- The completed monthly log shall be maintained by the SS/CSM.

## **2. Assistant Director/ASA III Responsibility:**

Upon receipt of the monthly client concern tracking log, AD or ASAIII will combine all reports onto the Quarterly Complaint Log and submit to their supervisor quarterly.

- ## **3. Division Manager/Business Systems Manager Responsibility:**
- The DM or BSM will provide the report quarterly to the Director.

## **H. Procedures for Review, Analysis and Reporting**

The monitoring analyst will ensure that the data is entered into the Monitoring database and that reports are distributed to all stakeholders, including the Bureau Director, Assistant Director, and Comprehensive Services Managers and site staff. A monitoring results report is also prepared for the Delegate Agency. All monitoring results will be formally submitted to the delegate agency. Issues or corrections cited will be communicated with corrective action requirements as part of the notification.

### **1. Monitoring Database**

- The program uses databases designed in-house to track monitoring findings and areas of strength to inform the reporting process and ensure the system is working effectively and efficiently. The analyst responsible for the ongoing monitoring system uses the database to track completion of corrective actions to ensure that closure is established for any item found to be non-compliant.
- The databases allow program managers to view trends and isolated incidences and assist them in conducting root cause analysis and plans for improvement as appropriate in a timely fashion.
- Non-compliances will be utilized by all staff to: to identify program weaknesses; to correct identified non-compliance issues; and to seek continuous improvement.

### **2. Monitoring Reports**

- Monitoring analyst compiles results and findings such as: program strengths, areas of improvement, site performance reports and other reports as needed.
- Reports are disseminated to: senior management, comprehensive services unit, site supervisors, and site staff, Board of Supervisors, and Policy Council.
- Monitoring Analyst will complete a semi-annual Root Cause Analysis report and provide roll up summaries within 4 weeks of completion of Period 1 (July-December) and Period 2 (January-June).

### **3. Root Cause Analysis**

Content Area Managers will review semi-annual monitoring reports for trends across their service area and complete a Root Cause Analysis and provide an Ongoing Monitoring Corrective Action Plan in response to areas identified as needing improvement within 4 weeks of report distribution.

- Review the monitoring reports for areas needing improvement to address and identify root causes for non-compliances (tangible, materials items failed, something was done incorrectly, system or process to do work requires revision).
- Define the problem, collect data, identify possible causal factors surrounding the problem, and identify the root cause.
- Submit an action plan to the Assistant Director to recommend and implement solutions, identify responsible persons.
- Effectiveness of action plan will be reviewed at the release of the following semi-annual monitoring report.

### I. The Ongoing Monitoring Plan

For more detailed description of the ongoing monitoring system, refer to the Ongoing Monitoring Plan located in the CSB Intranet.

## Subpart II. Self-Assessment

### A. Self-Assessment Team

The Grantee and the Delegate Agency conduct a joint Self-Assessment each year. The role of the Bureau Director and Delegate Director and/or their designees in the self-assessment process are as “advisor” to team. The analyst responsible for the Self-Assessment is the Team Leader and may be supported by a consultant. Small teams are comprised of grantee and delegate agency management and non-management staff, parents, community partners, and representatives of the Board of Supervisors. A cross-section of staff is represented on each team. Teams are formed beginning in November of each year and finalized in January.

### B. Methodology

1. Components of the self-assessment monitoring may differ year to year. The team leader and consultant, if applicable, identify sites and classrooms for the self-assessment. The following factors are considered in site selection:

- Monitoring results, including recent Federal Review, licensing visits, and assessment Findings
- History of site inclusion in last three years of self-assessment
- Program options and funding models to ensure all variations are assessed
- Representation of Supervisory Districts

- Site based special initiatives and projects
- Operational days

2. The current Office of Head Start (OHS) Program Monitoring Instrument and the Classroom Assessment Scoring System (CLASS™) are the tools used for the self-assessment each year. Slight modifications may be made to the tool by the team leader to streamline it for ease of use by community partners, parents, and board representatives. Other tools may be introduced as needed.

3. A timeline is established which includes ample time for site visits and report writing, scheduled team check-in sessions, and ongoing training and technical assistance.

4. Training is provided to all team members in January of each year and addresses the following items:

- Purpose and Approach
- Self-assessment process
- Methods of collecting applicable data
- Timelines
- Confidentiality
- Reporting procedure used in the “non-compliant” portion of each review team’s report
- Report writing format and techniques

### C. Parent Involvement

The Policy Council has a Self-Assessment sub-committee, which forms in November of each year after being provided with a description of the work of the committee. The Policy Council is oriented to the self-assessment process and timeline in November, at which time additional members of the sub-committee are recruited. These parents are trained fully with the rest of the team in January and are paired with an experienced manager to mentor them through the process, if necessary. The varying availability of parents is accommodated to maximize the involvement of all parents who express an interest in participating. Non-English speaking parents are encouraged to get involved and are paired with a staff person who speaks their language.

### D. Process of Self-Assessment of Agency’s Program Services

The Self-Assessment is conducted in February of each year. Each team is assigned specific service areas and several sites to assess and determine compliance. Examples of tasks of the various teams include:

- Interviewing appropriate staff, community partners, and parents
- Observing the classroom environment
- Reviewing documents such as policies, procedures, and service plans
- Observing procedures as they are implemented in the field
- Completing checklists for health and safety and eligibility

Teams check in regularly to report progress, problem solve questionable compliance areas, and plan their next day. At the conclusion of the data-collecting process, individual teams meet and review their findings, and determine the following:

- Program strengths and compliances
- Non-compliances
- Recommendation of a plan of action to meet compliance
- Evaluate the process using a plus/delta approach which is used to inform the process for the next year.

### **E. Self-Assessment Results**

Individual results of the self-assessment teams are submitted to the Analyst, who consults with the Bureau Director and Delegate Agency Director, and then compiles a complete report of the self-assessment.

The written report is sent out to staff, and if non-compliances are found, content area experts are assigned to develop a corrective action plan. Once the corrections are validated (immediately for health and safety items and within 30 days for all other items), the self-assessment report and plan of action are submitted to the Policy Council and Board of Supervisors in March. An approval is obtained for any corrective action plan involved. The final report, inclusive of the validation of submission and/or approval by the Policy Council and Board of Supervisors, is then submitted to the Administration for Children and families (ACF).

The results of the self-assessment are to be used in the planning process, in developing and improving program services, and in formulating the program approach, service plans, and goals and objectives for the program.

### **F. Monitoring the Plan of Action Resulting from Self-Assessment**

Throughout the year, management staff responsible for any areas of non-compliance identified in the self-assessment process shall continue to monitor the status of the corrective action, using the results of ongoing monitoring efforts, to ensure the issue is resolved and continues to remain compliant.

## **Part III. Record Keeping and Reporting**

### **A. General Description**

#### Record-Keeping and Reporting Systems

The effective and efficient reporting system used in CSB meets federal guidelines as spelled out in the Performance Standards Record-Keeping Instruction and the state guidelines as required by state contract and licensing requirements.

The system provides for accurate and timely information regarding children, families and staff and

meets the Confidentiality Policy of the bureau.

Each area of program services maintains the appropriate record-keeping and reporting systems according to the above mentioned federal and state guidelines to include: child and family records, site safety records, child records, child health records, family records, and personnel records. Systems for maintaining the records, specific to a program service area, are described in each section of these policies and procedures.

A file and records system is established/maintained by the Contra Costa County Community Services Bureau personnel office. In addition, copies of certain personnel records pertaining to all permanent staff, including Teacher Assistant Trainees job qualifications are kept at each child care center as required by state licensing.

Confidential files and records system shall be maintained in a locked cabinet to include official documents for each staff member.

- Procedure for File Transfers: When staff transfers to another site, it is the responsibility of the Site Supervisor at the new site to assure all required personnel files are sent to the new site by communicating with the Site Supervisor of the site from which the employee is transferring.
- The following procedures are in place to protect confidentiality of all sensitive material:  
If files are faxed by CSB Personnel to the employee's new location, CSB Personnel will contact the site supervisor and request the site supervisor to oversee the fax machine to verify all confidential information is transmitted to the site supervisor only, protecting the employee's HIPAA rights to privacy.
- After the Personnel Staff receives a confirmation from the fax machine, the Personnel Staff will call or e-mail the Site Supervisor to ensure that all the documents sent to that site have been received.
- The site supervisor at the employee's previous location will shred all documents pertaining to the transferred employee, and will send email verification to CSB Personnel when shredding is complete.
- Employees have the option of personally transporting their files to their new site. The employee must sign for the file material, and immediately transfer the file contents to their new site supervisor. The site supervisor must send verification to CSB Personnel when proper filing procedures have been completed.
- Under no circumstances may files be transmitted by interoffice or pony mail.

## B. Personnel Files

All personnel files are stored in the Personnel Unit in a locked cabinet and in a locked office. The access to the personnel files is granted only to the authorized personnel. An employee's union representative must have a written authorization from the employee to obtain access to his/her personnel file. When reviewing a personnel file, a member from the personnel staff must accompany the authorized personnel at all times in the closed door office. The authorized personnel must sign, date and write the reasons on the "Access to File" card located in front of each personnel file.

## C. Family Files

### 1. Center Based

The Site Supervisor, comprehensive service staff or the head teacher at each site is responsible for maintaining the family's basic data file at each site. All children's files must be kept in a locked file cabinet. Access to files is permitted only by authorized personnel. When authorized personnel must access a child's file, the protocol must be adhered to. Two types of access and removal of a file from the cabinet can take place.

- The file is taken off site for audit or review:  
Authorized staff must record the removal of the file off the site premises on the "Record Keeping Log" located at the site; He/she must log: "check in/out status" by completing the required information on the template.
- The file is accessed on site:  
Authorized staff needing to work on a file on site must pull the file and in its place insert the file check-out card indicating: date, name and signature of staff pulling file. Upon return of the file, staff must sign in verifying the return of the file, and the check-out Card is removed.

In both of the above situations, an "Access to File" form must also be completed by the authorized person accessing the file. This is located on the right hand side of the first section of the child's file. One must indicate date, name, and purpose for accessing the file.

Files are kept on site for the current enrollment year until after the annual audit is complete. After the audit, files are prepared to be archived, and sent to a warehouse for storage. Children's files are kept for five years after our services to the family ends. Files are then shredded.

Effective January 1<sup>st</sup> 2014, any document or record may be maintained on electronic format if it was originally created in an electronic format and kept in its original unconverted electronic format. Documents or records created in paper form cannot be scanned and stored electronically alone. These records must be stored in their original paper format. Independently of being hard copy or electronic format, all records must be kept for at least five years

### 2. Alternate Payment Program:

All family files must be kept in a locked file cabinet. Access to files is permitted only by authorized personnel.

Any document or record may be maintained on electronic format if it was originally created in an electronic format and kept in its original unconverted electronic format. Documents or records created in paper form cannot be scanned and stored electronically alone. These records must be stored in their original paper format. Independently of being hard copy or electronic format, all records must be kept for at least five years. After this period, hard copy files will be shredded.

### D. Client Files for Low Income Home Energy Assistance Program

All Client records and documents must be scanned in a secure folder. All scanned and hard copy client records are retained for three years from the contract close out. After three years from the contract close out date, the hard copies are then shredded.

## E. Contract Files

Contract files are stored in designated cabinets in the Contract & Grants Administration office. Contract staff is required to maintain current and accurate records of contract activity. This includes contracts, board orders, insurance verifications, required clearances and Internal Revenue Service (IRS) documentation. The documents are kept in individual contract files, labeled by contractor name and contract number. Board orders are kept with each corresponding contract and in a general board order file, organized by month and year. EHSD Contracts and Grants Unit will maintain a record of all contractors' files and will include all licensing and program mandated forms. The following documents are maintained by the Contracts & Grants Unit:

- Independent Contractor contract files
- County Administrator Office Questionnaire for determining Independent Contractor status
- Corporation (non-profit and for-profit) Contractor contract files
- Contract files for contracts with other legal status, such as general partnership
- Contra Costa County Small Business Enterprise award forms (where applicable)
- Board of Supervisors board orders
- IRS W-9s and IRS W-4s (where applicable)
- Certificate of Liability Insurance
- Fingerprint clearance form (where applicable)
- Current Health Screening Form or proof of current physical exam and TB clearance (where applicable)
- Contra Costa County Auditor-Controller Insurance clearance
- CSB Contract Request forms, with authorizing signatures

## F. Public Access to County Records

In accordance with the California Public Records Act and the Better Government Ordinance, any person is entitled to inspect and to receive copies of the public records of the County, including records of individual departments. Upon a request for a copy of public records, county staff is to make the requested records available to any person upon payment of applicable fees. Disclosable county records may be inspected anytime during regular business hours. Every attempt should be made to allow prompt inspection of the requested disclosable records. If copies are requested, they should be provided no later than the next business day if possible to do so.

### i. Disclosable Records:

Any existing writings containing information relating to the conduct of the public's business prepared, owned, used or retained by the County regardless of physical form or characteristics are considered public records and should be disclosed by request. These include, but are not limited to, papers, books, maps, charts, photographs, audio tapes, and video tapes, information stored in non-paper form on a computer or other electronic media and other material. Additionally, writings that are not, in whole or in part, exempt from disclosure under the Public Records Act and the Better Government Ordinance.

**ii. Exempt from Disclosure Records:**

Personnel, medical or similar records which cover intimate and personal information such as: employee performance evaluations, employee home address, home telephone number and all personal information are exempt from disclosure. Certain other public employee information may be released: (1) amount of an employee's gross salary and benefits, job classification, and job duties; (2) Merit board and arbitration disciplinary proceedings and writings submitted in such proceedings; (3) information in case of emergency or need when such disclosure appears reasonable to protect any person's health or welfare; (4) information for authorized criminal law enforcement purposes; (5) information required by subpoena, testimony or other legal process; (6) information authorized to be released to third parties by the written consent of the effected employee; and (7) any other information, when reviewed and approved by CC County Counsel prior to release.

- Investigatory records compiled for correctional or law enforcement purposes such as: records of complaints, preliminary inquiries if a crime or violation has been committed, full investigations, and memoranda "closing" an investigation.
- Examination data such as questions, scoring keys, examination data used to administer a licensing, employment or academic examination.
- Confidential legal writings such as writings to or from the CC County Counsel to an attorney who represents the County or writings especially prepared for or by the County Counsel providing legal advice, analysis of proposed legislative actions or positions, terms of settlement of litigation, post-negotiation reports.
- Health Services contracts between the County and the State and writings related to those contracts.
- Particular statutory exemptions related to specific situations such as information about health facilities, assessment records, agricultural information, etc.
- Real estate appraisals or engineering studies relating to the acquisition of properties or to prospective construction contracts.
- Preliminary drafts, notes, memoranda and "deliberative process".

CSB employees are encouraged to contact Personnel when approached with requests for disclosure of documents by the public. Personnel staff will provide advice or contact County Counsel for additional clarification. In such cases, the employees are expected to provide the requestor/s with timelines in which the requested information will be provided to them.

## **Part IV. Business Systems**

### **A. Overview**

The Business Systems Unit supports the operation of CSB programs by ensuring that CSB has:

- Safe, secure facilities.
- Technology and related services to effectively manage work.
- Safe transportation for travel as necessary and available.
- Grant writing leadership and support.



- Ongoing monitoring, planning, and communication systems.
- Equipment and supplies necessary to operate a quality program; and
- Forums for sharing ideas and implementing continuous improvement.

## B. Facilities

### 1. Physical Environment and Facilities

- Both CSB and their designated contractors shall endeavor to operate offices and childcare centers that are free of exposure from toxins such as cigarette smoke, pesticides, herbicides, lead, and other air pollutants as well as contaminants from the soil and the water.
- Smoking is not permitted under any circumstances on the premises of the centers and is posted as such. Anyone found bringing in a lit cigarette, electronic cigarette, or cigar shall be directed to immediately leave the office/center until the item has been safely extinguished outside of the building.
- No center or office shall be sprayed with herbicides or pesticides when children or staff is present.
- Each center has a thermostat that must maintain a minimum of 68 degrees F. and a maximum of 85 degrees F.
- All plumbing fixtures must be sanitary, safe and in working condition at all times, including hot and cold water availability (a minimum of 105 degrees F. and not to exceed 120 degrees F) and may not serve more than 15 children.

#### i. Children's Centers-Outdoor Environment

The outdoor space must be safe and free from hazards at all times. Each morning, before the children go outside, the Site Supervisor or designee must assess the entire outside area including the sandbox, climbing area, playground surfacing, fences and any other area in use by the children to ensure compliance with state and federal health and safety requirements. This is done by using the "Outdoor Health and Safety Checklist".

If there are hazards on the playground, the Site Supervisor must:

- Assess what needs to be done immediately to fix the hazard. If he/she is unable to fix the situation immediately, he/she must make alternate space for the children until the situation is fixed.
- Report the hazard to his/her immediate supervisor.
- Complete a Facility Work Request after receiving approval from the Site Supervisor.

- In centers with infants, toddlers and preschoolers, the age groups must be kept separated at all times.

## **ii. Children Centers-Indoor Environment**

The indoor space must meet applicable state and federal regulations at all times. Each morning, the opening staff member(s) must conduct an indoor health and safety check to ensure the facility is ready for children.

## **iii. Infants Environment**

The indoor and outdoor spaces for infants must be separate from areas for children of differing ages. Inside it can be a separate room or separated by moveable walls or partitions that have correct square footage in each area. The moveable walls or partitions must be at least four feet high, made of sound absorbing material and designed to minimize injury to infants.

The calculation of the indoor space does not include the space used by cribs. The sleeping area must be physically separate from the activity area. This can be accomplished by having a separate room or with the partitions described above.

## **2. Building Security/Alarms and Maintenance**

### **i. Building Closure**

Procedures are established at each site based on the whether they have an Electronic Access System and/or Building Security Alarm. Each site and the administrative office is responsible for developing and enforcing a building opening and closing procedure. The Site Supervisor or senior staff member is responsible to see that all appropriate staff are informed and trained on the procedure of locking the building and arming the alarm (if applicable). Information on how to contact the alarm company and who to contact for after hour emergencies is posted on the alarm panel.

### **ii. Building Security Alarms**

Building security alarms are turned on by assigned staff when leaving the site at the end of the day and turned off at the beginning of the day. Assigned staff may not share individually assigned alarm codes unless it's an emergency situation. If there are problems with arming or disarming the system, staff must call the alarm monitoring company at the phone number shown at the arming station. If assistance cannot be provided over the phone, an alarm technician will be sent to the site. If error codes are present but the system is functioning, staff should submit an electronic work order to Facilities stating the error code.

The Security system performs a self-test and displays a trouble code for any required maintenance on a daily basis. An emergency contact list is provided to the alarm monitoring company of staff to contact in case of an alarm being triggered after hours.

### **iii. Fire and carbon monoxide monitoring systems**

Fire and carbon monoxide monitoring systems are tested annually by the Public Works staff and inspection reports are kept on site. Any identified deficiencies must be repaired and pass re-inspection. Repair work orders are submitted electronically to Facilities by the Site Supervisor along with a copy of the Fire Inspection Report on the day of the inspection.

Trouble codes are sent from the alarm system to the monitoring company which alerts the fire department. When the alarm sounds, staff must evacuate the building to the designated evacuation area and wait for emergency personnel.

### **iv. Exterior door alarms**

Exterior door alarms are located at the top of the door(s) and are to remain active in the “On” position at all times. Alarms can be over-ridden by the use of a key that turns the alarm to the “Off” position and allows access to and from a classroom.

The Site Supervisor will submit a work order to Facilities the same day as problems occur, for example the alarm not sounding when the door is opened without turning the key to the “Off” position. The exterior doors alarms are battery operated and beep when a battery becomes weak. Facilities Building Services Workers will replace batteries within 24-hours of receiving a work order request notifying them of a low battery alert.

The Safety Officer performs a test of exterior door alarms as part of the monthly health and safety checklist and all problems are reported to Facilities immediately through submission of an electronic work order request.

### **v. Alarmed Push Bars on Half-doors**

Alarmed push bars on half-doors are located in building entrances and must be armed at all times. The Safety Officer tests all half-doors in the facility as part of the monthly health and safety checklist and all problems are reported to Facilities immediately through submission of an electronic work order request. The Site Supervisor will submit a work order the same day as problems occur, for example when the alarm doesn’t make a sound when opening the door and pressing on the bar, or if the alarm does not reset after the door is closed. A half door that is armed will show a red light on the alarm panel. No light or a green light indicates the alarm is not set.

To activate the alarm: the key is turned to the off/green light position, staff waits 30 seconds, and then turns to the on/red light position. Keys to the doors are to be kept out of the reach of children at all times and in a discrete location from visitors. Staff is to demonstrate proficiency in arming the system. Facilities staff will review and provide training on arming the doors upon request.

Centers with alarmed push bars on playground gates are to include the testing of the gates in the monthly Health and Safety checklist. Playground gates do not have alarm panels with lights and are armed at all times.

### **vi. Electronic Access Card Systems**

Electronic access card systems on exterior entry doors maintain the security of the facilities by

limiting access. Staff is issued electronic access cards to sites that work like electronic keys. Exterior doors remain locked from the outside while allowing staff access with their electronic card. The cards are also printed with staff names and photos to be used as identification cards. If an electronic access card is lost or stolen it will be promptly deactivated to maintain the security of the facility. Repairs to access card systems are rarely needed and are made when issues are reported by the Site Supervisor to the Facilities unit through an electronic work order request.

#### **vii. Keys**

Keys for entry to the Community Services Bureau buildings will be furnished by Business Systems per the request of the Site Supervisor or employee's supervisor.

At the time of the issuance of keys, the employee will be requested to sign the Portable Media/Access Policy and key sign out sheet.

Upon receiving access to any of the site keys, the staff member is responsible for safe keeping the key and its use as well as to ensure that all building doors are secured prior to leaving the building. Keys are not to be loaned or made available to others and any lost or stolen keys should be reported to Business Systems immediately. For more information, refer to the Portable Media/Access Device Policy.

#### **viii. AiPhone (Video/intercom) Systems**

AiPhone systems are used at some sites to allow staff to easily allow access to families while keeping the facility secure. Visitors to a center press the buzzer outside the entrance and are greeted over the intercom, when they are visually identified the door is unlocked.

#### **ix. Video Surveillance Systems**

Video surveillance systems operate 24 hours a day 7 days a week. The Site Supervisor monitors the surveillance cameras daily and confirms cameras are directed to show a clear unobstructed view of the classrooms, entrances and playgrounds. Any obstructions to the view or misdirected cameras are reported to Facilities through an electronic work order request by the site supervisor the same day as they occur. The Facilities staff will check the video feed from their location and report the problem immediately to Public Works. The facilities unit will work with Public Works to make any necessary repairs within 24 hours of the reported problem.

Requests for video footage are made to Facilities by the Site Supervisor or senior management staff through an electronic work order request. Requests must be made as soon as possible as the system only retains footage for up to a week.

### **3. Acquiring Space**

The Policy Council must be consulted on the location of space acquired for the program's use. The space acquired must meet all applicable local ordinances for both classroom and office use. Additionally, all space acquired for classroom use must meet all the state and federal regulations. Negotiation of leases is delegated to Contra Costa County Lease Management and lease costs must be within budgeted amounts designated for such expenditures. Lease Management prepares/finalizes all leases for the Assistant Director's signature. In addition, the Business Systems

Manager or Division Manager must approve/sign all the leases negotiated for CSB.

#### **4. Use of County Facilities**

The use of county facilities is covered by the following regulations:

- County Property shall be used only for official business. No employee of the Department shall use any County Property for his or her own personal benefit.
- Use of County building space by private organizations is regulated by inter-agency agreement.
- Departmental officials may make arrangements for posting official announcements on County bulletin boards through the General Services Department. Use of County bulletin boards by private organizations for advertising, except as provided by ordinance for employee organizations, is prohibited.
- CSB program managers are responsible for County facilities and property used by employees under their jurisdiction. While controlling and administering use of space/facilities, managers must see that employees do not introduce material which others would find objectionable / offensive for reasons such as different social, political, religious, or moral beliefs.
- Solicitation of contributions and sale of merchandise within County buildings except for purposes authorized by the Board of Supervisors is prohibited.
- Restrooms and lounge facilities are provided for employee use.
- CSB classrooms and offices are not to be used as lunch or coffee rooms.
- All facilities serving children must meet applicable state and federal regulations pertaining to health, safety, and developmentally appropriate practice.

#### **5. Document Posting**

Before classes begin each program year, the Site Supervisor obtains and assures the proper posting or filing of the following documents at each facility and/or classroom:

- Evacuation Plan
- Fire / Earthquake Drill Schedule
- Emergency Guidelines for Illness and Accident First Aid Manual
- Emergency phone numbers for fire, police, paramedics, nearest emergency hospital, poison control center, physician, and administrative office
- Parents' Rights Form
- Children's Rights Form
- No Smoking signs
- Employee Safety Policy Statement
- Current license
- Any other document mandated by the state or federal government.

Note: Children's contact numbers are never to be posted.

#### **6. Safety Officer**

For each building which houses CSB personnel, a safety officer has been designated. General responsibilities of safety officers are to:

- Complete a monthly health and safety checklist.
- Instruct co-workers in emergency procedures.
- Assist the Supervisor/Manager in charge during an emergency.
- Keep track of persons assigned to each building.
- Know the conditions under which a building should be evacuated.
- Know what procedures/equipment is available for the evacuation of handicapped persons.
- Know the location of all primary and alternate building exits and know direct routes to each exit.
- After evacuating a building, search to make certain all individuals have left.
- When emergency responders arrive, report to them any injured person requiring special attention.
- Call roll at the evacuation assembly area and report missing persons to emergency responders.
- Know the location of all fire alarms and fire extinguishers.
- Know how to operate fire extinguishers.
- Know the location of all the first aid and emergency kits.
- Know first aid and CPR.

### C. Use of Technology

CSB utilizes a variety of technology throughout the bureau and is supported by the Contra Costa County Department of Information Technology.

#### 1. Child Location Observation Utilization Data System (CLOUDS)

CSB uses CLOUDS as its management information system. Staff are required to keep the system up-to-date in accordance with their respective roles in the organization. These roles are detailed in these policies and procedures in each service area. In addition, teachers are responsible for ensuring that parents sign their child in and out electronically. Manual systems are in place for back-up purposes.

##### i. User Support

CLOUDS user manuals are posted on the CSB intranet and in the Shared Drive (x:\CLOUDS) that details how to use the system. In addition, training is provided in an ongoing fashion via user groups. New staff is assigned a mentor user to orient them to the system.

##### ii. Ongoing System Enhancements

All system enhancements must be requested via the content area expert for the respective portion of the system. Content area experts formally request the enhancement to be placed in the project queue via the CSB Help-Desk System (Track-It). Enhancement requests must include attachments with screen shots and indicate the level of priority with a justification for the priority level. The Business Systems Manager will evaluate all requests and notify requestor of the final decision regarding placement in the project queue. As enhancements are developed, content area experts are required to test them and then to inform staff regarding proper usage of enhancement. User manuals will be updated with finalized enhancements by the vendor.

### D. Equipment and Supplies

County property, equipment and supplies shall be used for official business purposes only. No employee of the Department shall use any county property for his or her own personal benefit.

## **1. Procedures for Ordering Materials - Employees and Supervisors**

### **i. General Description**

An employee or supervisor has alternatives for obtaining non-emergency material or services:

- Office Supplies - Approved ordering staff at each location prepare an on-line order form. CSB has an approved shopping list of discounted items that should be utilized whenever possible. Items can be added from the general catalog if they are not on the approved list. The completed order is sent electronically to the Assistant Director/Program Manager for approval and submission to the office supply company. Ordering staff can track their order progress online.
- Classroom Supplies – Requests for classroom supplies are sent from the Site Supervisor to their Assistant Director for approval. The designated Assistant Director orders classroom supplies for all sites.
- Health / Janitorial Supplies – All health and janitorial supplies may be ordered on an online Supply Order Form. Supply orders should be completed on a monthly basis by the Site Supervisor and are approved by the Assistant Director. The order is then sent electronically to the Purchasing Unit for processing.
- Open Purchase Order - The County has established a number of Open Purchase Orders (POs) with vendors in the area authorizing certain persons to pick up material and charge it to the CSB account.
  - If you wish to order materials from these vendors, submit a purchase requisition to your supervisor for approval of the Assistant Director. If approved, it will be forwarded to a person authorized to purchase material under the Open PO by credit card or other arrangement. If an order is over \$5,000 it must be signed by the Division Manager.
  - After the purchase is made, the requisition and the vendor's receipt will be forwarded to the CSB Accounts Payable Unit. When the bill is received, the Accounts Payable Clerk will match it to the approved requisition and receipt prior to payment. CSB has established Open Purchase Orders with many vendors. A current list can be obtained from Fiscal. If you are making a large number of purchases from a vendor that does not have an Open PO you may request that one be established by contacting the purchasing clerk.

CSB Requisition: If there is no Open PO available for the material required, you must submit an approved CSB purchase requisition to your division's purchasing clerk. After a purchase is made, the requisition and packing receipt must be forwarded as soon as possible to CSB Accounts Payable Unit. When the bill is received the Accounts Payable Clerk will match it to the approved requisition and receipt for payment.

### **ii. Purchasing Procedures - Purchasing Clerks**

Purchasing clerks are located in the CSB Administrative Office and are responsible for processing

all department requisitions. Once the purchasing clerk receives a CSB requisition he/she has several options of procurement methods depending on the situation. Below is a description of the methods available to the purchasing clerk.

- Warrant Request - CSB can normally use a Warrant Request to purchase items with a total cost under \$500. This form needs to be signed by the requester and an authorized manager. This procedure is faster than a purchase order as it does not need to be processed by County Purchasing.
- CSB cannot use a Warrant Request to purchase any item that can be purchased using an open purchase agreement. In addition, the following items cannot be purchased using a warrant request:
  - Furniture
  - Printing Services
  - Appliances
  - Professional Services
  - Cellular Telephones
  - Building Related Charges
- County Requisition (Form REQ) - For vendors not having an Open PO, or not qualifying for a Warrant Request, items are purchased using an approved Purchase Order. The purchasing clerk completes a County Requisition form based on the submitted requisition form and forwards it to the General Services Purchasing Division for preparation of a Purchase Order.

There is no dollar limit for a Purchase Order however it can be an extensive process as it may have to go through the County's procurement process and involve soliciting competitive bids and awarding of the contract to the lowest qualified bidder depending on the dollar amount of the proposed contract. It should be noted that, when time is critical, CSB might ask the Purchasing Division for a PO number. If they agree, CSB is allowed to make the purchase without the normal process.

- Equipment Definition: purchase of equipment must adhere to both Grantee policies and guidelines outline in the Contra Costa County Head Start Administrative Manual. (For local purposes, "equipment" is defined as any purchase costing \$5,000 or more.) Any equipment/equipment purchase not identified in the annual grant (or subsequent applications) must receive Policy Council, Regional, and Executive Director's approval. Such requests must be made prior to the end of the Head Start fiscal year (by December 31<sup>st</sup> of each year). Equipment funded in part or wholly through CA Department of Education must have prior approval on any single item of \$5,000.
- Supplies: Supplies purchased for CSB programs must be deemed necessary and appropriate by the Bureau Director. (The process for expenditures of funds for supplies is outlined in the procurement procedure on file in the fiscal office. It must be followed.) All expenditures of funds must be approved by the Program Director.

## **2. CSB Equipment, Toys, Materials, and Furniture**

### **i. General Description**

CSB sites must provide clean sheets and blankets for children's use at naptime and they are to be washed each week or as needed. If there are not sufficient sheets and blankets, the Site Supervisor must notify the Assistant Director immediately.



All play structures and equipment used by the children must meet the following requirements:

- Age and developmentally appropriate.
- Maintained in good condition.
- In sufficient quantity to allow full participation.
- Free of health and safety hazards.
- Free of toxic substances.
- If any material in the environment does not meet the above standards, it must be removed immediately or deemed off limits to the children until it can be safely removed.

**ii. Infant Furniture**

- The infant equipment and furniture, inside and outside, must be developmentally appropriate and includes cribs, cots or mats, changing tables and other necessary equipment. The type, height, and size of all furniture and equipment must be age appropriate. There must be a variety of age appropriate washable toys and equipment.
- CSB does not use swings, playpens, walkers or high chairs. Walkers may not be kept on the premises. Equipment that is assembled when purchased must not be modified, and if assembly is needed, it must be assembled according to the manufacturer's instructions.
- Supplies containing toxic materials or substances shall not be purchased and used on the centers.
- All equipment and furniture must be maintained in good repair, safe condition and disinfected after each use. Equipment must be safe and must not have sharp points or edges or splinters, or be made of small parts that can be swallowed.
- Toilets and hand washing sinks must be in close proximity to the activity areas.

Infant changing tables must:

- Have a padded surface no less than one-inch thick and be covered with washable vinyl or plastic
- Have raised sides at least three inches high
- Be maintained in good repair and safe condition
- While in use, be placed within arm's reach of a sink
- Not be located in the kitchen/food-preparation area

Toy storage containers must meet the following requirements:

- Lids and the hardware used to hinge lids on boxes or chests must be removed
- All edges and corners must be rounded and padded

- The container must be well ventilated
- The container must be lockable
- The container must be maintained in good repair and safe condition
- Metal and wood boxes must not have sharp or splintery surfaces

Pacifiers must have a shield or guard large enough that the child cannot choke. Rattles must be large enough that they cannot become lodged in the infant's throat and constructed so that they will not separate into small pieces.

It is recommended that all infant sites comply with the US Consumer Product Safety Commission advice for the selection and safe use of children's toys. Avoid toys with small parts. Look for the age recommendation on labels. Toys should be suited to the skills, abilities and interests of children.

### **iii. Infant Napping Equipment**

Each crib, mat or cot must be occupied by no more than one infant at a time.

For each infant who is unable to climb out of a crib, a standard size crib meeting the following requirements is provided:

- Slats must be no more than 2 and 3/8 inches apart.
- Tiered cribs are not allowed.
- Cribs must not limit the ability of the staff to see the infant.
- Cribs must not limit the infant's ability to stand upright.
- The mattress must be at its lowest position.
- Cribs will have stationary sides.

Crib mattresses must be:

- Covered with vinyl or similar moisture resistant material.
  - Wiped with disinfectant daily when soiled or wet.
  - Maintained in a safe condition with no exposed foam, batting or coils.
  - Bumper pads must not be used at CSB facilities.
- 
- Each infant must have his/her own bedding used solely for him/her. It must be replaced when wet or soiled or when it is to be occupied by another infant.
  - Bedding must be changed daily or more often if required, and placed in a container that is inaccessible to children.
  - Floor mats or cots must be provided for all infants who have the ability to climb out of a crib.

- Cribs, mats or cots must be arranged so that the staff can reach each infant without having to step over or reach over any other infant. Placement must not hinder going in and out of the nap area.

### **3. Use of County Communication Services**

#### **i. General Description**

Communication services are provided for the use of County employees for work-related communications. For example:

- The telephone system is provided for the use of Contra Costa County employees in the conduct of their assigned duties. (See EHSD & CSB Internet/Email/IT Standard Usage Policies)
- Contra Costa County provides a message service (to forward written material and small packages among various County facilities on a regular route and time schedule). Each work site served posts the time of pickup and delivery; this service is to be used where available (Supervisors have further information regarding this program).
- The Contra Costa County Public Works Department provides a centralized United States Postal Service operation. All mail must be processed through this Center (except for emergency situations). Materials to be mailed may be submitted through Messenger Service.
- The department pays for all postage charges, but receives reduced costs for bulk and ZIP code mailings. Contra Costa County's Postal Service is provided for office use of County staff. It is not to be used for personal benefit of employees or the public (Supervisors may be contacted for rules and Regulations regarding United States Postal Services).
- Fax machines are available for Contra Costa County use. Telephone numbers for fax machines are listed in the Inter-Office Telephone Directory. CSB implemented the use of E-fax, faxes received and sent by email, and paperless faxing through copiers to switch to paperless faxing.

#### **ii. Portable Communication Devices**

Smart phones, two-way radios, tablets, laptops and wireless modems (collectively referred to as portable communication devices) are utilized by CSB to allow management personnel to stay in communication when away from their primary office, when traveling on business, and in emergency situations. Portable communication devices are county property and are covered under the same requirements as other county property.

Employees are responsible for the security of communication devices and are to report lost, damaged or malfunctioning devices to their supervisor as soon as possible after discovery.

- Employees are responsible to ensure the confidentiality and security of information contained on or obtained through communication devices.
- All communication on the device is considered county business and as such is not considered personal or private.
- Voice messages, text messages, e-mails, photos and other methods of communication or storage of information can be reviewed at any time by appropriate county personnel. This includes call, data and text logs.
- Communication devices are to be used for county business only. Inappropriate use of county property, including the personal use of communication devices that cause excess use charges to be incurred whether reimbursed or not, can result in loss of privileges to use county property.
- Communication devices are to be used only by the county employee they are assigned to. If devices are to be used by more than one authorized employee they will be assigned to specified employees for a defined time period before reassignment to other employees. (Sites make assignments on the Equipment Check-out Log).
- Use of a device for texting while driving, whether in a county vehicle or personal vehicle on county business, is prohibited by state law. Phone calls made or received while driving are strongly discouraged, but are allowed only if possible with the safe use of hands-free devices.
- CSB is required to submit reports on the use of the devices to DoIT and the CAO. The reports will contain information specific to each device, including any use of a device that caused additional charges to be incurred, and confirmation of reimbursement of those charges.
- As with all county property, each communication device (including accessories) is to be returned upon change of position or separation of employment.

Two-Way Radio: In the event of an emergency such as natural disasters, storms and other emergency situations where normal methods of communication are disconnected and all else fails, the use of the two-way portable radios as a primary communication option is a must. Two-way radios have played a vital role as the most reliable form of communication, which is why it is primarily used by the military, law enforcement and other emergency personnel.

In the event of an emergency, a transmission will be relayed county wide to all centers from the Administrative office at Civic Court. A "roll call" will be conducted along with center status checks. In some cases, there could be an emergency/event only affecting one particular area of the county. If this is the case, certain centers may be directed to switch to a secondary channel to transmit (our radios have a primary and secondary channel).

Please refer to the "Two-Way Radio Guideline" on the CSB Intranet Resource Center under the "Facility Guidelines" folder for information on how to utilize the radios.

### E. Vehicle Usage Policy

## 1. General Procedures

CSB maintains vehicles for use by authorized personnel in order to conduct official County business. Policies on the use and operation of vehicles on County business also apply to driving personal vehicles while on County business. Vehicles are reserved through designated clerical staff or vehicle reservation calendars. In an effort to ensure that CSB vehicles are kept in top condition, the following procedures must be followed.

- County vehicles can only be used by authorized employees while conducting county official business.
- Authorized drivers must have a valid California Driver's license.
- Authorized drivers are to immediately notify their supervisor of any change in the status of their California Driver's license.
- County vehicles are to be used only for authorized county business.
- Drivers are responsible for safe driving, including parking in a well-lit area, and locking the vehicle at all times.
- Drivers are to be courteous and practice defensive driving and fuel conserving practices.
- Authorized drivers are to observe all traffic rules and regulations.
- Carpooling in county vehicles is strongly encouraged when multiple employees are attending the same business function.
- Employees are prohibited from carrying unauthorized riders while on county business.
- Moving, parking and toll violations are the personal responsibility of the driver.
- No smoking is allowed in county vehicles.
- While the vehicle is in operation no eating or drinking is allowed.
- Cell phones and other hand held devices are not to be used while operating a vehicle, unless:
  - The device is secured in a mounting system to the dashboard (including air vents) or windshield (placed in one of two positions on the windshield - in the lower left or right hand corner).
  - Can be operated by tapping or swiping the screen with one finger.
- All persons driving or riding in a vehicle are to be properly secured with the use of seat belts or other approved restraint systems.
- Vehicles are to be returned free of trash or other debris.
- Car seats and other cargo should be secured in the cargo area of the vehicle so that they will not become projectiles in case of a sudden stop or accident.
- Drivers are to wear appropriate footwear, no backless or loose sandals.
- Vehicles are to be returned with a minimum of a half tank of fuel.
- County vehicles are to be fueled regularly at the County Fleet station or other approved facilities.
- The County credit card is to be used exclusively for purchasing gasoline at authorized fueling centers. (See list of centers and addresses in the vehicle binder fuel tab.)
- If the credit card is lost it must be reported immediately to avoid fraudulent use.
- County vehicles will be serviced at the Fleet Service Center on Waterbird Way, except in after-hour emergencies.
- CSB does not use Fleet loaner vehicles. Contact the Facilities clerk for possible temporary use of another CSB vehicle if necessary.
- County vehicles are not to be taken to a personal residence without Sr. Management approval.

- Vehicle binders and keys are to be returned punctually after vehicle use.

It is CSB policy to use a county vehicle when one is available in lieu of using a personal vehicle. If a county vehicle is available it must be utilized unless a supervisor determines that the use of a personal vehicle is justified. Justification for the use of a personal vehicle is documented by the supervisor's signature on the request for reimbursement of travel expenses.

## **2. Accident and Maintenance/Repair Reporting**

Drivers are to report any accident or service need the same day as the occurrence. All accidents must be reported and the proper paperwork to be completed and submitted to Risk Management within 24 hours of the accident. Any unusual sound, odor, low fuel, maintenance light or other indication that the vehicle is malfunctioning or may need service is to be reported to the clerk when returning the vehicle binder.

## **3. Child Passenger Safety Procedures**

A child will be transported in county vehicles only if the child is fastened in an approved developmentally appropriate safety seat, seat belt, or harness appropriate to the child's weight, and the restraint is installed and used in accordance with the manufacturers' instructions for the car seat and the motor vehicle. Each child must have an individual seat belt and be positioned in the vehicle in accordance with the requirements for the safe use of air bags.

Age and size appropriate vehicle child restraint systems shall be used for children under 8 years of age, less than 80 pounds or under 4'9" tall. Vehicle restraint systems should be secured in the back seats only. Children shall ride facing the back of the car until they have reached two years of age or weigh over 40 pounds or are 40 or more inches tall. A booster child safety seat shall be used when the child has outgrown the convertible child safety seat. A vehicle seat belt can only be used when the child is 8 years of age or older, 80 pounds or 4'9" in height. The seat belt only fits properly when the lap belt lies low and tight across the child's hips (not the abdomen), touching the upper thighs and the shoulder belt lies flat across the shoulder, snugly across the mid chest, away from the neck and face. Never tuck the shoulder belt under the child's arm or behind the child's back. The child's knees should bend easily over the edge of the vehicle seat.

Staff transporting children must be aware of the following:

- The rear of the vehicle is the only place for a child to ride.
- Staff should use the diagram of the seating plan when placing children in a vehicle.
- Lap-belt only positions can only use the 5-point harness car seats.
- Shoulder and lap belt positions close to the sliding door should be last position to seat a child.
- The car seat and seat belts should be checked before each use to make sure they are installed correctly and that the belt straps are not twisted.
- Empty car or booster seats should be strapped in with the seat belt system or stowed in the cargo area away from the passengers.
- No loose items should be on the floor.

The following are child passenger safety basics for each type of car seat:

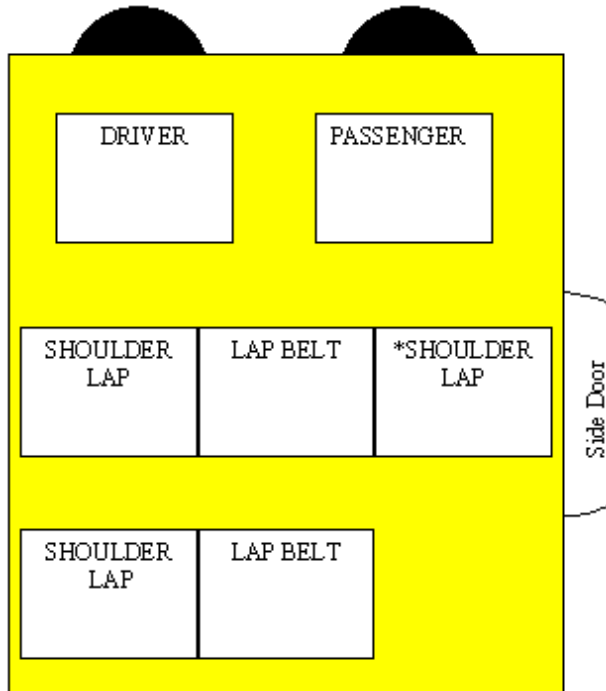
- Rear-Facing
  - Must ride rear facing until at least 2 years of age, weighs 40 pounds or is 40" tall
  - Do not bundle or swaddle; no heavy clothing
  - Harnesses at or below shoulder level
  - Harnesses snug and flat across infant
  - Retainer clip at armpit level
  - Must ride at a 45 degree angle
  - Seat secured tightly to vehicle with less than 1 inch of movement side-to-side and forward
  
- Forward-Facing
  - Children 2 years of age and 40 pounds but weighing less than 80 pounds or under 4'9" tall, ride either in a convertible or forward facing seat in the forward facing position
  - No heavy clothing
  - Harnesses above shoulder level and in reinforced slots
  - Harnesses snug and flat across infant
  - Retainer clip at armpit level
  - Generally ride fully upright
  - Seat secured tightly to vehicle with less than 1" of movement side-to-side and forward
  - Top tether in use when available and appropriate
  
- Belt Positioning Boosters
  - For children who have outgrown the car seat but do not yet fit the adult lap/shoulder belt
  - Lap belt crosses pelvis or top of thighs
  - Shoulder belt crosses chest
  - Middle of child's head is below the top of the vehicle seat or booster

## F. Transportation

While CSB does not provide direct transportation services to and from the centers each day, the Site Supervisor or Comprehensive Services team member must assess the needs of each family upon enrollment and attempt to make reasonable effort to assist if the family is in need of transportation services to the center.

Transportation services are offered for the following:

- To / from socialization activities
- To / from Policy Council Meetings
- To / from field trip locations



- Lap Belts – use only 5-point Harness Seats. No Boosters
- Shoulder Lap with Star (\*) is the last Shoulder Harness to fill
- No loose items in the vehicle
- Unused car or booster seats are strapped in or removed from the passenger area of the vehicle.

## G. Emergency Procedures

### 1. Gas Leak/Power Outage

#### i. If you detect an odor of natural gas:

- Determine where the odor of gas is emanating from.
- Contact PG&E at (800)743-5000.
- Contact the local Fire Department.
- Evacuate the building (if you feel there is an immediate threat to children and staff).
- If the gas odor emanates from outside the building, close all windows and doors and remain inside.
- Contact your Supervisor and Facilities.

#### ii. Power Outage:

- Have your flashlight ready to move through darkened areas.
- Contact PG&E at (800)743-5001.
- Contact your Supervisor and Facilities.

### 2. Shelter in Place

In the event of a chemical release, safety sirens in Contra Costa County's industrial corridor will sound to alert the public. If you hear the sirens, or are told to Shelter-in-Place, emergency officials recommend that you Shelter, Shut and Listen:



- Stay inside.
- Close all windows and secure doors (locking provides a tighter seal).
- Close the center.
- Post the Shelter-In-Place notification sign on the front of the building or Suite doors.
- Children, staff and any visitors are to remain inside the building\*.
- Turn off all ventilation systems such as heating or air conditioning.
- If there are gaps in windows or doors, seal with tape or damp towels.
- Have an AM radio for emergencies and tune to KCBS, 740 AM for more information.

\*No one (with the exception of First Responders) will be allowed to enter or exit the building until the Shelter-in-Place is lifted

### 3. Earthquake

You cannot tell from the initial shaking if an earthquake will suddenly become intense, so always Drop, Cover and Hold On immediately (Center staff must assist children first)!

- DROP to the ground (before the earthquake drops you!).
- COVER your head and neck with your arms and seek shelter by getting under a sturdy desk or table, if nearby.
- HOLD ON to your shelter and be prepared to move with it until the shaking stops.

- Indoors:** Drop Cover and Hold On. Avoid exterior walls, windows, hanging objects, mirrors, tall furniture, large appliances, and kitchen cabinets with heavy objects or glass. However, do not try to move more than 5-7 feet before getting on the ground. Do not go outside during shaking! The area near the exterior walls of a building is the most dangerous place to be. Windows, facades, and architectural details are often the first parts of the building to break away.
  - If you are unable to Drop, Cover, and Hold on: If you have difficulty getting safely to the floor on your own, get as low as possible, protect your head and neck, and move away from windows or other items that can fall on you.
  - In a wheelchair: Lock your wheels and remain seated until the shaking stops. Always protect your head and neck with your arms, a pillow, a book, or whatever is available.
- Outdoors:** Move to a clear area if you can safely do so; avoid power lines, trees, signs, buildings, vehicles, and other hazards.

### 4. Fire

- If a fire occurs, GET OUT, STAY OUT, and CALL FOR HELP:**

- Remain calm.
- If you smell smoke, activate a fire alarm.
- Follow exit route and evacuation procedures for your center/office. Make sure to feel the door before opening it. If it is hot, do not open it, look for an alternate exit. If there is none, remain in the room and call for help. Close the door on your way out to help isolate the fire.
- Center staff must sweep the area and ensure all children are evacuated.
- Assist all children and those who are unable to exit the building on their own if it will not put yourself at additional risk.
- Do not use elevators.
- If the area you are in fills with smoke, drop to the floor and crawl to the nearest exit or smoke-free area.
- If your clothes catch on fire, immediately STOP, DROP, and ROLL.
- Once you are in a safe area, call for help

**i. You should only attempt to fight a fire if the following conditions exist:**

- If the fire is small and contained.
- You are safe from toxic smoke.
- You have a means of escape.
- Your instincts tell you it is safe.

**ii. You should flee a fire if:**

- If the fire is spreading rapidly or is a large fire.
- You are unsure of how to operate the extinguisher.
- The extinguisher runs out of agent.
- The fire could block your escape route.

## **5. Severe Weather**

**i. Heat Wave Safety Tip:**

Elderly persons, small children, chronic invalids, those on certain medications or drugs (especially tranquilizers and anticholinergics) and persons with weight and alcohol problems are particularly susceptible to heat reactions, especially during heat waves in areas where a moderate climate usually prevails. The following safety tips are recommended:

- Slow Down, strenuous activities should be reduced, eliminated, or rescheduled to the coolest time of the day.
- Individuals at risk should stay in the coolest available place, not necessarily indoors.
- Limit sun exposure between 10am and 4pm. Play in the shade, if at all possible. Keep babies under six (6) months of age out of direct sunlight.
- Dress for summer. Lightweight light colored clothing reflects heat and sunlight, and helps your body maintain normal temperatures.

- Drink plenty of water or other non-alcohol fluids. Your body needs water to keep cool. Drink plenty of fluids even if you don't feel thirsty. Persons who (1) have epilepsy, or heart, kidney, or liver disease, (2) are on fluid restrictive diets or (3) have a problem with fluid retention, should consult a physician before increasing their consumption of fluids.
- Spend more time in air-conditioned places. Air conditioning in a home and other buildings significantly reduces danger from the heat.
- Don't get too much sun. Sunburn makes the job of heat dissipation that much more difficult. Wear sunscreen and reapply per the manufacturer's directions.

**ii. Lightning Storms:**

- When thunder roars, go indoors!
- Stay away from windows and doors.
- Avoid water, high ground, trees, open spaces, metal objects and find shelter in a building.
- Avoid electronic equipment of all types; lightning can travel through electrical systems.
- Avoid corded phones, however, cordless or cellular phones are safe to use during a storm.
- Avoid concrete floors and walls.
- Wait at least 30 minutes after hearing the last clap of thunder before leaving your shelter.
- Call 9-11 if a person has been struck by lightning.

**iii. Flood:**

- Do not walk through moving water. Six inches of moving water can make you fall.
- Never try to walk, swim, drive or play in flood water. You may not be able to see how fast the flood water is moving, see holes or submerged debris.
- Beware of low spots, such as underpasses, underground parking garages, and basements as they can become death traps.
- Beware that flash flooding can occur. If there is any possibility of a flash flood, move immediately to higher ground. Do not wait for instructions to move.
- Beware of streams, drainage channels, canyons, and other areas known to suddenly flood

**6. Active Shooter:**

**i. Administration Office:**

- Be aware of your environment and any possible dangers.
- Take note of the two nearest exits in any facility you visit.
- If you are in an office, stay there and secure the door.
- If you are in a hallway, get into a room and secure the door.
- As a last resort, attempt to take the active shooter down.
- CALL 9+911 or 911 WHEN IT IS SAFE TO DO SO!
- Quickly determine the most reasonable way to protect your own life. Remember that customers and clients are likely to follow the lead of employees and managers during an active shooter situation.

- RUN/ESCAPE: If there is an accessible escape path, attempt to evacuate the premises.
- HIDE OUT: If evacuation is not possible, find a hiding place.
- TAKE ACTION/FIGHT: As a last resort, and only when your life is in imminent danger, attempt to disrupt and/or incapacitate the active shooter.

## ii. Childcare Centers:

Initiate a lockdown: The purpose of a lock down is to keep children and staff inside the building, by securing them inside a classroom or other secure safe are, due to an immediate threat in or around the center.

- Remain in the classroom, locking all entry doors if you have the ability to do so
- Tie down the door handle(s), if possible, using belts, purse straps, shoe laces, etc.
- Turn off all lights
- Cover the windows if possible
- Create a barricade at the main entry door with anything available (desks, chairs, rolling cabinets, etc.)
- Stay clear of any doorways and windows
- Try and keep as many barriers between you and any doors and windows
- Move children to the safest location in the room
- Drop and Cover (Lay as flat as you can, while covering your head)
- Silence or place your cell phones on vibrate
- No one is allowed to enter or exit any safe areas, until the “all clear” is issued by the Site Supervisor or law enforcement

## 7. Acts of Violence

If you witness an employee or customer threatening violence or becoming overly agitated because of a problem, alert a supervisor immediately. If the person becomes physically menacing, call 9+911/911 or signal for a coworker to make the call.

- Remain calm
- If someone threatens you with a weapon, remember that the person hasn't decided to use it yet. They are probably as scared as you are. Remain clam. You might look like the person that is in control. If you panic it might aggravate the situation.
- Be courteous and patient
- Listen attentively and follow the instructions of the person with the weapon.
- Plan an escape route
- Try to stay as far away from the person as possible. Pay close attention to your surroundings. Plan an escape route in case the situation becomes more serious.

## 8. Serious Injury & Illness at work

All serious injuries\* and illnesses incurred by a County employee or a contractor while on a County site or work assignment, must be reported to Cal/OSHA. (\*This includes illnesses that may not be work-related)

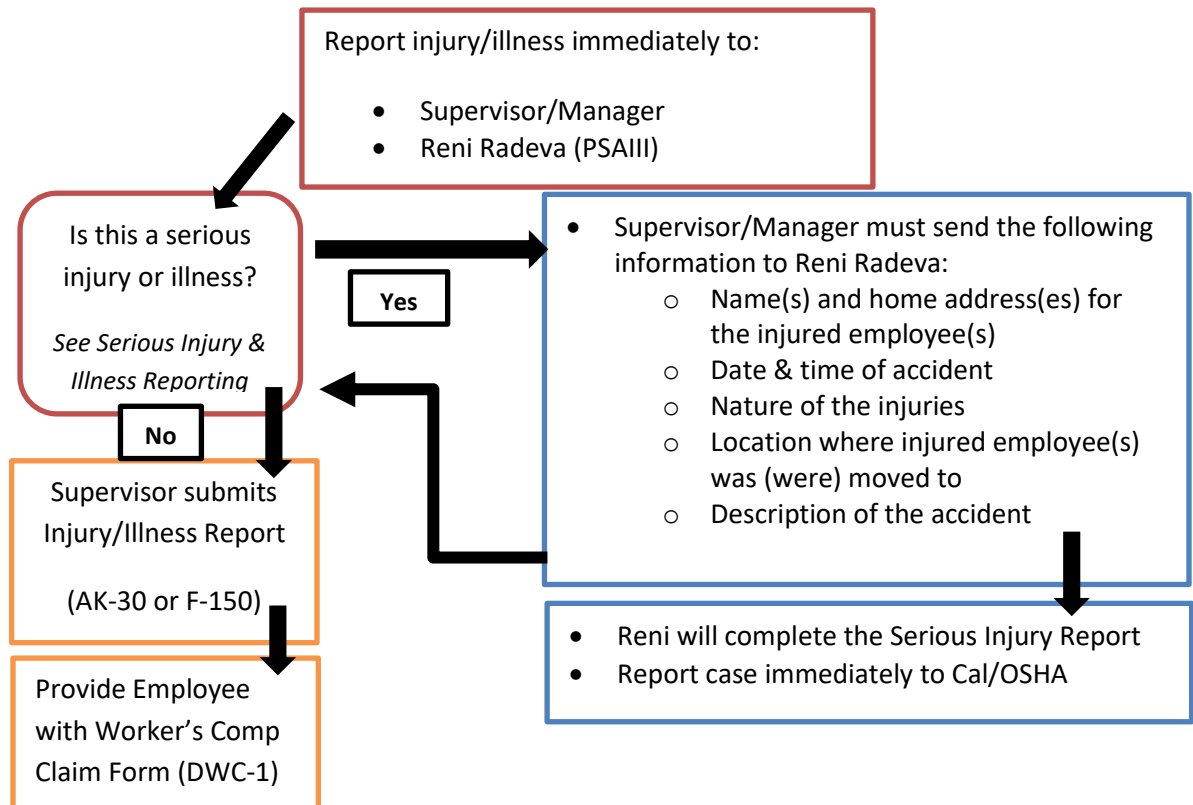
Follow the Injury and Illness Reporting Procedure below. Notify your Supervisor and Reni Radeva, PSA III. Immediately means as soon as practically possible, but no longer than eight (8) hours after the employer learns of the incident.

Serious Injury or Illness includes:

- Fatality, the loss of any member of the body, or any serious degree of physical disfigurement.
- Any injury or illness which requires inpatient hospitalization for a period in excess of twenty-four (24) hours for treatment other than medical observation.
- Any minor injury or illness which becomes a serious injury.

Note: If an employee goes to the hospital directly from work or an AMBULANCE responds to the site, closely monitor the situation and use the Serious Injury Decision Tree to see if a Cal/OSHA report is needed.

Injury and Illness Reporting Procedure



### 9. Dental Emergency:

i. In the event of an accident to the tongue, lips, cheek or teeth:

- Attempt to calm the child.

- All incidents should be handled quietly and calmly; a panicky child may cause further trauma.
- Check for bleeding. If the child is bleeding:
  - Stop bleeding by applying pressure to area;
  - Wash affected area with clean water;
  - Apply ice for swelling.

If tooth is knocked out, fractured, chipped, broken or loose:

- Staff should calm the child;
- If injured area is dirty, clean gently;
- Place cold compresses on the face in the injured area to limit swelling;
- Take the child to a dentist immediately for treatment.

If a tooth or teeth are loosened in an accident:

- Rinse out child's mouth;
- Do not attempt to move teeth or jaw;
- Take the child to the dentist immediately.

If tooth is knocked into gums (intruded):

- Do not attempt to free or pull on the tooth;
- Rinse out the child's mouth;
- Take the child to the dentist immediately.

If injury to tongue, cheek, or lips occurs:

- Rinse affected area;
- Apply ice to control swelling;
- Place cold compresses on the face in the injured area to limit swelling;
- Take the child to a dentist or physician if bleeding continues or wound is large.

ii. Miscellaneous: In the event of any other soft tissue injury, as in the case where the tongue or lips become stuck to an object and the tissue tears:

- Stop the bleeding;
- Cover the area with sterile petroleum jelly;
- Take the child to a dentist or physician.

## 10. Adult or Child Choking

### i. Mild Obstruction

- With a mild airway obstruction, the person is able to cough forcefully or even speak. Do not interfere. If the person can speak, he/she can breathe.
- Treatment:
  - Ask the person, "Are you choking?"
  - If the person can cough forcefully or speak, do not interfere.
  - Encourage coughing until the obstruction is relieved.
  - Monitor for progression to a severe obstruction.

**ii. Severe Obstruction**

- A person with a severe obstruction cannot breathe, cough effectively, or speak. He/she may make a high-pitched sound when inhaling or turn blue around the lips and face. Act quickly to remove the obstruction, or the person will soon become unresponsive and die.
- Ask the person, “Are you choking?”
- If he nods “yes” or is unable to speak, tell him you are going to help. Do not leave the person.
- Stand behind him and reach under his arms.
- Make a fist with one hand and place it just above the navel, thumb side in. Grasp the fist with your other hand.
- Perform quick, forceful inward and upward abdominal thrusts until the object is expelled or he becomes unresponsive.

**iii. Unresponsive Choking Person**

When a choking person becomes unresponsive, carefully lower the person to the ground. Use CPR to relieve the obstruction.

- Send a bystander to call 9-1-1.
- If alone with an adult victim, go call 9-1-1 yourself, then return to perform CPR.
- If alone with a child victim, call 9-1-1 after 2 minutes of CPR.
- Perform CPR with the added step of looking in the mouth after each set of compressions. If you see the obstruction, remove it and continue CPR.
- Continue CPR until the person begins to breathe normally.

**Chest Thrusts:**

- Chest Thrusts – Large or Pregnant Person
- If a rescuer cannot reach around the waist of a large person, or the victim is obviously pregnant, use chest thrusts to relieve the obstruction.
- Place one fist in the middle of the chest on the lower half of the breastbone, with your thumb against the chest.
- Grasp the fist with your other hand.
- Pull straight back on the chest quickly and forcefully.
- Continue until the object is expelled or the victim becomes unresponsive.

**BOARD OF SUPERVISORS OF CONTRA COSTA COUNTY,  
CALIFORNIA**

**Adopted this Order on July 13, 2023 by the following vote:**

**AYES:**

**NOES:**

**ABSENT:**

**ABSTAIN:**

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**RESOLUTION NO. 2023/498**

**RESOLUTION OF THE BOARD OF SUPERVISORS ESTABLISHING THE FORMAL  
PROCESS FOR RESOLVING COMPLAINTS INVOLVING THE CONTRA COSTA  
COUNTY HEAD START PROGRAM**

The Contra Costa County Board of Supervisors resolves as follows:

The formal process for resolving complaints involving the Contra Costa County Head Start program is established by the Board of Supervisors as follows:

**I. GENERAL**

This policy of the Board of Supervisors establishes and describes the formal process for resolving all complaints involving the Contra Costa County Head Start program (“Program”), including the procedure for community members and Program staff to submit complaints, and process for resolving complaints involving the Director or Executive Director of the Program. This policy supersedes all complaint procedures related to the Program that are set forth in the 2019-2021 Community Services Bureau Policies & Procedures Manual approved by the Board of Supervisors on July 30, 2019 (attached as Exhibit A).

**II. RESOLVING HEAD START PROGRAM COMPLAINTS**

**A. Who May Submit Complaints and Where Complaints May Be Submitted**

1. Any community member, including a parent enrolling or applying for services, may submit a complaint involving the Program directly to any staff member located at any Program site – i.e., to any site supervisor, teacher, associate teacher, comprehensive services analyst, or clerical staff.
2. Any Program staff member may also submit a complaint involving the Program directly to their supervisor or, if the staff member believes it is appropriate, then directly to the Director or Executive Director of the Program. Program staff members will document their complaint pursuant to Step 1, below, and submit their complaint in writing pursuant to Step 2



(or a higher step, if appropriate), as set forth below. The complaint process for Program staff members set forth herein does not apply to employee grievances or complaints that are subject to any of the following: a memorandum of understanding entered into between the County and a union; the Contra Costa County Personnel Management Regulations; or a complaint filed with the Equal Employment Opportunity Office of Contra Costa County.

3. Complaints involving the Program may also be submitted to the Employment & Human Services Department Ombudsman pursuant to the Employment & Human Services Department's Ombudsman Policy (No. 23-150) (attached as Exhibit B).
4. Complaints involving the Program may also be submitted directly to the County Administrator's Office, including the County Human Resources Department, or to the County Board of Supervisors.

**B. Process for Resolving Head Start Program Complaints**

The process for resolving Contra Costa County Head Start Program complaints is as follows:

1. Step 1. When a Program staff member receives a complaint, the staff member shall immediately document the complaint in writing, and will include the following information:
  - a) Contact information of the complainant: name, address, telephone number, and e-mail address.
  - b) Information shared by complainant: When was the occurrence? Person/s involved? What happened? Where did it occur? What was the impact?
  - c) Other information that the complainant wishes to share and/or include.
  - d) For community member complaints submitted by telephone, Program staff shall include the time and date of the call, and the name of the staff member who received the call and documented the complaint.
2. Step 2. After documenting the complaint, the Program staff member will immediately contact a supervisor level employee, including the Program Site Supervisor, Division Manager, Program Director, and/or Program Executive Director depending on the nature and urgency of the complaint and the availability of the higher classifications. At a minimum, the complaint will be brought to the attention of the CSB Assistant Director within one business day of the submission of the complaint. The CSB Assistant Director will then work with Program staff to resolve the

complaint within 10 business days, including establishing corrective actions to be taken and the timeline for those actions.

3. Step 3. Complaints not resolved within 10 business days will be brought to the attention of the Director of the Head Start Program, or designee, no later than 10 business days after the original complaint submission, who will attempt to resolve the complaint, including establishing corrective actions to be taken and the timeline for those actions.
4. Step 4. If the complaint is resolved at Step 3, the Director of the Head Start Program will send a memo to all involved, stating corrective actions to be taken by staff and the timeline for these actions.
5. Step 5. If satisfactory resolution is still not achieved, the Director of the Head Start Program will request the Executive Director of the Head Start Program to review all documentation and make a determination. When the complaint is resolved, the Executive Director of the Head Start Program will send a memo to all involved, stating remedial actions to be taken by staff and the timeline for these actions.
6. Step 6. If the complaint is against the Director or Executive Director of the Head Start Program, then any staff receiving the complaint will assist the complainant in submitting the complaint to the County Administrator. If the County Administrator cannot satisfactorily resolve the complaint, including establishing corrective actions to be taken and the timeline for those actions, then the complaint will be brought to the attention of the Board of Supervisors for resolution.

### **III. TRACKING HEAD START PROGRAM COMPLAINTS**

The CSB Assistant Director will maintain a “Head Start Client Concern Log” to document and track all complaints, concerns, and resolutions involving the Head Start Program (except for complaints against the Director or Executive Director of the Head Start Program for which the County Administrator will maintain a log).

### **IV. INFORM THE BOARD OF SUPERVISORS**

The Head Start Executive Director and the Head Start Director will provide monthly updates to the Board of Supervisors on complaints involving the Head Start Program, in accordance with section III.A.2 of the Board of Supervisors’ policy establishing the formal governance structure for the Contra Costa County Head Start program.

CONTRA COSTA COUNTY EMPLOYMENT & HUMAN SERVICES  
DEPARTMENT COMMUNITY SERVICES BUREAU

# POLICIES AND PROCEDURES

SECTION 1-PROGRAM GOVERNANCE  
**2019-21**

Board of Supervisors Approved: 07/30/19

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## PART I. Program Governance

### A. Service Area

Contra Costa County Employment and Human Services Department, Community Services Bureau (CSB) is the designated Community Action Agency for Contra Costa County. CSB is the Head Start and Early Head Start Grantee for Contra Costa and also administers the California Department of Education Child Development Programs, Community Services Block Grant, Stage II/Alternative Payment Programs, Low-Income Home Energy Assistance and Weatherization Programs.

### B. Service Recipients

The Bureau's services are directed towards building self-sufficiency among the county's low-income residents and vulnerable populations. CSB serves pregnant women and children ranging in age from birth through kindergarten, individuals and families. All service recipients served under the various CSB funding streams must meet the eligibility requirements of the funding source.

### C. Program Governance

**1. The Board of Supervisors:** The Board of Supervisors (BOS) is a body of publically elected officials. Their role is to oversee the operations of county departments and to exercise executive and administrative authority through the county government and county administration. The BOS is also charged with responsibility and oversight to the Head Start and Early Head Start grants as outlined (please refer to part 8).

**2. Policy Council Composition and Formation:** The County Board of Supervisors and the Policy Council determine the total size of the Policy Council, procedures for electing parent members, and selection of community representatives.

Policy Council composition is reviewed annually to ensure it meets the General Membership guidelines of HSPS 1301.1(a); 1301.3(b)(c). Consideration is given to the number of Head Start and Early Head Start currently enrolled children along with program options (Full Day, Part Day, and Home Base). The following steps explain how to determine Policy Council composition:

- Determine the total number of Head Start and Early Head Start slots
- Determine the total HS/EHS slots for each site by program option based on the current CSB slot map (HS/Full Day, HS/Part Day, EHS/FD, and Home Base (EHS/HS collectively)). Calculate the percentage of each program option (multiply the number of program option slots for each site by the total number of slots). This will give you the percentage of membership that each option should represent.
- The number of representatives is determined using the formula  $1/60$  (1 representative per site for every 60 HS or EHS slots).

This information is included in the Policy Council By-laws approved annually by the Board of Supervisors and the Policy Council. The term for members is one year, September to August. Parent representatives will be (re)elected annually by each center's parent committee. Community representatives will be selected annually. The maximum number of one-year terms an individual can serve

is five. No grantee, delegate or childcare partner staff or members of their immediate family may serve on the Policy Council or on the Delegate Agency's Policy Committee. Immediate family is defined as any parent, child, sibling, grandparent, significant other, co-parent or spouse of staff. At least 51% of the Policy Council members must be parents of currently enrolled children.

Reimbursements are provided to parent representatives to support participation in their policy council or policy committee's meetings/activities as stated in the Policy Council Bylaws and Policy Council Handbook.

**3. Procedures for Electing Parent Representatives to the Policy Council:** The parent committees at each site will elect parent representatives as early as possible in the program year. This is done by voting at the parent meetings. Parent representatives must be parents of currently enrolled children in the program.

**4. Procedures for Electing Community Representatives to the Policy Council:** Community representatives are enlisted from the local community. They represent past parents and local community agencies. All Community Representatives must be elected by the Policy Council. Membership for Individual Community Representatives is also limited to 5 one-year terms. CFR 1301.3(d)(1)(4)

- **Past Parent Community Representatives:** The past parent representatives must submit a letter to the Policy Council requesting consideration to be a community representative. Letters are read during a business meeting, and the Policy Council must vote to approve the parent's request. If the Policy Council receives more requests than vacancies, all letters are read for consideration, the Policy Council votes, and the majority decision rules.
- **Community Agency Representatives:** The Policy Council determines which community agencies are invited to participate on the Council. Agencies are drawn from the local community and are familiar with resources and services for low-income children and families. CSB staff and Policy Council members assist by contacting agencies to seek interest in joining and requesting the name of an agency representative to be elected onto the Policy Council as early in the program year as possible. Agency representatives are presented and considered for approval by the Policy Council.

**5. Parent Committee:** The Parent Committee must carry out at least the following minimum responsibilities:

- Advise center staff in developing and implementing local program policies, activities, and services.
- Maintain communication between Policy Council and Policy Committee at the delegate level.
- Plan, conduct, and participate in informal, as well as formal, programs and activities for children, parents and staff.

**6. Policy Council Responsibilities:** The Policy Council has policy-making authority and is governed by its By-laws. Annually the Policy Council and Board of Supervisors are oriented to CSB Program Services and receive training on:

- Policy Council Roles and Responsibilities

- Program Governance\_responsibilities
- Head Start Performance Standards
- Head Start Philosophy
- Gran Cycle Process
- Share Decision Makin Process and Parliamentarian Procedures
- County code of Conduct and Conflict of Inters
- Eligibility, Recruitment, Selection, Enrollment, Attendance ERSEA

A make-up orientation is also provided for members joining later in the program year. A joint training with the Board of Supervisors is also scheduled annually.

**7. Governance and Management Responsibilities:** The following chart outlines the required Board and Policy Council Approvals:

Procedure/Plan/Application	Approval Required		Frequency of Approval
	Governing Body BOS	Policy Council	
1. Planning Procedure (Road Map) (Planning Calendar)	X	X	Annually
2. Goals and Objectives (included in the Grant application)	X	X	Annually
3. Child Recruitment/Selection Procedures (Selection Criteria/ Recruitment Plan)	X	X	Annually
4. Budget and Grant Application	X	X	Annually - and as needed for supplements
5. Self-Assessment Plan for Corrections (if applicable)	X	X	Annually
6. Board Composition Requirements for non-governmental agencies	N/A	N/A	One-time (until changed)

7. Board and PC Conflict of Interest requirements (included in Bylaws)	X	X	One-time (until changed)
8. PC Bylaws - Board approval of PC Composition Procedure for how PC members are selected	X	X	One-Time (until changed)
9. Financial Management Accounting & Reporting Policies including audit	X	N/A	One-time (until changed)
10. Policies and Procedures including:  a) Policy defining roles/ responsibilities of governing board members for implementing a high quality program b) Dispute Resolution & Impasse Procedure c) Procedures to resolve community complaints, conduct investigations d) Personnel Policies & Procedures e) Hiring/Termination procedures for Executive, Head Start, Fiscal, HR Directors and program staff.	X	X	One-Time (until changed)

Items Requiring Reports to the BOS and PC:

Required Report	Frequency
a) Budget, Credit Card Expenses reports	Monthly
b) Program Reports	Monthly



c) Enrollment Reports	Monthly
d) USDA Meals/Snack	Monthly
e) Financial Audit	Annually
f) Self-Assessment	Annually
g) Community Strategic Planning Goals and Objectives	Jan/June Updates
h) Communication from the Secretary/Human Health Services	As Released
i) Program Information Report PIR	Annually
j) Ongoing Monitoring Results	Semi-Annual
k) School Readiness Goals-Data	As Released (3 times a year)

**8. Responsibilities of Board of Supervisors, Policy Council, Employment and Human Services Executive Director and Community Services Bureau Director:**

**i. Background**

The responsibilities of the Board of Supervisors, Policy Council, and Director of Program Services are described in the Head Start Performance Standards. The Performance Standards describe certain responsibilities for the Director of the Head Start program, leaving decisions regarding other responsibilities to Executive Directors of the local Head Start Grantee.

**ii. Reference**

- Head Start Performance Standards, 45 CFR 1301.1 and CFR 1301.5

- Policy

The Employment and Human Services (EHSD) Director and the Community Services Bureau Director shall ensure that the Policy Council and the Board of Supervisors are routinely and frequently informed of, and trained on, management procedures and functions, as well as the Federal laws and regulatory compliance issues required to ensure a quality program. Mutual communication and understanding between the governing board, the policy council and program management are fundamental prerequisites for a healthy Head Start Program. The EHSD Director and the Community Services Bureau Director will also ensure that the Board of Supervisors has an understanding and appreciation of the Head Start Philosophy and the role of parents and Policy Council in shared governance. Careful and complete communication and planning will ensure effective oversight and appropriate actions and interventions that will foster the mutual understanding and actions of all entities responsible to maintain a quality Head Start Program.

### iii. Procedures

- The Employment and Human Services Department (EHSD) Director will provide a report to the County Administrator's Office monthly.
- Report topics will include all required monthly report items noted in section 7, Enrollment and Average Daily Attendance, and may additionally include, but are not limited to:
  - Fiscal/budget issues
  - Personnel matters
  - Facility issues
  - Policies and Procedures
  - Program planning
  - Annual Self-Assessment
  - Annual independent audit
  - Grant development and submission
  - Correspondence with ACF
  - Program issues
  - Regulatory changes
  - Family Engagement
  - Planning for joint Board of Supervisors/ Policy Council training activities
- The report will be sent monthly to the Health and Human Services Committee of the Board of Supervisors, to be included on the agenda by the Board of Supervisors and provided to the Chair of the Policy Council.
- The Employment and Human Services Director and Community Services Bureau Director will jointly meet throughout the program year, individually, with each member of the BOS to review reports, give updates and advice, and train on new regulations and initiatives.

**9. Role of Policy Council in the Annual Grant Development Process:** Throughout the year, the Policy Council is involved in the grant process through a variety of ways:

- The Program Services subcommittee meets throughout the year to review/discuss and update the annual program goals and objectives and the annual parent services budget and activities.

- The Fiscal subcommittee meets monthly to develop, adjust and approve the program budget for the coming year’s grant and tracks it throughout the year.
- The Policy Council approves the annual program goals and objectives.
- The Policy Council reviews the Community Assessment annual updates and the full easement every five years.
- The Policy Council also reviews and approves the Annual Planning Calendar, Child Recruitment and Selection Criteria, the Self-Assessment Plan for Corrective Actions, all of which are included in the submission of the Annual Grant Application.

Once these components of the grant are reviewed and approved, the Policy Council approves the full grant in the fall before submission to ACF.

## **10. Resolution of Disputes between the Board of Supervisors and the Policy Council (Impasse Policy)**

### **i. Background**

The Performance Standards require that Head Start grantees establish a policy and necessary implementation procedures for the resolution of internal disputes between the Board of Supervisors and the Policy Council.

### **ii. Reference**

Head Start Performance Standards, 45 CFR 1301.6

### **iii. Policy**

The Chairpersons of the Board of Supervisors and the Policy Council will monitor actions and decisions of each body as they relate to their respective responsibilities. It is the policy of Contra Costa County to resolve any disagreements between the Board of Supervisors and the Head Start Policy Council fairly and within required timelines. Whenever possible, disagreements will be resolved through processes of mediation and conciliation, including discussion, compromise, and consensus seeking between parties, and, if necessary, professional mediation.

### **iv. Administrative Procedure**

- **Informal Resolution:** In the event that a conflict exists, they will notify each other in writing within 30 days and give reasons why it does not accept the decision of the other, and then they will initiate informal discussions between representatives of the two bodies and seek a mutually acceptable resolution.
- **Mediation:** If informal resolution is not effective, the Chairpersons of the Board of Supervisors and the Policy Council shall request that the Community Services Bureau Director identify mutually agreeable qualified third party to provide professional mediation services. The mediator will use conciliation, compromise and consensus seeking between the two bodies. The mediation process shall be non-binding.
- **Arbitration:** If no resolution is reached with a mediator, the Chairpersons of the Board of Supervisors and Policy Council shall request that the Community Services Bureau Director identify

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mutually agreeable arbitrator, whose decision is final.

## 11. Resolution of Community Complaints

- i. "Community complaint" is defined as any complaint from anyone other than staff
- ii. The Policy Council is generally responsible for (and has the legal and fiscal responsibility for guiding/directing/carrying-out the establishment) the method of hearing and resolving community complaints about the Contra Costa County Community Services Bureau
- iii. Process for Solving Disputes/Complaints: Any parent (enrolled or applying for services) or community member may report a complaint to a program staff member of any of our program/sites, i.e. Site Supervisor, Teacher, Associate Teacher, or Comprehensive Services, Analyst, or clerical staff. If the complaint comes in by phone, the staff member documents that complaint. Complaints may come from sources other than the site, i.e. Board of Supervisors. Anyone receiving a complaint will immediately contact a program manager by phone with the following information:
  - Step 1: Document the complaint in writing to include the following information: Contact information of the complainant: Name, Address, Phone Number, email (if appropriate); Information Shared: When was the occurrence? Person/s involved? What happened? Where did it occur? And what was the impact? Other information that the complainant wishes to share may also be documented. If the complaint comes in by phone: program staff document call, note time, date and name of the staff member name
  - Step 2: Complaint goes first to the Site Supervisor who must discuss the details with their Assistant Director within 24 hours of the report. The Assistant Director works with the program staff to attempt resolution within 48 hours.
  - Step 3: Complaints not resolved within 48 hours will be brought to the attention of the Division Manager, Bureau Director, or their designee.
  - Step 4: If the complaint is then resolved, the Bureau Director will send a memo to all involved, stating remedial actions to be taken by staff and the time line for these actions.
  - Step 5: If satisfactory resolution is still not achieved, the Bureau Director will request the EHSD Director to review all documentation. When the complaint is then resolved, the EHSD Director will send a memo to all involved, stating remedial actions to be taken by staff and the time line for these actions.
  - In addition, Manager, Supervisors and Assistant Directors maintain the "Client Concern Log" to document and track all program concerns/complaints and resolutions.

## Part II. Communications

### A. General Description

All staff is expected to communicate within the department and externally using the following communication tools:

- Common, not technical terms
- A professional tone
- Assurance that the approach is based on each family’s cultural/linguistic preferences
- Adherence to the principles of Facilitative Leadership
- Encouragement of a team approach
- Ensure that translation services are available when needed

## B. Internal Communication

Employees must follow County policy with regards to courtesy and confidentiality. High staff morale is dependent on friendly greetings, active listening and a display of a helpful attitude toward team members. The following are methods of internal communication with program staff:

- Staff summits
- Regularly scheduled staff meetings at varying levels, such as:
  - Senior Administrative Management
  - Senior Management
  - Comprehensive Services
  - Cluster-based
  - Site-level
  - Daily Interactions
- Staff newsletters
- Internal memos
- Policies and Procedures
- Fax
- Email
- Short Messaging System(SMS/Texting)
- Payroll notices
- Telephone
- Bureau Reports
- Computerized Tracking Systems (CLOUDS)
- Video Conferencing System
- Annual Planning Calendar
- Intranet

### **Internal Communication Expectations:**

Purpose: to ensure that multi-level communication occurs throughout CSB and that employees at every level of the organization are kept informed of Bureau updates, happenings and changes and has the opportunity to provide feedback. Communication is woven through each of CSB’s values and is critical to the effectiveness of an organization.

**Communication Expectations:**

- Supervisors and managers are responsible for sharing critical information and key messages to their staff timely.
- Key stakeholders are involved at varying levels in planning, decision-making and communication depending on the decision.
- Supervisors/ managers are expected to hold regular, one-one meetings with subordinates, which includes time for feedback, two-way reflective communication and active listening.
- Staff are encouraged to provide feedback verbally, through e-mail and written correspondence
- Process, relationship and results are valued as equally important in communicating.
- Written and verbal communication has a positive intent, respectful tone and encouraging word choice. We are models for one another.
- Information communicated is tailored to the audience.
- Communication is concise and hits on the key messages/ points.
- Communication aides such as visuals and presentations are considered and shared as appropriate.
- Email protocol is followed. Protocols are saved on the Intranet at CSB Resource Center/Shared Documents/CSB Policies and Procedures/ E-mail Protocol.
- Expectations of next steps are clearly defined at the end of each meeting.
- Justification for change and context is clearly explained.
- We value the 3R's (responsiveness, respect, relationships) in our communications.
- When starting a new program, policy, project, etc..., identify 2-3 key points to communicate as to why it is important and how it will make it better.
- We maintain the intranet as clear and user-friendly as possible to ensure materials are easily accessed; and use hyperlinks whenever possible in sharing information electronically.
- Multi-modes and venues are used to communicate key messages including e-mail, newsletters, memos, verbal, presentations, etc.

Message	Method	Audience	Frequency	Expectation
Bureau Strategic Goals/ direction of the organization	Memo or presentation	All staff	Quarterly	All staff at every level of the organization knows the direction of the Bureau
Department, Bureau-wide changes and updates	Memos, Sr Mgt meetings, newsletter, all-staff calls, e-mails	All-staff	Monthly and Quarterly	Staff are kept abreast of changes
Communication sessions – circles, focus groups	Meetings	A selection of staff bureau-wide	Bi-annually or as needed	Staff are kept abreast of changes and Sr managers hear from staff
Year-end report	Memo and/or Meeting Presentation	All Managers and Supervisors	Annually – December/ January	PowerPoint or report is shared with all staff by managers and supervisors
New staff and promotions	e-mail/ and unit meetings	Managers and Supervisors	As needed	Staff know about new hires

Message	Method	Audience	Frequency	Expectation
		and/ or specific units		
Unit changes and updates	e-mail, unit meetings, All-Cluster meetings	Managers and Supervisors and/ or specific units	As needed	Staff know about changes
Updates/ information Sr Mgt meetings	Unit meetings, All-Cluster meeting	Sr Mgt Team	Monthly	New projects, issues, updates, changes are shared and discussed as a team
Updates/ information from All-Cluster and Unit meetings	Center and staff unit meetings, postings on staff boards	Staff	Monthly	New projects, issues, updates, changes are shared and discussed
Updates and quick messages of upcoming events	Facebook, etc...	All staff and greater community	3X per week or as needed	CSB is publically celebrated and upcoming events are shared

Other means of communication: Planning calendars, Policies and procedures, Unit reports, Board reports and meeting minutes

### C. Internal Communication with Parents

CSB staff strives to provide exceptional customer service and must always use their best judgment with the utmost professionalism. Every employee is responsible for delivering clear and helpful information to our parents. A key element to ensuring communication is both clear and helpful is to ensure it is delivered in the most supportive manner, place and time.

Staff will not address challenging behaviors that may have occurred during the day with parents at pick-up or drop off; instead they will let the parent know that they would like to discuss challenging behaviors and request a time to meet.

Staff will not request letters of recommendation from parents; however they may accept an unsolicited letter. Requesting such a letter maybe perceived as intimidating. Instead, parents should be encouraged to complete the Parent Recognition of Staff Excellence for any staff member they feel is providing excellent service and support.

The following are methods of communication with parents:

- Monthly Policy Council meetings – program planning, policy and financial information is shared
- Monthly Policy Council sub-committee meetings
- Monthly Policy Council executive board meetings
- Monthly parent meetings
- Monthly food menu with nutrition guidance
- Health Bulletins

- Parent surveys
- Parent-teacher conferences
- Home visits
- Quarterly family newsletters
- Parent bulletin boards that include:
  - Upcoming activities; posted memos; health and safety information logs; site emergency procedures; parents' and child's rights; and Policy Council minutes and agendas
- Daily classroom schedules
- Weekly lesson plans
- Parent policies and procedures
- Dissemination of pertinent information regarding program planning, communications from Office of Head Start, financial reports and grant applications.
- Planned site activities
- Planned community events
- Social Media Tools
- Communication with Delegate Agency and Community Childcare Partners:
  - Regularly scheduled meetings
  - Regular monitoring
  - Joint trainings
  - Appointed members from the delegates on the Policy Council
  - Joint annual self-assessments
- Email
- Telephone
- Fax
- Monthly reports
- Short Messaging System (SMS/Texting)

#### D. Communications with Governing Bodies and Policy Groups

- 1. The Policy Council:** Serves as a link between public and private organizations, the Delegate Agency Policy Committee, Subcontractors, the Grantee-Operated Program Site Committees, the Grantee, the County Board of Supervisors and the community it serves. Mutual communication and understanding between the governing board and program management are fundamental for a high quality Head Start Program.
- 2. Monthly meetings with the County Administrator's Office:** The Employment and Human Services Department (EHSD) Director and the CSB Director also ensure that the Board of Supervisors has an understanding and appreciation of the Head Start philosophy and the role of parents and Policy Council in shared governance. Monthly meetings are held with the County Administrator's Office to discuss various areas of the program. A meeting report is generated by the EHSD Director and the CSB Director. The meeting's report is sent monthly to the Health and Human Services Committee of the Board of Supervisors. In addition, the CSB Director and other assigned staff, meet throughout the program year, individually, with each member of the BOS to review reports, tour centers, give updates and advice, and train on new regulations and initiatives.



## E. External Communication

**1. Communication with Partnerships:** CSB has several types of Community Partnerships and all of them provide valuable services to our children and parents. Our reputation in the community is often dependent upon the respect and assistance provided to our partners when in contact with them. Every employee is responsible for delivering clear and helpful information to the public at large and to our partners in particular. External Partners include but are not limited to:

- State/Local Policy Groups
- State Department of Education
- Local Planning Council
- First Five Commissions
- County Departments
- Community-based Organizations
- Contra Costa County Special Education Local Planning Areas (SELPAs)
- Child Care Partners
- Policy Forum
- Local Education Agencies
- Contra Costa County School Superintendents
- Contra Costa One Stop Consortium
- California Welfare Directors Association Committees
- News / Media Outlets

### 2. Press Calls:

- i. All press calls should be immediately reported to the CSB Bureau Director and to the Employment & Human Services Department's Community Relations Director (also known as Public Information Officer or PIO) at (925) 313-1779, or the Executive Secretary at (925) 313-1629 in the Office of the Director for the Employment and Human Services Department. This will guarantee that the CSB and EHSD Directors know which stories and issues are attracting press attention. It will also make it easier for the reporter to be connected with the proper Department spokespersons who can respond fully and accurately. In addition, it will ensure there is proper follow up to meet deadlines, address issues and manage photography.

The Community Relations Director will be available to prepare staff for interviews, review the topic of interest and discuss points that will help the interview be complete and accurate while getting the Department's message across to the public.

On occasion, members of the press will take a shortcut into the Department and contact staff directly. If the staff member has been authorized by his/her Bureau Director to respond to the press, they should first notify the Community Relations Director who can assist in managing and maximizing the media opportunity.

- ii. If the staff person has not been authorized by their Bureau Director to respond to the press, they are required to adhere to the following:

- Do not respond directly to print, vocal, and/or visual media representatives;
  - Politely refer all contacts to the Community Relations Director at (925) 313-1779 or EHSD's Executive Secretary at (925) 313-1629 in the Office of the Director;
  - Inform your manager/supervisor immediately;
  - Provide the following information: date, time, and location of contact
  - Media representative's name, organization, phone number and deadline;
  - Summary and nature of the inquiry
- iii. There are many differing aspects and/or components related to the successful operation of our program. It is unfair for individual staff members to be placed in and/or to place themselves in a position of stating, explaining, and/or formulating policy for the department. An innocent comment intended to project a positive view can be reproduced with a negative spin or violate the right to privacy of our clients. Proposed dialogue when fielding a call from the media:
- "I would like to respond to your questions. My concerns rest with preserving and protecting the privacy of our children and their families. Please give me your name, organization, and phone number so that I can properly refer your request."
  - Staff with story ideas or events to promote are asked not to contact the press directly, but to contact the Community Relations Director at (925) 313-1779, so these stories can be channeled to the press most likely to cover them.

### 3. Tools for External Communication are as follows:

- Formal/informal agreements
- Electronic Newsletters
- Regular meetings
- E-mail
- Short Messaging System (SMS/Texting)
- Telephone
- Membership activities
- Social Media Tools (Facebook/Twitter etc.)
- Annual Report
- Fact Sheet

### 4. CSB E-mail Protocol:

The following is a basic guideline of enhancing our e-mail communications:

- **Purpose of an e-mail** is:
  - To Communicate – To get the reader's attention within few lines of text.
  - To Document – Send a report, instructions, procedure, information to file, etc.
- **Only discuss public matters** - Ask yourself if the topic being discussed is something you would write on company letterhead or post on a bulletin board for all to see before clicking "send."
- **Respond in timely fashion**- Depending on the nature of the e-mail and the sender, responding within 24 to 48 hours is acceptable.

- **Avoid using shortcuts to real words**- emoticons, jargon, or slang for business e- mails such as “4 u” or “Gr8”, etc.
- **Be clear on who the recipient is** – When there are multiple recipients or Cc’s but one or two specific people who you are directly addressing, address the specific person(s) by name at the start of the email.
- **Be clear in your subject line** – the subject line must match the message. Be succinct and to the point in the subject line. Never leave this blank.
- **Evaluate the importance of your e-mail** - Do not overuse the high priority option unless very necessary. If an immediate or less than 24-hour response is needed, it is better to pick up the phone.
- **Keep it short and get to the point** - State the purpose of the e-mail within the first two sentences. Be clear, and be up front. Anything more should happen in a verbal conversation.
- **Know your audience** - e-mail greeting and sign-off should be consistent with the level of respect and formality of the person you are communicating with.
- **Refrain from sending one-liners** - "Thanks," "Oh, OK" and “Action”; do not advance the conversation in any way. Put "No Reply Necessary" at the top of the e-mail when you do not anticipate a response.
- **Confidential Information blocked** -Do not share any of the following information in e-mail communications:
  - Credit Card information
  - Social Security numbers
  - HIPAA-related medical information ((the Health Insurance Portability and Accountability Act of 1996 addresses the use and disclosure of individuals’ health information)
  - Username and password
- **Indicate what response/action you expect** - such as “Action needed”, “Response needed”, or, if none “FYI only”. Include a deadline or desired deadline for needed action and responses.
- **Your e-mail is a reflection of you** - Every e-mail you send adds to, or detracts from your reputation. Always include a signature - You never want someone to have to look up how to get in touch with you. You name and contact information should always be included.
- **Send or copy others only on a need to know basis** - Before clicking on the Cc lines, ask yourself if all the recipients need the information in your message.
- **Beware of the "reply all."** - Do not hit "reply all" unless every member on the e- mail chain needs to know.
- **When not to send an e-mail and pick up the phone** - When a topic is sensitive or has many parameters that need to be explained or negotiated and will generate many questions or may generate confusion, do not handle it via e-mail. If the email exchange has gone back and forth more than a few times, it is usually better to continue the conversation by phone. In addition, e-mails should not be used for last minute cancellations of meetings, lunches, interviews, and never for difficult news. Although, if its news you have to deliver to a large group, e-mail is more practical.
- **Avoid writing in all capital letters** – It sends the wrong message and it is hard to read.
- **Beware of tone** – Communicating tone in email is challenging and must be done by thoughtfully choosing words. Sarcasm, for example, is an expression of anger and often comes across hotter than it would in person, where the face and voice assist understanding.
- **Beware of emotional reply** –Too often someone in anger or frustration types off the reply and hits send before taking time to think. After typing the response, it is advisable to take a moment,

think, may be take a short break – proof the reply before sending it.

- **Adding attachments-** Send a link instead.
- **Out of Office-** Be sure to add the date of your return and the name of the person to contact in your absence.

#### 4. Social Media Posting Guidelines:

These guidelines shall apply to any and all employees who are permitted as authorized users by Contra Costa Community Services Bureau (CSB) to post content on CSB's social media sites.

These guidelines are intended to apply to all official blogs or social media platforms maintained by CSB, including, but not limited to Facebook, Twitter and Instagram. All such activities are referred to as "social media postings" in this document.

- Social media posting privileges are granted to the pre-approved CSB Social Media Committee.
- The primary and foremost purpose of Contra Costa Community Services Bureau social media platforms is to provide public information and education, to recruit staff and reach out to families that need childcare, and to positively promote the work of our agency, staff and volunteers. The intent is to showcase what our agency does and to communicate with the public via social media outlets.
- All authorized CSB social media users shall always be courteous and respectful of all points of view when posting on CSB's' social media platforms.
- All authorized CSB social media users shall adhere to the CSB brand standards (colors, flyer templates, etc.) in an attempt to ensure the content presented is consistent and visually appealing. Visuals play an important part in social media branding and connectivity to the audience.
- In the event that a negative post or comment is placed on any of CSB's social media platforms, CSB social media posters will not engage in a confrontational, ongoing dialogue. We will instead remove the negative comment and address the issue outside of the public-facing platform, possibly through private messaging if appropriate to follow up/attempt to resolve the issue. This will be done with the assistance of the relevant members of the CSB Leadership Team and approved by the Department Director.
- Common sense is typically the best guide when posting content on CSB's official social media platforms. If you are unsure about a particular posting, please feel free to contact the Social Media Project Manager.
- Social media postings for Contra Costa Community Services Bureau (made on official CSB accounts) may be at the direction of the Bureau Director or designees for the exposure of recruitment efforts, special events, program accomplishments etc.
- Social media postings must not disclose or refer to any information that Contra Costa Community Services Bureau considers confidential information as per the confidentiality policy. If you have any questions about what constitutes confidential information, please contact the Social Media Project

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Manager.

- If a member of the news media contacts you about a social media posting that concerns the business of the Contra Costa County Community Services Bureau, you must refer that person to one of the following: Bureau Director or the EHSD Community/Media relations Manager.
- All CSB social media postings should be made from the perspective of Contra Costa County Community Services Bureau, reflecting our policies, procedures and positions. Social media posts should not reflect any individual's personal point of view or positions.
- Employees need to adhere to the Hatch Act, whose main provision prohibits employees of the federal government and local government employees who work in connection with federally funded programs from engaging in any form of political activity. No lobbying is allowed.
- Be responsible, be nice, have fun and connect

## F. Reporting for County Child Protective Services and State Community Care Licensing

The purpose of these policies and procedures are to provide all department employees with instructions on what specific steps they must take to properly handle any incident involving an abused and/or neglected child, the injury of a child, or a potential child's rights violation. It is important to note that while all employees are charged with the responsibility of reporting incidents involving an abused and/or neglected child, only the EHSD Director or Bureau Director or designee is charged with the responsibility of reporting potential child's rights violations to State Community Care Licensing.

In addition, this policy is intended to make clear the procedure for reporting incidents that may occur both off site and on site.

### 1. Definitions:

- CCL (State): The acronym for State Community Care Licensing, which is a Division of the State of California Social Services Department, and which is responsible for the licensing of the Department's Child Care facilities.
- EHSD Director: The Director of the Employment and Human Services Department
- Bureau Director: The Director of the Community Services Bureau.
- CFS (County): The acronym for Children and Family Services, formerly Child Protective Services, which is a bureau of the County's Employment and Human Services Department and is mandated by the Federal and State government to assess and investigate all referrals which allege that a child is endangered by abuse, neglect, or exploitation.
- Major Injury: Any incident involving a child that requires the intervention of any medical professional (examples of medical professional include: medical advice nurse, hospital, clinic, doctor, ambulance service, emergency room).
- Minor Injury: Any incident involving a child that does not require the intervention of any medical professional as noted above.
- Child's rights violations: Any incident that occurs at a Community Services Bureau facility and involves an employee, contractor, or volunteer of the Department that might violate either the Head Start Code of Conduct or the rights of a child in accordance with State Child Care

## Licensing Regulations.

All employees, at all levels, are expected to follow the policies and procedures so that accurate and timely reporting can be assured to both the County CPS and the State CCL.

### **2. Reporting to CFS:**

- Any employee or contractor who knows or suspects that a child has been abused and/or neglected off site should immediately inform and discuss his/her concerns with the direct supervisor.
- Reports shall be made to Child Protective Services in accordance with mandated reporting responsibilities and laws. A report to the Community Care Licensing (CCL) shall also be made summarizing the CFS report.
- The employee or contractor making the report will provide a copy of the above referenced report to their Supervisor or Manager, who is responsible to inform their Assistant Director.

Additional policies and procedures related to Mandated Reporting can be found in the Child Development Section of this document, "Child Development Reporting Policies".

### **3. Child Injuries:**

#### **i. Minor Injuries**

Immediately report the injury to your Supervisor and the parent after you have tended to the child. (Includes any incident not involving medical professionals) Employees do not report minor injuries to CCL.

If a parent of a child who has sustained a minor injury reports back to the center that they subsequently took the child to be seen by any medical professional, the injury needs to be reported as a major injury. All head injuries regardless of staff determination that it is minor or major shall be reported to the Supervisor immediately who shall contact the parent immediately to pick up the child. "Head Injuries" are defined as injuries to the skull or cranium, and do not include the mid and lower facial areas. Staff shall complete a written injury report for the parent prior to pick-up time and at pick-up time talk with the parent to explain the injury, action taken by staff, and provide a copy of the written report. Supervisor shall make a complete entry in the Supervisor's Injury Log for all injuries, minor and major.

#### **ii. Major Injuries**

Report the incident immediately to a Site Supervisor, the Assistant Director, and the parent. Depending on the severity of the injury, all staff should take the following steps:

- Comfort the child.
- Phone 911 immediately.
- Report the injury to the Assistant Director, Bureau Director and/or Executive Director.
- The Site Supervisor or designee will make an Unusual Incident Report to Licensing in accordance with the Unusual Incident Reporting policy and procedure.

- The Bureau Director may assign staff to investigate.
- The Department’s Licensing Liaison may prepare a written report.
- Staff shall complete a written injury report (form CSB-208) for the parent immediately and provide a copy of the written report to the parent.
- Supervisor shall make a complete entry in the Supervisor’s Injury Log for all injuries, minor and major.

### iii. Potential Child’s Rights Violations

- Any incident that occurs on site at a facility and involves employee(s), contractor(s), or volunteer(s) of the Community Services Bureau that might violate the rights of a child in accordance with Child Care Licensing Regulations or the Community Services Code of Conduct must immediately be reported to the CSB Administration using the following protocol and in accordance with Mandated Reporting of Child Abuse and Neglect ACF-IM-HS-15-04:
  - Any potential and/or unusual incident must be reported by CSB employees to the center’s Site Supervisor or the designated person-in-charge no later than 15 minutes after being made aware that an alleged incident has or may have taken place.
  - The reporter shall be any employee, contractor or volunteer who has witnessed or heard about an alleged incident, or any employee, contractor or volunteer who was involved in an alleged incident.
  - The Site Supervisor or person-in-charge must phone-in the alleged incident to the Assistant Director and as directed by the AD, the Site Supervisor and the AD will call the CSB Administration Office at (925) 681-6300 no later than one hour after being made aware of the alleged incident.
  - Caller shall make it clear to the clerk answering the phone at CSB Administration Office that you are reporting a possible licensing incident that must be handled by the appropriate staff immediately.
  - When the Unusual Incident Report is phoned into the CSB Administrative Office, the front desk clerk who receives the phone call shall immediately and personally notify the Division Manager. If the Division Manager is not in, the notification succession shall be to the Bureau Director.
  - The Site Supervisor or person-in-charge will then complete, obtain AD approval, and fax the CSB Unusual Incident Report to the CSB Administrative Office within two hours of the alleged incident. The completed form shall be scanned to the Division Manager and immediately followed up by a telephone call to CSB Administrative Office at (925) 681- 6300 to verify that a copy of this report has been received.
  - Site Supervisor shall compile and send upon request all written documentation related to the incident to the Assistant Director, Division Manager and Personnel Services Assistant III. Documentation may include but is not limited to CSB Incident Report, small group conference forms, notes on discussions with parents or other employees, and observation notes. Materials shall be complete, legible, objective, and fact-based.
- It is a requirement of CCL that unusual incidents must be reported to CCL by a telephone call within 24 hours of the County learning that an incident may have occurred.
  - In accordance with CCL protocol, the Site Supervisor remains the official contact with the CCL during any on-site CCL review/investigation process.

- The Assistant Director must be notified by the Site Supervisor any time a representative from CCL conducts an on-site visit for any reason.
- Any employee who fails to report an alleged incident as outlined above will be subject to disciplinary action, up to and including termination.
- Any Site Supervisor or person-in-charge who fails to follow the protocol instructions as outlined above will be subject to disciplinary action, up to and including termination.

#### **iv. CSB Administration Responsibilities**

- When the Unusual Incident Report is received by the CSB Administrative Office, the front desk clerk will personally deliver copies to the Personnel Administrator, Division Manager and the Bureau Director for review. When the review process is completed, an approved copy of the Unusual Incident Report will be scanned to the appropriate Assistant Director to sign and then the AD or his/her designee will fax/scan/email to CCL.
- A fact finding team will immediately be convened and directed to visit the center to gather information and determine if a child's rights have been violated and report these facts back to the Bureau Director.
- After reviewing the facts, if the Bureau Director determines that a true incident has not occurred, the case will be documented as such and closed.
- After reviewing the facts, if the Bureau Director determines that an incident may have occurred, the EHSD Director, Bureau Director or designee will notify the Head Start Regional Office and/or State DOE Early Education and Support Division in accordance with reporting requirements and as applicable to the funding source of the impacted child(ren).
- Only the EHSD Director or designee has the authority and responsibility on behalf of the County to report these matters to Licensing.
- Upon the notification by the EHSD Director or Bureau Director that an incident may have taken place, an investigation team will be sent out by the next business day to investigate and prepare a draft investigative report and findings.

CSB Administrative Office, in conjunction with the Assistant Director and Site Supervisor of the impacted center, will make all decisions related to protecting the rights of children on behalf of the Department until the investigation has been concluded.

Any employee who is considered to be involved with the violation of the rights of a child in connection with the incident report will be immediately re-assigned temporarily to another work location outside of the classroom and without contact with children until the investigation is concluded.

Failure on the part of the employee to report to, and remain at the alternate work location as directed, will cause the employee to receive absence without pay (AWOP) and to be subject to further discipline, up to and including termination.

The investigative team will have three business days to perform the required investigation and prepare a draft report for the Bureau Director and EHSD Director.

The Bureau Director and EHSD Director will review the report and decide next steps, including, if necessary, any disciplinary or remedial action that should be implemented as a result of the report's findings and conclusions.



The investigator's written report shall also include a holistic analysis of the causes associated with the incident and develop specific recommendations to prevent their recurrence.

Recommendations will be reviewed by the Bureau Director and EHSD Director for consistency with appropriate personnel policies prior to being entered into the final report. After appropriate action is taken by the Department, pertinent information regarding each incident shall be shared with key managers and Site Supervisors to prevent the recurrence of a similar incident at another site (Any report information shared with Department employees must be pre-reviewed by CSB Administration to ensure that it does not violate the confidentiality of any employees or children involved in the incident).

For major incidents, a detailed critique by management of the incident itself shall be provided to all employees on a department-wide basis to prevent the recurrence of a similar incident at another site.

#### **G. Partner Agencies including the Delegate Agency will follow these reporting steps**

- Notify and provide County with copies of any licensing citations, licensing visit reports, unusual incident report, and/or any other citations within 48 hours of Contractor's receipt of the report or citation.
- Maintain full compliance with Community Care Licensing Regulations and State and/or Federal Regulations as applicable given other funding sources received by CSB.
- Notify and provide CSB with copies of any Medical Alerts (such as infectious disease outbreaks) within 48 hours.

CONTRA COSTA COUNTY EMPLOYMENT & HUMAN SERVICES  
DEPARTMENT COMMUNITY SERVICES BUREAU

# POLICIES AND PROCEDURES

## SECTION 2-PROGRAM OPERATIONS **2019-21**

Board of Supervisors Approved: 07/30/19

2019-21  
Policies and Procedures  
Section 2: Program Operations

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**PART I. Eligibility, Recruitment, Selection and Attendance-ERSEA**

**A.State Child Development Program**

The California Department of Education Early Learning and Care Division fund a portion of our program. The matrix below provides an overview of the program.

PY = Program Year

	<b>CSPP</b>		<b>CTTR</b>
<b>Program Type/ Hours of Care</b>	<u>Part Day</u> 3-3:59 hrs	<u>Full Day</u> More than 4 hrs Includes ¾ time and Full time	<u>Full Day Program</u> Includes ½, ¾ time and full-time
<b>Age of Child</b>	3 or 4 by December 1 of PY or on or after their 3rd birthday *Continued summer enrollment allowable for K-eligible children until K start if requested and available	3 or 4 by December 1 of PY or on or after their 3rd birthday *Continued summer enrollment allowable for K-eligible children until K start if requested and available	Zero – three (until eligible for CSPP)
<b>Eligibility Requirement</b>	Current fiscal year Program Requirements apply	Current fiscal year Program Requirements apply	Current fiscal year Program Requirements apply
<b>Maintaining Ongoing Eligibility</b>	N/A Once initially Certified, child is "in" for the Remainder of the PY	If the basis of eligibility is income, families must report changes that cause their adjusted monthly income, adjusted for family size to exceed ongoing income eligibility within 30 calendar days. For all other eligibility criteria, once initially certified, child is "in" for the remainder of the certification period. Failure to meet ongoing eligibility results in termination of full-day services.  *If family fails to meet continued eligibility, they may choose to	If the basis of eligibility is income, families must report changes that cause their adjusted monthly income, adjusted for family size to exceed ongoing income eligibility within 30 calendar days. For all other eligibility criteria, once initially certified, child is "in" for the remainder of the certification period. Failure to meet ongoing eligibility results in termination of full-day services.



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		receive part-day services based on their initial eligibility or pay full fee for services.	
<b>Need Requirement</b>	N/A	Current fiscal year Program Requirement apply Preschool children who attend only part of the week (e.g. M W F) or part of the day (11 – 5) can attend their class M-F during the “part-day preschool portion of the day” 8:30-12:00. All hours outside of this time must be supported by need.	
<b>Maintaining Ongoing Need</b>	N/A	*If family fails to meet need eligibility for full-day, they may choose to receive CSPP part-day services if available or pay full fee for services.	N/A
<b>Family Fees Assessed</b>	N/A	If less than 130 hours per month part-time fee assessed	If less than 130 hours per month part-time fee assessed
		If more than 130 hours per month full-time fee assessed	If more than 130 hours per month full-time fee assessed
		If family of a 3-5 yr. old child has a need for less than 4 hrs. a day, try to place them in a part-day slot where no fees apply.	N/A
<b>Adjustment Factors</b>	NA	Time and special criteria adjustment factors apply. Time criteria is based on total number of hours in care (not just hours of need).  CCTR toddler special criterion applies only until child is 36 months old regardless of type of class child is in.  ¾ time – 4 to 6:29 hours. Full-time – 6:30 to 9:59 hours. Full-time Plus – 10 hours or more.	
<b>Enrollment Priorities</b>	Transfers (i.e. families of children already certified for care including toddlers leaving CCTR) CPS- CSB622 At-Risk Referral Homeless  Returning 4 yr. olds regardless of income Eligible 4 yr. olds* Eligible 3 yr. olds* Over income 4 yr. olds (part-day only) Over income 3 yr. olds (part-day only) Over income age eligible children with IEP/IFSP (part-day only)  *Refer to Enrollment Priorities for State Preschool		Transfers CPS or “at risk” Homeless Eligible Children Per income Ranking  *Head Start collaborative full-day programs shall consider Head Start enrollment priorities and these children shall be deemed as meeting the priorities.

	Head Start collaborative full-day programs shall consider Head Start enrollment priorities and these children shall be deemed as meeting the priorities.		
<b>Over Income Waivers</b>	10% of part-day slots allowed to be no more than 15% over State income ceiling.	Not Allowed	Not Allowed
<b>Recertification for next PY</b>	N/A Must do second "initial" application prior to next PY.	For not less than 24 months *With the exception of families whose need is Seeking Employment, their certification period will be for not less than 12 months.	For not less than 24 months *With the exception of families whose need is Seeking Employment, their certification period will be for not less than 12 months
<b>Reporting</b>	Revised 8501	Revised 8501	9500

## B. Definitions

As used in the Program Requirements, definitions are as follows:

- Adjusted monthly income-The total countable income as defined below, minus verified child support payments paid by the parent whose child is receiving child development services, excluding the non-countable income listed below:
  - Earnings of a child under age 18 years;
  - Loans;
  - Grants or scholarships to students for educational purposes other than any balance available for living costs;
  - Food stamps or other food assistance;
  - Earned Income Tax Credit or tax refund;
  - GI Bill entitlements, hardship duty pay, hazardous duty pay, hostile fire pay, or imminent danger pay;
  - Adoption assistance payments;
  - Non-cash assistance or gifts;
  - All income of any individual counted in the family size that is collecting federal Supplemental Security Income (SSI) or State Supplemental Program (SSP) benefits;
  - Insurance or court settlements including pain and suffering and excluding lost wages and punitive damages;
  - Reimbursements for work-required expenses such as uniforms, mileage, or per diem expenses for food and lodging;
  - Business expenses for self-employed family members;
  - When there is no cash value to the employee, the portion of medical and/or dental insurance documented as paid by the employer and included in gross pay; and
  - Disaster relief grants or payments, except any portion for rental assistance or unemployment.

- Authorized representative-The person designated by the agency to certify eligibility for subsidized services. For CSB's directly operated program, this means the Comprehensive Services Assistant Manager (CSAM) or designee.
- Child Protective Services-Children receiving protective services through the local county welfare department as well as children identified by a legal, medical, social service agency or emergency shelter such as abused, neglected or exploited or at risk of abuse, neglect or exploitation.
- Children with disabilities-Children who have been determined to be eligible for special education or early intervention services in accordance with Part B or C of the Individuals with Disabilities Education Act (IDEA). These children have a current Individualized Education Plan or Individualized Family Service Plan. These children may be developmentally disabled, hearing impaired, deaf, speech impaired, visually impaired, seriously emotionally disturbed, physically impaired, have other health impairments such as: deaf-blind, multi-handicapped or specific learning disabilities, requiring the special attention of adults in a child development setting. Children, birth to three years, may be "at-risk" or with disabilities as defined by IDEA.
- Declaration-A written statement signed by a parent under penalty of perjury attesting that the contents of the statement are true and correct to the best of his or her knowledge.
- Displace families-To dis-enroll families in order to reduce service levels due to insufficient funding or inability of CSB to operate one or more sites because of reasons beyond control of the department, such as floods or fire.
- Enrolled-A child has been accepted and attended at least one class for center-based or family care option or at least one home visit for the home-based option.
- Family-For State child development programs, the parents and the children for whom the parents are responsible; who comprise the household in which the child receiving services is living. For purposes of income eligibility and family fee determination, when a child and his or her siblings are living in a family that does not include their biological or adoptive parent, "family" shall be considered the child and related siblings. For Head Start (1302.12), family, for a child, means all persons living in the same household who are supported by the child's parent(s)' or guardian(s)' income and related to the child's parent(s) or guardian(s) by blood, marriage, or adoption or the child's authorized caregiver or legally responsible party. Head Start defined family, for a pregnant woman, as all persons who financially support the pregnant woman.
- Fee schedule-The Family Fee Schedule, issued by the department pursuant to Education Code section 8447(e). The fee schedule is used by child development staff to assess fees for families utilizing State childcare and development services.
- Homeless-As defined in the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a(2)), a person or family that lacks a fixed, regular, and adequate night-time residence and has a primary night time residence that is:
  - A supervised publicly or privately operated shelter, transitional housing, or homeless support program designed to provide temporary living accommodations, or a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings, or children and youths who are sharing the housing of other persons

due to loss of housing, economic hardship, or a similar reason.

- Foster care-24-hour substitute care for children placed away from their parents or guardians and for whom the state agency has placement and care responsibility. This includes, but is not limited to, placements in foster family homes, foster homes of relatives, group homes, emergency shelters, residential facilities, childcare institutions, and pre-adoptive homes.
- Income eligible-For the purpose of State, childcare and development services that a family's adjusted monthly income is at or below 85 percent of the state median income, adjusted for family size at initial certification. For ongoing eligibility, adjusted monthly income cannot exceed 85 percent of the state median income, adjusted for family size. In accordance with the Head Start Performance Standards (1302.12), a pregnant woman or child is income eligible if the family's income is equal or below the poverty line or the family is eligible (or in the absence of child care would be potentially eligible) for public assistance, including TANF child-only payments.
- Income fluctuation-Income that varies due to:
  - Migrant, agricultural, or seasonal work;
  - Intermittent earnings or income, bonuses, commissions, lottery winnings, inheritance, back child support payment, or net proceeds from the sale of real property or stock;
  - Unpredictable days and hours of employment, overtime, or self-employment.
- Initial certification-The formal process for completing an application for services and collecting information and documentation to determine that the family and/or child meets the legal requirements for receipt of subsidized child development services based on eligibility and need criteria. The signature of the authorized representative on an application for services certifies that the legal requirements have been met and documented.
- Legally qualified professional-A person licensed under applicable laws and regulations of the State of California to perform legal, medical, health or social services for the general public.
- Parent-A biological parent, adoptive parent, stepparent, foster parent, caretaker relative, legal guardian, domestic partner of the parent, or any other adult living with a child who has responsibility for the care and welfare of the child.
- Parental Incapacity-The temporary or permanent inability of the child's parent(s) to provide care and supervision of the child (ren) for part of the day due to a physical or mental health condition.
- Recertification means the formal process for completing an application for services and collecting information and documentation to determine that the family and/or child meets the legal requirements for ongoing receipt of subsidized child development services based on eligibility and need criteria. The signature of the authorized representative on an application for services certifies that the legal requirements have been met and documented.
- Recipients of Service-Families and/or children enrolled in a childcare and development program subsidized by the California Department of Education.
- Self-Certification of Income-A declaration signed by the parent under penalty of perjury identifying:
  - To the extent known, the employer and date of hire and stating the rate and frequency of pay, total amount of income received for the preceding month(s), the type of work performed, and the hours and days worked, when an employer refuses or fails to provide requested employment information or when a request for documentation would adversely affect the parent's employment; or the amount and frequency of sources of income for which no documentation is possible.
- State median income-The most recent median income for California families as determined by

the State Department of Finance.

- Total countable income-All income of the individuals counted in the family size that includes, but is not limited to, the following:
  - Gross wages or salary, advances, commissions, overtime, tips, bonuses, gambling or lottery winnings;
  - Wages for migrant, agricultural, or seasonal work;
  - Public cash assistance;
  - Gross income from self-employment less business expenses with the exception of wage draws;
  - Disability or unemployment compensation;
  - Workers compensation;
  - Spousal support, child support received from the former spouse or absent parent, or financial assistance for housing costs or car payments paid as part of or in addition to spousal or child support;
  - Survivor and retirement benefits;
  - Dividends, interest on bonds, income from estates or trusts, net rental income or royalties;
  - Rent for room within the family's residence;
  - Foster care grants, payments or clothing allowance for children placed through child welfare services;
  - Financial assistance received for the care of a child living with an adult who is not the child's biological or adoptive parent;
  - Veterans' pensions;
  - Pensions or annuities;
  - Inheritance;
  - Allowances for housing or automobiles provided as part of compensation;
  - Portion of student grants or scholarships not identified for educational purposes as tuition, books, or supplies;
  - Insurance or court settlements for lost wages or punitive damages;
  - Net proceeds from the sale of real property, stocks, or inherited property; or
  - Other enterprise for gain.
- Update the application-The process of revising the application for services between recertification. The application shall be revised by completing a 9600S form with the latest family information that documents the continued need and eligibility for child care and development services.
- Verify-To check or determine the correctness or truth by investigation or by reference.

### C. Child Age and Family Income Eligibility

The Community Services Bureau's program enrolls children according to Federal and State eligibility criteria. For the Head Start program, children are selected for service based primarily on the family income adjusted for family size, with lowest income families selected first. Children at risk of abuse or neglect are considered high priority. Within age groups, priority in the pre-school program is given to four-year-old children from the neediest families. Please refer to CSB's Selection Criteria found in the ERSEA folder on the Shared Drive for more information. The Community Assessment is used to determine location of centers and program options to accommodate the areas of greatest need in the county.

Every year, parents/staff review and update placement of centers and program options, restructuring enrollment to best meet community needs as county demographics change.

## D. Recruitment

### 1. Strategies

CSB employs a variety of recruitment strategies to ensure that the neediest children from low-income families have access to services. Each year, a recruitment plan responsive to changes in communities served by CSB is developed with parent feedback and implemented. Various recruitment materials are developed and disseminated throughout the community. There are a variety of ways to access the program by referral or personal contact. Walk-ins are always welcome. Word of mouth, via CSB parents is the best method of recruitment. Staff from all content areas of the program conducts presentations to community-based entities wherein detailed information is provided to expedite access to our program by their clients. Articles and ads are published in local publications such as agency newsletters, websites, and social networking sites. For detailed strategies, see the Recruitment Plan in the ERSEA folder on the Shared Drive.

### 2. Recruitment Policy

All staff, parents, Policy Council members and partners are responsible for giving out information in accordance with the annual Recruitment Plan.

All CSB Staff are responsible for:

- Phone calls: CLOUDS will capture the phone calls to the Hotlines under the Communications tab. Calls will be returned regularly throughout the day by designated staff. Staff that return calls captured on the hotlines is responsible for taking basic pre-registration information over the phone and entering it into CLOUDS.
- Walk-ins: All staffs are responsible for being responsive to walk-ins and providing an explanation of the enrollment process. Assist client in filling out CSB690-Waiting List Pre-Registration Form (See CSB Forms) and/or place the child directly on the CLOUDS waiting list.
  - Any documentation brought in by families, such as pay stubs and/or birth certificates will be scanned to the CLOUDS.
- Mail Received:
  - Route to appropriate person if mail came in self-addressed envelope.
- Faxes: All referral forms are sent to the ERSEA analyst, logged, and then forwarded to the appropriate staff for follow up.

## E. Selection Process

Children are selected from the waiting lists that are maintained in CLOUDS. After the agency receives the application material, children are ranked based on CSB's admission priorities. Ten percent of our placement slots are designated for children with disabilities and every effort is made to accommodate children with disabilities.

### **Selection Criteria:**

To ensure that the neediest children from low-income families are selected for CSB's services, CSB implements its Selection Criteria/Admissions Priorities to prioritize neediest families, which is aligned with the state's priorities by a strong community need for child care for working families.

At least 10% of the total number of enrollment opportunities at CSB is designated for children with certified disabilities. Families of children with disabilities are asked to provide documentation from the doctor or a copy of the child's IFSP or IEP.

The authorized representative and other department managers insure that the selection criteria meet the state and federal regulations regarding selection of families and children to the program. The Selection Criteria/Admissions Priorities is updated and approved by the Director, Policy Council, and Board of Supervisors annually.

## **F. CLOUDS Waitlist**

### **1. Procedures for maintaining Eligible / Accepted Families on Waitlist**

In Maintaining Eligible / Accepted Families, staffs are responsible for:

- Taking basic pre-registration information over the phone or in person and enter into CLOUDS
- Contacting the next eligible family based on CLOUDS wait list and documenting contact on CLOUDS (Family Case Notes, with the category of Eligibility selected)
- Sending no contact letters, and assigning to the Purge caseload for Assistant Manager review in accordance with CSB Purge Protocol
- Conducting interviews
- Determining eligibility based on supporting documentation and information obtained through the interview
- Maintaining pre-enrollment documentation on CLOUDS (e.g., pay stubs, birth certificate, immunization record)
- Creating, signing and dating income calculation sheet in CLOUDS
- Communicating application status to families (CSB Application Status Letter)

### **2. Collect the following information in the child's electronic file on the CLOUDS waiting list:**

- Child's birth certificate or other age verification: for state funding programs collect reliable age verification for all children in the family size, indicating the relationship of the child to the parent; for Head Start/Early Head Start collect only age verification for the child(ren) to be enrolled.
- Documentation of Family Size (unborn can only be counted in family size for Early Head Start where services to pregnant women are provided)
- Parents' income verification (e.g., pay stubs) or self-certification form, if applicable (signed & dated).
- Income calculation worksheet (signed & dated) in CLOUDS.
- Copies of the child's immunization records (not necessary to determine eligibility).
- Health history from CLOUDS (signed and dated).

- Documentation of Disabilities, if applicable.
- Documentation of Homelessness, if applicable
- Documentation of Categorical Eligibility, if applicable
- Documentation of caregiver's need for services, if applicable
- Documentation of California residency

**3. Once file has been determined eligible by the authorized representative, the Site Supervisor for the enrolling center is responsible for:**

- Reviewing and updating information on file. Review and update Child and Family Data sheets on CLOUDS.
- Reviewing the Health History.
- Updating Emergency Information (See Form CSB214)
- Flagging the file in the top right front corner of the file using the following sticker dot system:
  - Blue Dot: Child with Disabilities
  - Red Dot: Child with Health/Nutrition/Mental Health Concerns
  - Yellow Dot: Child that transitioned from I/T to Preschool
  - White Dot: Used to cover up any colored dot that is no longer applicable to the child.

**4. The authorized representative is responsible for:**

- Reviewing waitlist file from Clerk.
- Verifying family eligibility and signing the income calculation worksheet.
- Moving the child from Eligibility Waiting List to Eligible/Accepted Wait List in CLOUDS once eligibility has been established.
- Ensuring flagged items are properly noted in CLOUDS.
- Keeping any paper copies in a locked drawer or cabinet.
- Maintaining Eligible/Accepted list in CLOUDS and monitor to ensure the next eligible child is being enrolled.
- Managing the Eligible/Accepted list on CLOUDS and removing children as appropriate (i.e. no longer qualifies or interested).
- Reviewing purged list and archive applications on CLOUDS as per the purge protocol.

**5. Procedures for Purging Waitlist**

**i. The authorized representative and supporting Clerk will maintain a current waiting list for those sites by following these steps:**

- Document all contacts with families on the Family Case Notes in CLOUDS and indicate the category of Eligibility.
- Make extra special effort via multiple methods to contact Head Start eligible families as some these families require extra outreach efforts. Document all steps taken.
- Send out no contact letters (See Form CSB613) to non-responsive families on an ongoing basis once sufficient efforts to contact as defined above have been made; send only one letter to each family; give the family ten working days to respond from date letter is sent.
- Document response/lack of response to the CSB613 on Family Case Notes.



Assign child to the Purge caseload. Assistant Manager assigned to the Purge caseload, will review case notes and purge children as appropriate.

ii. **The Comprehensive Services Assistant Manager will conduct the purge by following these steps:**

- Review the Purge caseload in CLOUDs.
- Review the Family Data Sheet for each child listed on the Purge caseload.
- Purge the records that are appropriate by the third Monday of each month.
- Communicate with the clerk regarding any purge that is not appropriate.
- Check to see if Family Services have been started and, if so, discontinuing services for those families scheduled to be purged.

## G. Enrollment and Re-Enrollment

### 1. General Enrollment Policy

Families find themselves in many situations and at times disenroll their children, but then, later on, want to re-enroll their child. CSB encourage families to return to the program should their situation allow. When families wish to re-enroll they are placed back on the waiting list and ranked accordingly. When children are enrolled in the Federal Head Start program, they remain eligible for services for the program year they are enrolled and the following year regardless of changes in income. If children are enrolled for a third program year in Head Start, the family income must be re-determined. When children are enrolled in the State Child Development program, they are recertified in accordance with the regulations to insure they remain eligible.

- When children are enrolled in the Early Head Start program, they remain eligible for services until they are three years old regardless of income.
- When EHS children are transitioning to Head Start, they must re-apply to determine eligibility for Head Start preschool services.
- When children are enrolled in part-day State Preschool, they remain eligible for continued services until the beginning of the next fiscal year regardless of income changes.
- Part-day State Preschool children seeking a second year of services must demonstrate income and age eligibility for continued services but have priority in placement without regard to income ranking in accordance with the Enrollment Priorities.
- Once an infant or toddler is enrolled in a General Child Care program they remain income eligible for subsidized services for not less than 24 months (with the exception for families whose need is Seeking Employment, their certification period will be for not less than 12 months) or only as long as the family income remains at or below 85% of the California median income.
- When family income is above 39 of the California median income, the General Child Care and full- day State Preschool enrollees are assessed a Family Fee based on the California Family Fee Schedule.

In our efforts to ensure services are available to the most vulnerable populations as per our community assessment, CSB may reserve vacant Head Start/Early Head Start slots for families experiencing

homelessness and/or foster children. No more than 3% of funded enrollment shall be reserved. Vacancies shall be reserved for no more than 30 days. After 30 days, the slot(s) shall be considered vacant.

## **2. Enrollment Placement**

### **i. In placing a child at a center, Site Supervisors are responsible for the following:**

- Review Eligible/Accepted List in CLOUDS.
- Select the child with the highest priority ensuring that all Head Start eligible children have been placed as vacancies occur, before enrolling any child above the federal poverty guidelines.
- Review all sections of child's file for special needs or concerns and proper placement of dots and accuracy.
- Check for any flagged items that may need follow up or a parent signature.
- Coordinate/schedule Family Meeting with parent, Comprehensive Services Assistant Manager, and other staff as needed.
- Contact parent for enrollment (placement) appointment.
- When meeting with the family:
  - Complete, date and sign new income information as needed and enter updated information on CLOUDS.
  - The 9600 form from CLOUDS is to be signed and dated by the authorized representative and parent.
  - Issue Notice of Action
  - Update Emergency Information (See CSB Forms > 0200-Health & Safety > CSB214 Student Emergency Card).
  - Complete Admission Agreement and hours of service contract on CLOUDS. Complete Parent Handbook receipt with parent.
  - Verify that the child's immunizations are up-to-date (Do not admit in center based programs until record is up to date, unless the enrolling child is homeless).
  - Review health history and ensure appropriate referrals have been made.
  - Move child from Eligible/Accepted List and place into appropriate classroom and Program Model.

## **H. Eligibility and Need Criteria and Documentation**

### **1. Residency Requirements**

To be eligible for child care and development services, the child must live in the State of California while services are being received.

Any evidence of a street address or post office address in California will be sufficient to establish residency. A person identified as homeless is exempted from this requirement and shall submit a declaration of intent to reside in California.

The determination of eligibility for child care and development services shall be without regard to the

immigration status of the child or the child's parent(s), unless the child or the child's parent(s) are under a final order of deportation from the United States Department of Justice.

Community Services Bureau provides Head Start and Early Head Start services to children/pregnant women who reside within the service area of Contra Costa County, and reside in the CSB service area. CSB does not serve a portion of Concord that is commonly referred to as the Monument Corridor. The area falls within the 94520 zip code in Concord and is bounded by Clayton Road to the North, Galindo Street to the Northeast, South along Monument Boulevard to Cleopatra Drive, southeast to Interstate 680 and west to State Route 242. This area is operated by the Unity Council of Alameda County. All other portions of the county are served by CSB. In accordance with the Head Start and Early Head Start Service Area Agreement adopted in 2016 among Bay Area Programs, every effort will be made to honor the family's choice to enroll their child in the program they choose. If a family resides outside of Contra Costa County, the family may enroll with CSB without asking permission from the residence grantee if any of the following reasons are valid.

- If a family lives geographically closer to an agency outside of their residential area.
- If the child is transitioning from EHS to HS, allowing for continuity of care.
- If the family works, goes to school, is in training or participating in other related activity outside the residence area.
- If the family starts one program and moves to another area, and they choose to continue enrollment in the program.
- Homeless families may enroll in the program most convenient to them (follow McKinney Vento definition).
- Children with disabilities should be given priority enrollment if there is no room in the residence program.

## **2. Documentation of Need Based on Employment, Seeking Employment, Training Toward a Vocational Goal, Seeking Housing, and Incapacity**

Families who are eligible for subsidized childcare and development services based on income, public assistance, or homelessness must document that each parent in the family meets a need criterion to enroll in a full-day CSPP or CCTR program. The need criteria are: vocational training leading directly to a recognized trade, para profession, or profession; educational program for English language learners or to attain a high school diploma or general educational development certificate; employment or seeking employment; seeking permanent housing for family stability; and incapacitation.

Subsidized childcare and development services shall only be available to the extent to which:

- The parent meets a need criterion that precludes the provision of care and supervision of the family's child for some of the day;
- There is no parent in the family capable of providing care for the family's child during the time care is requested; and Supervision of the family's child is not otherwise being provided by school or another person or entity.

### 3. Documentation of Employment

If the basis of need as stated on the application for services is employment of the parent, the documentation of the parent's employment shall include the days and hours of employment.

If the parent has an employer, the documentation of need based on employment shall consist of one of the following:

- The pay stubs provided to determine income eligibility that indicates the days and hours of employment;
- When the provided pay stubs do not indicate the days and hours of employment, staff shall verify the days and hours of employment by doing the following:
  - Secure an independent written statement from the employer;
  - Telephone the employer and maintain a record;
- If the provided pay stubs indicate the total hours of employment per pay period and if staff is satisfied that the pay stubs have been issued by the employer, specify on the application for services the days and hours of employment to correlate with the total hours of employment and the parent's need;
- If the variability of the parent's employment is unpredictable and precludes staff from verifying specific days and hours of employment or work week cycles, specify on the application for services that the parent is authorized for a variable schedule for the actual hours worked, identifying the maximum number of hours of need based on the week with the greatest number of hours within the preceding four weeks and the verification as noted above.;
- If the employer refuses or is non-responsive in providing the requested information, record attempts to contact the employer, and specify and attest on the application for services to the reasonableness of the days and hours of employment based on the description of the employment and community practice; or
- If the parent asserts in a declaration signed under penalty of perjury that a request for employer documentation would adversely affect the parent's employment, on the application for services:
  - Attest to the reasonableness of the parent's assertion; and
  - Specify and attest to the reasonableness of the days and hours of employment based on the description of the employment and community practice.

When the employed parent does not have pay stubs or other record of wages from the employer and has provided a self-certification of income, staff shall assess the reasonableness of the days and hours of employment, based on the description of the employment and the documentation provided, and authorizes only the time determined to be reasonable.

If the parent is self-employed, the documentation of need based on employment shall consist of the following:

- A declaration of need under penalty of perjury that includes a description of the employment and an estimate of the days and hours worked per week;
- To demonstrate the days and hours worked, a copy of one or more of the following: appointment logs, client receipts, job logs, mileage logs, a list of clients with contact information, or similar records; and

- As applicable, a copy of a business license, a workspace lease, or a workspace rental agreement.

A statement by staff assessing the reasonableness of the total number of days and hours requested per week based on the description of the employment and the documentation provided. If the parent has unpredictable hours of employment, staff shall authorize the parent for a variable schedule not to exceed the number of hours determined to be needed per week. If staff has been unable to verify need based on the documentation provided, staff shall take additional action to verify self-employment that includes any one or more of the following:

- If the self-employment occurs in a rented space, contacting the parent's lessor or other person holding the right of possession to verify the parent's renting of the space;
- If the self-employment occurs in variable locations, independently verifying this information by contacting one or more clients whose names and contact information have been voluntarily provided by the parent; or
- Making other reasonable contacts or requests to determine the amount of time for self-employment.
- If staff is unable to make a reasonable assessment of the hours needed for self-employment after attempting to verify such hours and documenting the attempts, staff may divide the parent's self-employment income by the applicable minimum wage. The resulting quotient shall be the maximum hours needed for employment per month.

The parent shall provide a release to enable the staff to obtain the information it deems necessary to support the parent's asserted days and hours worked per week.

If additional services are requested for travel time or sleep time to support employment, staff shall determine, as applicable, the time authorized for:

- Travel to and from the location at which services are provided and the place of employment, not to exceed half of the daily hours authorized for employment to a maximum of four hours per day; or
- Sleep, if the parent is employed anytime between 10:00 p.m. and 6:00 a.m., not to exceed the number of hours authorized for employment and travel between those hours.

#### **4. Documentation of Employment in the Home or a Licensed Family Day Care Home**

If the parent's employment is in the family's home or on property that includes the family's home, the parent must provide justification for requesting subsidized child care and development services based on the type of work being done and its requirements, the age of the family's child for whom services are sought, and, if the child is more than five years old, the specific child care needs. Staff shall determine and document whether the parent's employment and the identified child care needs preclude the supervision of the family's child.

If the parent is a licensed family day care home provider or an individual license-exempt, the parent is not eligible for subsidized services during the parent's business hours because the parent's employment does not preclude the supervision of the family's child.

If the parent is employed as an assistant in a licensed large family day care home, and is requesting services for the family's child in the same family day care home, the parent shall provide documentation

that substantiates all of the following:

- A copy of the family day care home license indicating it is licensed as a large family day care home;
- A signed statement from the licensee stating that the parent is the assistant, pursuant to the staffing ratio requirement of California Code of Regulations, title 22, section 102416.5(c);
- Proof that the parent's fingerprints are associated with that licensed family day care home as its assistant, which staff may verify with the local community care licensing office; and
- Payroll deductions withheld for the assistant by the licensee, which may be a pay stub.

### **5. Documentation of Seeking Employment**

If the basis of need as stated on the application for services is seeking employment, the parent's period of eligibility for childcare and development services is for not less than 12 months. Services shall occur on no more than five days per week and for less than 30 hours per week.

Documentation of seeking employment shall include a written parental declaration signed under penalty of perjury stating that the parent is seeking employment. The declaration shall include the parent's plan to secure, change, or increase employment and shall identify a general description of when services will be necessary.

### **6. Documentation of Training toward Vocation Goals / Educational program for English language learners**

If the basis of need as stated on the application for services is vocational training leading directly to a recognized trade, para-profession, or profession, child care and development services shall be limited to whichever expires first:

- Six years from the initiation of services; or
- Twenty-four semester units, or its equivalent, after the attainment of a Bachelor's Degree.

The parent shall provide documentation of the days and hours of vocational training to include:

- A statement of the parent's vocational goal;
- The name of the training institution that is providing the vocational training;
- The dates that current quarter, semester, or training period, as applicable, will begin and end;
- A current class schedule that is either an electronic print-out from the training institution of the parent's current class schedule or, if unavailable, a document that includes all of the following:
  - The classes in which the parent is currently enrolled;
  - The days of the week and times of day of the classes; and
  - The signature or stamp of the training institution's registrar.
  - The anticipated completion date of all required training activities to meet the vocational goal; and

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- Upon recertification, as applicable, a report card, a transcript, or, if the training institution does not use formal letter grades, other records to document that the parent is making progress toward the attainment of the vocational goal.

Services may be provided for classes related to the General Education Development (GED) test or English language acquisition.

On-line or televised instructional classes that are unit bearing classes from an accredited training institution shall be counted as class time at one hour a week for each unit. The parent shall provide a copy of the syllabus or other class documentation and, as applicable, the Web address of the on-line program. The accrediting body of the training institution shall be among those recognized by the United States Department of Education.

Ongoing eligibility for services based on training is contingent upon making adequate progress. At recertification, the parent shall provide documentation of the adequate process from the most recently completed quarter, semester, or training period. The parent shall, in the college classes, technical school, or apprenticeship for which subsidized care is provided:

- In a graded program, earn a 2.0 grade point average; or
- In a non-graded program, pass the program's requirements in at least 50 percent of the classes or meet the training institution's standard for making adequate progress.

The first time the parent does not meet the condition of making adequate progress, the parent may be recertified and continue to receive ongoing services. At the conclusion of this eligibility period, the parent shall have made adequate progress in order to be recertified for services based on vocational training. If the parent has not made adequate progress, services for this purpose shall be:

- Disenrolled; and
- Services based on vocational training are only available to the parent, to the extent provided by subdivision (a), after six months from the date of disenrollment.

To document adequate progress, the parent shall provide staff with a copy of the parent's official progress report from the most recently completed quarter, semester, or training period. Staff may require the parent to:

- Have an official copy of a progress report sent directly from the training institution to staff; or
- Provide a release, as may be required by the training institution, to enable staff to verify the parent's progress with the institution.

A parent may change his or her vocational goal, but services shall be limited to the time or units remaining from the initiation of the provision of services for vocational training.

Staff shall determine the days and hours needed per week, and whether the parent is making progress, based on the documentation. Staff may request that the parent provide a publication from the training institution describing the classes required to complete the parent's vocational goal.

If additional services are requested for study time or travel time to support the vocational training, staff

shall determine, as appropriate, the amount of services needed for:

- Travel to and from the location at which services are provided and the training location, not to exceed half of the weekly hours authorized for training to a maximum of four hours per day; or
- Study time, including study time for on-line and televised instructional classes, according to the following:
  - Two hours per week per academic unit in which the parent is enrolled;
  - On a case-by-case basis and as may be confirmed with the class instructor, additional time not to exceed one hour per week per academic unit in which the parent is enrolled; and
  - On a case-by-case basis, no more than the number of class hours per week for non-academic or non-unit bearing training.

The service limitations specified above shall not apply to a parent who demonstrates he or she is:

- As of June 27, 2008, receiving services for vocational training and has attained a Bachelor's Degree;
- Receiving services from a program operating pursuant to Education Code section 66060;
- Attending vocational training when the parent has been deemed eligible for rehabilitation services by the California Department of Rehabilitation; or
- Attending retraining services available through the Employment Development Department of the State or its staffs due to a business closure or mass layoff.

#### **7. Documentation of Parental Incapacity**

If the basis of need as stated on the application for services is parental incapacity, child care and development services shall not exceed 50 hours per week.

Documentation shall include a release signed by the incapacitated parent authorizing a legally qualified health professional to disclose information necessary to establish that the parent meets the definition of incapacity, and needs services.

The documentation of incapacitation provided by the legally qualified health professional shall include:

- A statement that the parent is incapacitated, that the parent is incapable of providing care and supervision for the child for part of the day, and, if the parent is physically incapacitated, that identifies the extent to which the parent is incapable of providing care and supervision;
- The days and hours per week that services are recommended to accommodate the incapacitation, taking into account the age of the child and the care needs. This may include time for the parent's regularly scheduled medical or mental health appointments; and
- The name, business address, telephone number, professional license number, and signature of the legally qualified health professional who is rendering the opinion of incapacitation and, if applicable, the name of the health organization with which the professional is associated.

Staff may contact the legally qualified health professional for verification, clarification, or completion of the provided statement.



Staff shall determine the days and hours of service based on the recommendation of the health professional and consistent with the provisions of this article.

The period of eligibility for services when the need for services is incapacitation is for not less than 24 months.

#### **8. Documentation of Seeking Permanent Housing**

If the basis of need as stated on the application for services is seeking permanent housing for family stability, the parent's initial certification or recertification period for child care and development services shall be for not less than 24 months. Services shall occur on no more than five days per week and for less than 30 hours per week.

Documentation of seeking permanent housing shall include a written parental declaration signed under penalty of perjury that the family is seeking permanent housing. The declaration shall include the parent's search plan to secure a fixed, regular, and adequate residence and shall identify a general description of when services will be necessary. If the family is residing in a shelter, services may also be provided while the parent attends appointments or activities necessary to comply with the shelter participation requirements.

At any time between the initial certification or recertification period, a parent may voluntarily request an increase to their certified child care hours based on provided documentation of employment or on other basis for need as applicable.

#### **9. Documentation of Child Protective Services**

##### **i. General Procedures**

CSB Head Start is committed to providing child development services for all eligible children and pregnant women who are currently involved in the child welfare system and Children and Family Services (CFS) for the purpose of improving young children's access to and continuity of comprehensive, high quality early care and education services. The partnership between CSB and CFS ensures that staff understands the complex (social, emotional, developmental and physical) needs of this vulnerable population. This partnership is in compliance with the administration for children and families' information memorandum acyf-cb-im-11-01 issued January 31, 2011.

If eligibility and need is based on a child/family's involvement in the child welfare system/child protective services (CPS/CFS), the basic data file must contain a written referral-Form CSB622, dated within the six (6) months immediately preceding the date of application for services, from a legal, medical, social service agency or emergency shelter. The written referral must include either:

- A statement from the local county welfare department, child protective services (CPS/CFS) unit certifying that the child is receiving child protective services and that the child care and development services are a necessary component of the child protective services plan, or
- A statement by a legally qualified professional that the child is at risk of abuse or neglect and

- the child care and development services are needed to reduce or eliminate risk, and
- The probable duration of the child protective service plan or the at-risk situation, and
- The name, address, telephone number and signature of the legally qualified professional who is making the referral.

## ii. Children and Family Service Referrals

Families may be referred to CSB for enrollment from Children and Family Services (CFS), if child care is deemed a necessary piece of the service plan. CSB will review the referral to determine a family's eligibility for Head Start, Early Head Start, Center Based, Stage II and CAPP programs. Based on eligibility and need requirements the referral will be forwarded to the appropriate program, taking into consideration parental choice. Once the referral is received by the appropriate unit, the family will be contacted to determine eligibility. If the family is eligible and meets all necessary requirements, they may be enrolled in the program provided there is space. If there is no space or funding available in any of CSB's programs, the ERSEA Analyst will forward the referral to an outside agency for potential enrollment. At this time staff will notify the referring individual whether or not the family was enrolled or referred to an outside agency.

### I. Certification of Eligibility

The Comprehensive Services Assistant Manager or designee is authorized to certify eligibility prior to initial enrollment and at the time of recertification. The authorized representatives must certify each family's/child's eligibility for childcare and development services after reviewing the completed application and documentation contained in a basic data file that is established and maintained at the site. All data is uploaded to CLOUDS, a central computerized database.

Prior to enrollment, the authorized representative certifies eligibility by completion of the following forms:

- Application for Childcare and Development Services
- Notice of Action, Application for Services

Prior to enrollment, parents may contact Site Supervisors, Assistant Directors, Comprehensive Services team members, and teachers at any sites in Contra Costa County to obtain an application for services. Or they may call one of the enrollment hotline numbers to place themselves on a waiting list.

At the time the authorized representative certifies or recertifies eligibility of a family/child for child care and development services, he/she shall inform the family of the family's responsibility to notify the staff within 30 calendar days if their family income adjusted for family size exceeds 85 percent of the state median income.

This information is noted on the Notice of Action and Site Supervisor/Comprehensive Services Manager must review the contents and, if needed, provide an explanation of what the "Declaration" means.

When a child's residence alternates between the homes of separated or divorced parents, eligibility, need and fees should be determined separately for each household in which the child is residing during the time child development services are needed (i.e., separate certifications and service agreements). For example, a child may be subsidized during part of the week and full cost the rest of the week.

## **J. Re-certification for General Child Care Services and Full Day State preschool**

After initial certification and enrollment, the authorized representative must verify need and eligibility and re-certify each family/child as follows:

Once a family establishes eligibility and need at initial certification or recertification, a family remains eligible for services for not less than 24 months, with the exception for families whose need is Seeking Employment, their certification period will be for not less than 12 months or until the family's adjusted monthly income exceeds 85 percent of the state median income.

Families must be recertified at least once each contract period and no earlier than 24 months from their last certification (with the exception for families whose need is Seeking Employment, their certification period will be for not less than 12 months). The process for verifying continued eligibility and need shall commence following this 24-month period and conclude before the end of the 26th month and for families with the certified need of Seeking Employment the process will begin after the 12-month period and conclude before the end of the 14th month.

## **K. Re-Certification for Part-Day State Preschool Children**

Part-day State Preschool families must be certified at the beginning of service using the most recent income documentation and may be certified up to 120 days before the services' start date.

After a first year of service, a family must reapply to determine income and age eligibility before a child can be considered for enrollment for a second year. These returning children have placement priority without regard to income ranking as described in the Enrollment Priorities guidance.

## **L. Re-Certification for Head Start and Early Head Start Children**

### **1. Duration of Eligibility**

CSB certifies Head Start children into the program based on family income eligibility at the time of enrollment using the federal income guidelines.

Once a child is enrolled, that child does not need to be re-certified even if the family income rises above the federal poverty level for the first year of enrollment and the following year. Re-certification is only required for a child entering a third program year of Head Start.

Early Head Start children must be re-certified for eligibility when they transition to a Head Start program for preschool age children.

### **2. Loss of Subsidy**

To ensure continuity of services for Early Head Start-Child Care Partnership (EHS-CCP) children, CSB will not dis-enroll due to a loss of child care subsidy. EHS-CCP grant funds will be used to temporarily cover the cost of lost subsidy and the continuation of services. CSB staff must work with the family to improve

the situation that caused the loss of subsidy and provide assistance with regaining the subsidy. The family is expected to regain subsidy once circumstances have been improved and comply with request for documentation required to certify eligibility for the child care subsidy. The family's failure to comply with documentation requests as mandated by the terms of the subsidy is not in itself an allowable circumstance to constitute loss of subsidy.

The following circumstances may justify the use of EHS-CCP funds to cover loss of subsidy:

- Families experiencing job loss
- Gap/Break in education or training
- Gap/Break in approved "Welfare to Work Activity" participation
- Break in childcare agreements while pending subsidy application/reapplication or transfer, such as a transfer from Stage 1 to Stage 2
- Loss of child care subsidies due to exceeding state or local income requirements

If it is not possible for a family's subsidy to be restored, the EHS-CCP grant will be used to cover the full cost of maintaining the child's continued enrollment in the program. This cost will be determined by the reimbursement amount paid by the subsidy for services the child received at the time of subsidy termination, accounting for adjustment factors and day length. Case note documentation and a Notice of Action- Termination (for CA Child Care and Development Programs) will justify the use of EHS-CCP grant funds for the child's continued services. The Comprehensive Service Assistant Manager responsible for enrollment within the childcare subsidy will provide documentation of applicable subsidy loss to CSB's fiscal unit and the child will be dropped from the CCTR/EHS-CCP program model and re-enrolled in EHS-CCP only.

Families who lose their subsidy will not be required continue to pay a family fee. Family fees will be assess in accordance with CDE regulations should subsidy be re-instated.

## **M. General Recertification / Re-Enrollment Procedures**

### **1. Recertification Procedures**

During the recertification process, the authorized representative is responsible for the following:

- Track families needing to be recertified using the Enrollment Recertification Due Date report in CLOUDS.
- Notify families to bring updated eligibility and/or need documentation on first of the month following the month in which their 12-month certification period ends.
- Collect recertification or re-enrollment documentation.
- Complete new 9600 on CLOUDS.
- Complete new income calculation sheet (signed and dated).
- Update reason for needing child care and application type on the child data sheet (See "eligibility information" on the child data sheet).

- Proceed with certification procedures as listed above if family is still income eligible.
- Issue Notice of Action, certifying continuation, changes or termination of services. (Note: adverse action requires a 14-day written notification, 19-days if mailed).
- Drop file on CLOUDS on the last day of service and prepare paper file for storage (Note: Childs "waitlist" or "termination" activity date is the day after the child's last day). The Children's file folders are to be re-used.
- Update CLOUDS record as needed.
- Maintain files of terminated children in locked location at site for one year until after program audit in October or November.
- Send dropped and files of terminated clients to central location after completion of program audit.

## 2. Re-Enrollment Process

During the re-enrollment process, Site Supervisors in collaboration with Comprehensive Services and the Centralized Enrollment Unit are responsible for the following:

- In June, identify children for roll-over.
- In July, place roll-over children into appropriate classrooms and Program Model, from Eligible/Accepted list in CLOUDS.
- For previously enrolled Part-day State Preschool child requesting re-enrollment, follow guidelines for completely new 9600 application with all new documentation.
- If a child's CLOUDS record was archived within the program year, request Centralized Enrollment Assistant Manager to reactivate child's CLOUDS record and place child back on to Eligibility Wait List.
- Follow approved guidelines for selecting children.

## N. Updating the Application

The family has the right to voluntarily report changes during the certification period. The authorized representative must update the family's application for General Child Care and Full-day State Preschool to document and determine a reduction to fee assessment or change to authorized hours of care, if applicable, within ten (10) business days whenever the family reports and provides necessary documentation for a change in family size, income, public assistance status or need. If a family requests to reduce their authorized hours of care within the certification period, they must do so in writing. Form 9600S will be used for application updates between re-certifications. 9600S must also be accompanied by a Notice of Action for updates effecting need, eligibility, or certified hours of care.

## O. Contents of Basic Data File

Staff must establish and maintain a basic data file for each family receiving childcare and development services. The basic data file (either electronic copy in CLOUDS or a hard copy maintained at the center) must contain a signed application for services with:

- The parent's(s) full name(s), address(es) and telephone number(s).
- The names, gender and birth dates of all children under the age of eighteen (18) counted in the family size whether or not they are served by the program.

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- The number of hours of service each day for each child.
- The names of other family members in the household related by blood, marriage or adoption.
- The reason for needing childcare and development services, if applicable.
- Employment or training information for parent(s) including name and address of employer(s) or training institution(s) and days and hours of employment or training, if applicable.
- Eligibility status.
- Family size and income, if eligibility is based on income.
- The parent's signature and date.
- The signature of the Site Supervisor/Authorized Agency Representative certifying the eligibility and date of signature.
- A notation on when the first services begin and a notation of the last day services were received.

The data file must also contain, as applicable:

- Documentation of income eligibility, including an income calculation worksheet.
- Documentation of employment.
- Documentation of seeking employment.
- Documentation of training.
- Documentation of parental incapacity.
- Documentation of child's disabilities.
- Documentation of homelessness.
- Documentation of seeking permanent housing for family stability.
- Written referral from a legally qualified professional from a legal, medical, or social services agency, or emergency shelter for children at risk of abuse, neglect, or exploitation.
- Written referral from a county welfare department, child welfare services worker, certifying that the child is receiving protective services and the family requires childcare and development services as part of the case plan.
- If the parent of the child was on cash assistance, the date the parental cash aid was terminated.
- Notice of Action (as stated above in detail) and/or Recipient of Services.
- All child health and current emergency information required by California Code of Regulations, title 22, Social Security, Division 12, Community Care Facilities Licensing Regulations.

### **1. Documentation and Determination of Family Size**

A parent shall provide the names of the parents and the names, gender and birthdates of the children identified in the family. This information shall be documented on a confidential application for childcare and development services and used to determine family size. The parent shall provide supporting documentation regarding the number of children in the family.

The number of children shall be documented by providing at least one of the following documents, as applicable\* for the state funded program:

- Birth certificates.
- Court orders regarding child custody.
- Adoption documents.

- Records of Foster Care placements.
- School or medical records.
- County welfare department records; or
- Other reliable documentation indicating the relationship of the child to the parent.

\*Federally funded programs require documentation for the child to be enrolled, only. In state funded programs, when only one parent has signed the application and has indicated on the application that they are a single parent, then the parent signing the application must self-certify single parent status by initialing question one (1) in Section V of the application. A parent shall not be required to submit supporting documentation regarding the presence or absence of the second parent.

For income eligibility and family fee purposes, when a child and his or her siblings are living in a family that does not include their biological or adoptive parent, only the child and related siblings shall be counted to determine family size. In these cases, the adult(s) must meet a need criterion.

## **2. Documentation of Income Eligibility**

The parent is responsible for providing documentation of the family's total countable income and the staff is required to verify the information, as described below:

The parent(s) shall document total countable income for all the individuals counted in the family size as follows:

### **i. If the parent is employed, provide:**

- A release authorizing the staff to contact the employer(s), to the extent known, that includes the employer's name, address, telephone number, and usual business hours, and
- All payroll check stubs, a letter from the employer delivered to CSB independent of the employee, or other record of wages issued by the employer for the month preceding the initial certification, an update of the application, or the recertification that establishes eligibility for services.

When the employer refuses or fails to provide requested documentation or when a request for documentation would adversely affect the parent's employment, provide other means of verification that may include a list of clients and amounts paid, the most recently signed and completed tax returns, quarterly estimated tax statements, or other records of income to support the reported income, along with a self-certification of income.

### **ii. If the parent is self-employed, provide:**

A combination of documentation necessary to establish current income eligibility for at least the month preceding the initial certification, an update of the application, or the recertification that establishes eligibility for services. Documentation shall consist of as many of the following types of documentation as necessary to determine income:

- A letter from the source of the income,
- A copy of the most recently signed and completed tax return with a statement of current estimated income for tax purposes, or
- Other business records, such as ledgers, receipts, or business logs.

Parents shall provide copies of the documentation of all non-wage income, self-certification of any income for which no documentation is possible, and any verified child support payments.

Staff shall retain copies of the documentation of total countable income and adjusted monthly income in the family data file.

When the parent is employed, staff shall, as applicable, verify the parent's salary/wage; rate(s) of pay; potential for overtime, tips or additional compensation; hours and days of work; variability of hours and days of work; pay periods and frequency of pay, start date for the employee. If the employer refuses or is non-responsive in providing requested information or a request for employer documentation would adversely affect the parent's employment, and if the information provided by a self-employed parent is inconsistent with the staff's knowledge or community practice, shall request clarification in the self-certification of income, additional income information or a reasonable basis for concluding that the employer exists.

When the parent is self-employed, staff shall obtain and make a record of independent verification regarding the cost for services provided by the parent that may be obtained by contacting clients, reviewing bank statements, or confirming the information in the parent's advertisements or website. If the income cannot be independently verified, the staff shall assess whether the reported income is reasonable or consistent with the community practice for this employment.

Staff may request additional documentation to verify total countable income to the extent that the information provided by the parent or the employer is insufficient to make a reasonable assessment of income eligibility.

To establish eligibility, staff shall, by signing the application for services, certify to the staff's reasonable belief that the income documentation obtained and, if applicable, the self-certification, support the reported income, are reliable and are consistent with all other family information and the staff's knowledge, if applicable, of this type of employment or employer.

If the family is receiving child care and development services because the child(ren) is/are at risk of abuse, neglect, or exploitation or receiving child protective services and the written referral specifies that it is necessary to exempt the family from paying a fee, then the parent will not be required to provide documentation of total countable income.

If the basis of eligibility is a current aid recipient, the staff shall obtain verification from CalWIN.

### **3. Calculation of Income**

#### **i. General Procedures for calculating income**

Staff calculates total countable income based on income information reflecting the family's current and on-going income using an income calculation worksheet that specifies the frequency and amount of the payroll check stubs provided by the parent and all other sources of countable income.



When income fluctuates because of:

- Agricultural work, by averaging income from the 12 months preceding the initial certification, an update of the application, or the recertification that establishes eligibility for services.
- Intermittent income, by averaging the intermittent income from the preceding 12 months by dividing by 12 and add this amount to the other countable income.

Unpredictable income, by averaging the income from at least three consecutive months and no more than 12 months preceding the initial certification, an update of the application, or the recertification that establishes eligibility for services.

#### **ii. Over-Income Families-General Description:**

Both the State and Federal program allow over-income families meeting strict criteria. NO CHILD SHALL BE CONSIDERED FOR ENROLLMENT WITH AN INCOME ABOVE THE FEDERAL POVERTY GUIDELINE UNTIL ALL FAMILIES AT OR BELOW THE FEDERAL POVERTY GUIDELINES HAVE BEEN ENROLLED. To this end, it is critical that the recruitment plan be fully implemented and that extra efforts are made to assist income eligible families in completing the application to establish eligibility and be placed in the program expeditiously. After these efforts have been conducted, documented and certified, a request to waive the income guidelines may be made. The waiver form (See Forms > CSB606) includes a certification statement on the form where the outreach efforts are documented. A simple statement that “the waitlist has been exhausted” is never acceptable.

#### **iii. Over-Income Protocols**

When enrolling over-income families, the authorized representative is responsible for:

- Completing the over income waiver (CSB606).
- Submitting completed waiver to ERSEA Analyst for approval.
- Saving ERSEA Analyst approved waiver in child’s file

The ERSEA Analyst is responsible for:

- Tracking waivers to ensure that there are no income eligible children to enroll.
- Reviewing the aggregate waiver list on Shared Drive to ensure that all clusters have not exceeded the 10% unlimited over income designated primarily for children with an IEP or IFSP but for other cases as determined appropriate by the ERSEA Analyst or 35% limited over income enrollment for the Head Start and Early Head Start program, or the 10% limited over income for the part day preschool (PP) or the part day family literacy program (PPL).
- Signing form.
- Logging each waiver on database on shared drive.
- Analyzing placement of over income slots to inform recruitment and slot planning processes.
- Periodically purging the list as children transition out of the program.

#### **4. Documentation of the Child’s Exceptional Needs (known as Children with Disabilities at CSB).**

The family data file shall contain documentation of the child’s exceptional needs if the staff is claiming

adjustment factors. The documentation of exceptional needs shall include:

- A copy of the portion of the active individual family service plan (IFSP) or the individualized education program (IEP) that includes the information as specified in Education Code section 56026 and California Code of Regulations, title 5, sections 3030 and 3031; and
- A statement signed by a legally qualified professional that:
  - The child requires the special attention of adults in a child care setting; and
  - Includes the name, address, license number, and telephone number of the legally qualified professional who is rendering the opinion.

#### **P. Admission Policies and Procedures**

Children are admitted into the program based on need and family income adjusted for family size. Highest priority goes to children with need for protective services and/or having lowest income.

When a parent seeks services, the CSB staff collects family information and the child is placed on the CLOUDS waitlist.

As openings become available, names are drawn by rank from the CLOUDS waitlist for the various program options in accordance with the approved selection criteria/admission priorities.

If multiple families have the same rank, the family waiting the longest period of time is selected first. CSB makes available 10% of its federally funded spaces for children with disabilities and gives priority for its unlimited over income allotment to these children (also 10% of its funded slots).

Children will not be denied when a family needs less than full-time services.

Families who have been recruited for admissions to the program will be required to complete an application and provide supporting documentation. These documents must include current verification of income, immunizations and birth certification for the child applying for enrollment.

Letters informing the family of acceptance or denial for services must be sent once certification is complete. The family has the right to dispute the denial of services by providing additional information to prove eligibility to receive services.

#### **Q. General Admission Procedure**

When an opening occurs in the center, the authorized representative will call the parent with the highest rank on the CLOUDS eligible list for an appointment for processing eligibility documents, noting any change of income and need for service. At this time, the parent receives an official Notice of Action (NOA) approving or disapproving state funded services. The NOA provides information outlining the parent's due process rights in a statement on the back of the NOA. Parents wishing to appeal an agency decision must follow the procedure carefully or void the right to appeal. Following the timelines is essential. Parents applying for a Head Start only slot sign the Admissions Agreement and Application but do not

receive an NOA.

## R. Children's Enrollment Files

The Federal Regulations and the State of California require children's centers to maintain a file on each enrolled child including the following information:

- Birth Certificate to verify birth, age of child, gender and parents' names.
- Information on date of admission, termination and re-enrollment.
- Names, addresses and phone numbers of parents and other relatives and/or friend that may be contacted in case of emergency.
- A Health History is completed by the parent to collect information on child's general health.

This and much more information is collected during one-on-one parent meetings, while assisting the parent to complete the enrollment packet and assisting the parent with health needs of the child or issues of the parent and household. Information must be updated and data entered into CLOUDS as it is received.

## S. Due Process Requirements

### 1. Notice of Action, Application for Services

The authorized representative decision to approve or deny services shall be communicated to the applicant through a written statement referred to as a Notice of Action, Application for Services. The authorized representative shall maintain records of the Notice of Action, Application for Services in the basic data file. The Notice of Action, Application for Services shall include: (1) the applicant's name and address; (2) the authorized representative's name and address or the name and telephone number of the CSB authorized representative who made the decision; (3) the date of the notice; (4) the method of distribution of the notice.

If services are approved, the notice shall also contain: (1) basis of eligibility; (2) monthly fee, if applicable; (3) duration of the eligibility; (4) names of children approved to receive services; and (5) the hours of service approved for each day.

If the services are denied, the notice shall contain: (1) the basis of denial and (2) instructions for the parent(s) on how to request a hearing if they do not agree with the authorized representative's decision in accordance with procedures specified below.

### 2. Notice of Action, Recipient of Services

If, upon re-certification or update of the application, CSB determines that the need or eligibility requirements are no longer being met, or the fee amount of service needs to be modified, the authorized representative will notify the family through a written Notice of Action, Recipient of Services. The authorized representative will maintain records of all Notice of Action, Recipient of Services in the family's basic file. The Notice of Action, Recipient of Services will include: (1) the type of action being taken; (2) The effective date of action; (3) the name and address of recipient; (4) the name and address of CSB; (5) the name and telephone number of the CSB authorized representative who is taking the

action; (6) the date of notice is mailed or given to the recipient; (7) the method of distribution to the recipient; (8) a description of the action; (9) a statement of the reason(s) for the changes; (10) a statement of the reason(s) for termination, if applicable; and (11) instructions for the parent(s) on how to request a hearing if they do not agree with the authorized representative's decisions.

### **3. Approval or Denial of Child Care and Development Services**

The authorized representative will mail or deliver a completed Notice of Action, Application for Services to the parents within thirty (30) calendar days from the date the application is signed by the parent(s).

### **4. Changes Affecting Service**

The authorized representative will complete a Notice of Action, Recipient of Services when changes are made to the service agreement at the parent's request. Such changes may include, but are not limited to, an increase or decrease in the amount of services, or termination of service.

The authorized representative will mail or deliver the Notice of Action to the parents at least fourteen (14) calendar days before the effective date of the intended action.

To promote the continuity of child care and development services, a family that no longer meets a particular program's income, eligibility or need criteria may have their services continued if the authorized representative is able to transfer that family's enrollment to another program for which the family continues to be eligible prior to the date of termination of services. The transfer of enrollment may be to another program within the same administrative agency or to another agency that administers state or federally funded childcare and development programs within that county.

## **T. Alternative Placement for Children**

When terminating children from the state funded portion of the program, authorized representative is responsible for the following:

- Issue Notice of Action 14 days prior to termination date.
- Explain to parents their appeal rights.
- If parent does not appeal termination:
  - Enter information regarding reason for ending services in CLOUDS Child Data Sheet. Date and initial comments.
  - Change enrollment status in CLOUDS.
  - Discontinue services on Family Data Sheet.
  - Determine if child may return within the program year. If so, place child back on Eligible/Accepted List. If not, archive the CLOUDS record.
  - Assist the family in finding an alternate placement for the child.
- If parent appeals termination, send appeal notice to Assistant Director and continue to serve child until informed to move forward with termination.

Head Start children are always afforded an opportunity in another program option as space is available when their current setting is deemed inappropriate for the child. If the parent is ineligible for Head Start

or our state funded programs, they are to be referred to a partner site and/or to the county's resource and referral agency, Contra Costa Child Care Council (925-676-KIDS).

#### **U. Client's Request for a Hearing and Procedures**

If a parent in the state funded program disagrees with an action, the parent(s) may file a written request for a hearing with the authorized representative within fourteen (14) calendar days of the date the Notice of Action was received.

Upon the filing of a request for hearing, the intended action shall be suspended until the review process has been completed. The review process is complete when the appeal process has been exhausted or when the parent(s) abandons the appeal process.

Within ten (10) calendar days following the receipt of the request for a hearing, the authorized representative will notify the parent(s) of the time and place of the hearing. The time and place of the hearing will, to the extent possible, be convenient for the parent(s).

An Assistant Director, who will be referred to as "the hearing officer" will conduct the hearing. The hearing officer will be at a staff level higher in authority than the staff person who made the contested decision.

The parent(s) or parent's authorized representative is required to attend the hearing. If the parent or the parent's authorized representative fails to appear at the hearing, the parent will be deemed to have abandoned his or her appeal. Only persons directly affected by the hearing will be allowed to attend the hearing.

The Assistant Director will arrange for the presence of an interpreter at the hearing, if one is requested by the parent(s).

The Assistant Director will explain to the parent(s) the legal, regulatory, or policy basis for the intended action.

During the hearing, the parent(s) will have an opportunity to explain the reason(s) they believe the authorized representative's decision was incorrect. The authorized representative will present any material facts omitted by the parent(s).

The Assistant Director will mail or deliver to the parent(s) a written decision within ten (10) days after the hearing. The written decision shall contain procedures for submitting an appeal to ELCD.

#### **V. Appeal Procedure for ELCD Review**

If the parent disagrees with the written decision from the authorized representative, the parent has fourteen (14) calendar days in which to appeal to the ELCD. If the parent(s) do(es) not submit an appeal request to the ELCD within fourteen (14) calendar days, the parents' appeal process will be deemed abandoned and the authorized representative may implement the intended action.

The parent(s) will specify in the appeal request the reason(s) why he/she believes the authorized

representative decision was incorrect.

The parents must submit a copy of CSB's Notice of Action with the appeal request, and CSB's written decision.

Upon receipt of the appeal request, the ELCD may request copies of the basic data file and other relevant materials from CSB. The ELCD may also conduct any investigations, interviews or mediation necessary to resolve the appeal.

The decision of the ELCD will be mailed or delivered to the parent(s) and the authorized representative within thirty(30) Calendar days after receipt of the appeal request.

#### **W. CSB Compliance with ELCD Decision**

CSB will comply with the decision of the ELCD immediately upon receipt thereof.

CSB will be reimbursed for childcare and development services delivered to the family during the appeal process.

If the authorized representative determination that a family is ineligible is upheld by the State, services to the family will cease upon receipt by the authorized representative of the State's decision.

#### **X. Retention of Enrollment Records**

Delegate Agencies, the Grantee-Operated Program, and sub-contractor retain copies of official enrollment application forms, which contain certification data for each child enrolled during the program year for 5 years.

Copies of enrollment records serve as a primary source document for audit purposes.

Cooperation with local Contra Costa County welfare offices is encouraged for recruiting eligible children into the program.

#### **Y. Enrolled but Waiting For Transfer Protocol**

When staff has a child/family that wants to transfer sites:

- Comprehensive Services staff and site staff who learn about a family wanting to transfer communicate via email to all applicable SSs, CSAMs, the Central Enrollment Unit (CEU) & Partners (as known or Partner CSAM) the need for a transfer. Make additional calls as necessary.
- Clearly and fully document the transfer in the case file on CLOUDS.
- Clearly and fully explain to the family about any changes they may experience as a result of a possible program model change at time of transfer to other center (ex: part-day to full-day - family must now show need)

When staff are searching to fill an open slot:

- Notify CSAM immediately upon determination that a slot will become available.
- CSAM check notes for any children that are enrolled but waiting for a slot.
- CSAM of current center reviews files for pending issues prior to transfer and communicates any issues to receiving CSAM. Transfer file to new center's Site Supervisor or designee.
- Authorized representative completes 9600S and NOA. Also, collect any additional documentation required for program model change (see Eligibility and Need Criteria Documentation Checklists)
- Site Supervisor enrolls the child from CLOUDS.

## Z. Transfer of Child with Disabilities or of Child Receiving Mental Health Services

When a child with disabilities or receiving mental health services transfers to another CSB site, communication is vital. The Comprehensive Services team member is responsible for notifying the Site Supervisor/Head Teacher and CS/Disabilities/Mental Health Manager in writing. Notification is to be sent before the child begins at another site so that necessary arrangements or accommodations can be made.

The Site Supervisor/Head Teacher will inform the appropriate teacher of the transfer. The Comprehensive Services team member and the CS/Mental Health Manager will complete this process within two weeks of notification of an opening.

### AA. CSPP Full-day to Part-Day or Tuition Based Approval Process

#### 1. General Description

In the event that a family loses eligibility or need for services during the program year, CSB has the discretion to offer families the option to receive services part-day (less than 4 hours per day) or pay a fee for full-day services (Tuition Based) rather than terminate services. Part-day services could be offered in the child's same class or in another class during the "pre-school portion of the day" (8:30 – 12:00) as available. Whenever possible, the child will be allowed to stay in their current classroom.

CSB fiscal unit tracks CDE earnings monthly, and notifies program staff if the risk of under earning develops. If under earning is a risk, ADs cease to approve all moves to part-day until risk subsides according to reports from fiscal unit.

#### 2. Action Guidance for Staff

##### i. Full-day or $\frac{3}{4}$ time to Part-day

- At recertification, the authorized representative determines family no longer meets eligibility or need criteria (for more than 4 hours of care) and issues NOA for termination of full-day (or  $\frac{3}{4}$  time) services effective 14 or 19 days as appropriate.
- The below process must be complete no later than the effective date of action noted on the NOA.
- Authorized representative ensures that each class is fully enrolled morning and afternoon through enrollment and certified hours of care.
- Authorized representative determines if part-day services are available during the

preschool portion of the day (8:30 – 12:00).

- If available, the Authorized representative and family determine if part-day services are desirable and appropriate.
- If desired by the family and appropriate, Authorized representative completes approval form CSB607 (See CSB Forms).
- If part-day services are unavailable, not desired by the family or inappropriate, authorized representative terminates the child and closes the file.
- AD approves or denies CSB607 request, maintains original for her records and returns a copy to the site.
  
- If approved, authorized representative files copy in student file, updates CLOUDS (waitlist & re-enroll with new program model), and updates student file including the following and moves the child to part-day services on date on or after AD approval date and no later than effective date of NOA terminating full-day (or  $\frac{3}{4}$  time) services.
  - Completed 9600S – update program model at least and hours of care, and other information as applicable
  - Income and family size remain as they were at original enrollment unless documentation of current income or family size benefits the family.
  - NOA stating change to part-day services - effective date is same as effective date for termination of full-day services (or before if desired by the parent).
  - Update CLOUDS hours of care.
  - Update CLOUDS program model (while retaining previous enrollment history), reason for needing care (if applicable), program option (if applicable) to “part-day center- based”, and any other appropriate updates.
  - The Site Supervisor ensures child is reflected on appropriate 9400s for appropriate number of days during the month of the move.

**ii. Full-day or  $\frac{3}{4}$  time to Tuition Based (TB)**

- At recertification, the authorized representative determines family no longer meets eligibility or need criteria (for more than 4 hours of care) and issues NOA for termination of full-day (or  $\frac{3}{4}$  time) services effective 14 or 19 days as appropriate.
- Authorized representative ensures that each class is fully enrolled morning and afternoon through enrollment and hours of care.
- Authorized representative determines if TB services are available.
- If available, authorized representative and family determine if TB services are desirable and appropriate.
- If desired by the family and appropriate, authorized representative completes approval form CSB607 (See CSB Forms).
- AD approves or denies request, maintains original for her records and returns a copy to the site.
- If approved, authorized representative closes file and CLOUDS, completes all applicable paperwork and required forms, including an NOA stating termination of services and moves the child to TB services on first day after the end of the 14 to 19 day NOA waiting period.
- The Site Supervisor ensures child is reflected on 9400 for only the appropriate number of days during the month until the date the move to TB services was effective.



- See section at end of this manual for Tuition Based services policies and procedures.

## **BB. Withdrawal of Child from the Program**

When the teaching staff learns that a child has terminated services, they should notify the Site Supervisor. The “last day attended” should be noted on the child's application (9600) and the sign in/out sheet. They must also notify the CSAM immediately upon knowledge of a pending vacancy. Whenever possible, the reason for the withdrawal should be ascertained and recorded. The child's termination date in CLOUDS is the first date the child does not attend so that attendance data can be captured for the last day of attendance.

Parents who wish to reinstate must meet Title V Regulations. If the parents are successful in meeting the Title V Regulations, the parent must complete all required paperwork and provide income documentation.

The following are some reasons that a child might be placed back on the waiting list (please see Parent Handbook for a complete listing):

- A pattern of unexcused absences - Poor attendance / sporadic attendance is defined as three or more unexcused absences. When this occurs, the teacher calls the Site Supervisor, who makes personal contact with the parent as soon as they realized a child has not attended and the parent has not called. If multiple service needs are disclosed by a parent, he/she should be offered Case Management services in order to create a plan to correct the absenteeism. Every effort is made to assist parents in removing barriers to attendance.
- Parent's failure to comply with rules/regulations, resulting in danger to the health / safety of children / staff – (Must be approved by the Assistant Director)
- Parent's failure to comply with health requirements as mandated by Community Care Licensing.
- Extreme behavior problems in a child that may be harmful to the child or others (This must be based on a joint assessment by the CS / Disabilities / Mental Health Manager, and the Site Supervisor.)
- For General Childcare, a change in income or need eligibility status such that the family is no longer eligible for care or failure to submit required documentation to verify continued need/eligibility at recertification.
- For the full-year program, kindergarten-bound CSPP eligible 4 year olds begin to transition out of the program at the end of the program year, which ends June 30th. Those children who have been determined eligible before the end of the program year may remain in the program until they start kindergarten as long as they are still within their certification period. Each year, the program will determine last days of enrollment extended past June 30th and take into consideration the community need for continued services.

When a child has been disenrolled from the program, the Site Supervisor will then call the Assistant Director, CSAM and teacher, notifying them of a new child replacing the terminated child. The Site Supervisor will call the parent of the terminated child, informing him/her that the child has been put back on the waiting list. If a terminated child is brought to school, the parent should be told to speak to the Site Supervisor.

## CC. Attendance Expectations

### 1. General Description

CSB children are expected to attend classes daily. Regular attendance is strictly enforced, and each center maintains documentation of all attendance/absenteeism activities. Upon registration, parents are oriented about enrollment/attendance policies. Each parent receives a copy of the attendance policies, and the importance of regular attendance is stressed to them. Re-orientation of the enrollment/attendance policies occurs at the beginning of classes, and ongoing reminders are communicated as needed. Parents are expected to report absence reasons to the center as soon as possible and within one hour of their child's start time.

### 2. Unexcused Absences

To ensure children are safe when they do not arrive at school, CSB must make attempts to contact parents within one hour for unexpected absences. CSB utilizes SMS technology to efficiently communicate with families. Strategies to contact families within one hour include the use of CLOUDS automatic SMS (text) messages. Parent can reply via text messaging to inform center staff of absence reasons. Each day a child's absence is not reported by the parent, the Site Supervisor or center staff contacts the parent to determine the cause of the absence and to clarify the attendance policy.

After two consecutive unexcused absences, direct contact is made with the parent, such as a conference or home visit. Parents are informed that failure to participate in the conference or visit may result in a loss of services and will be placed onto the waiting list.

After ten consecutive or intermittent days of unexcused absences, the child is dropped from the active program and is put back onto the waiting list. (Children absent due to illness are counted in the Average Daily Attendance criteria.) Site supervisor will check attendance sheets daily or at least three times a week to ensure attendance policies are implemented.

### 3. Re-occurring Absences

Site Supervisors, in collaboration with teaching staff, will identify and assess patterns of absences for each child. Within 60 days, children with patterns of absences and those at risk of reaching an absence rate of 10% are identified and family support services provided. Absences per child are analyzed on a monthly basis utilizing CLOUDS reports. Family meetings are held as needed to clarify the attendance policy and identify strategies in which a family may implement to improve attendance.

## DD. Attendance Accounting

### 1. General Description

Accountings for attendance is completed daily by the classroom teacher by ensuring parents sign their child into CLOUDS **upon arrival**. Absence reasons are entered into CLOUDS daily and no later than Friday of each week, and reports are utilized to ensure that each center maintains 85% monthly attendance for all federally funded slots. If the monthly attendance rate falls below 85%, the Site Supervisor will be notified by the ERSEA Managers and will utilize the CLOUDS absence reports to analyze the reasons. If

average program attendance for federally funded slots falls below 85% for any month, the ERSEA Manager develops a corrective action plan after analyzing data and identifying root causes.

Within 60 days and on an ongoing basis, patterns of absences per child are analyzed. A risk assessment for chronic absenteeism is conducted. Chronic absenteeism is defined as an absence rate of 10% of the program days per year.

## 2. Procedure

### i. Directly Operated Sites

Attendance is captured at CSB centers by CLOUDS via the wall pads as parents electronically sign their child into the program. Teachers must ensure that this is done immediately upon the child's arrival to the classroom.

If a parent fails to sign their child into CLOUDS, staff must do the following:

- Staff will "sign" child into CLOUDS without a signature to place the child in the classroom and part of the ratio.
- The parent **MUST** be called back to the center to sign-in on the hard copy sign-in/out sheet (CSB682) with the original drop-off time which can be obtained from CLOUDS.
- In CLOUDS staff will select "Parent no sign in" from the drop down menu as the Reason under the Attendance Sign-in/out sheet for the specific child.

If the parent fails to sign their child out in CLOUDS, staff must do the following:

- Staff will "sign" child out in CLOUDS without a signature to take the child out of the classroom and out of the ratio.

Staff will notify the parent as soon as the parent or authorized representative returns to the center (i.e. next morning) that a sign-out signature was not collected. The parent will sign out on the hard copy sign-in/out sheet (CSB682) with the original sign out time which can be obtained from CLOUDS. In CLOUDS, staff will enter "Parent no sign out" from the drop down menu as the reason under the attendance sign-in/out sheet for the specific child.

In the event that the electronic system fails and parents are not able to sign their children in or out of CLOUDS, staff **MUST** do the following:

- A hard copy sign-in/out sheet (CSB682) shall be maintained by each classroom teacher which the parents will use to sign in and/or out until CLOUDS is back on-line.
- As soon as the system comes back up, staff will sign children in and/or out (as applicable) of CLOUDS **without a signature** to place them in or out of the classroom for ratio purposes.
- Staff will do this by using the Manual Attendance feature in CLOUDS to sign children in and/or out, enter attendance/absences and enter meal counts for the time CLOUDS was not operational. For this purpose it is acceptable for staff to select the child's general contract hours

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for the approximate sign in and out times as parents will already have physically signed on the hard copy sign-in/out sheet (CSB682) with the correct sign in and out times. Even if some children are signed-in on CLOUDS when this update by staff takes place, clicking on “All Attendance” will only affect those who have not yet signed in; other children’s data will not be affected.

A code is used consistently throughout the entire program to mark Present, Excused Absence, and Unexcused Absence. Absences are marked with an “A” and given the excuse provided by the parent in the comment section of the sign-in sheet. The teacher determines if the absence is excused in accordance with the excused and unexcused absence policies included herein. When absences are excused, the “A” is enclosed in a circle “(A)”. All information must be immediately entered into CLOUDS when the system becomes available through the manual attendance section or the wall pad by doing the following:

- **Wall Pad:**
  - Go to Reports
  - Select the month
  - Select the child
  - Click on the Attendance button
  - Enter Attendance data
  
- **CLOUDS:**
  - Go to Attendance Folder
  - Select Manual Attendance
  - Click on the “A” box for that child
  - Enter the Attendance data

Teachers must enter absence reasons daily and review for accuracy by Friday of each week via the Wall Pad system. Parents are responsible for reporting absence reasons within one hour of their child's start time and must give the reason for a child’s absence when the child returns to school if not already provided. On occasions where the child has not returned to school, the Site Supervisor can enter the reason for absence in CLOUDS after contacting the parent.

At the end of the month, the Teacher reviews each attendance record via the Wall pad system and verifies the totals for the days of attendance, excused and unexcused absences. After verifying each attendance record, the teacher will click on the “Submit” button which will send the electronic file to the Site Supervisor for their approval. All hard copy sign in and sign out sheets (CSB682) should also be forwarded to the Site Supervisor.

After Teachers have submitted the attendance records via the Wall Pad, Site Supervisors shall review the submitted attendance sheets under the Track Forms section in CLOUDS under the “Submitted” section. After reviewing each attendance sheet for accuracy, the Site Supervisor shall “Approve” or “Deny” each attendance record. If the attendance record is denied, it will go back to the wall pad for correction and re-submittal by the Teacher.

**ii. Partner Sites & Family Child Care Homes**

Attendance is captured at CSB Partner centers by CLOUDS via Galaxy tablets as parents electronically sign their child into the program. Teachers must ensure that this is done immediately upon the child's arrival to the classroom.

If a parent fails to sign their child into CLOUDS, staff must do the following:

- Staff will "sign" child into CLOUDS without a signature ("STAFF" button) to place the child's status as "in the classroom" on the system.
- The parent MUST be called back to the center to sign-in on the hard copy sign-in/out sheet with the actual drop-off time.
- In CLOUDS staff will select "Parent no sign in" from the drop down menu as the Reason under the Attendance Sign-in/out sheet for the specific child.

If the parent fails to sign their child out in CLOUDS, staff must do the following:

- Staff will "sign" child out in CLOUDS without a signature to place the child's status as "child out of the classroom" on the system.
- Staff will notify the parent as soon as the parent or authorized representative returns to the center (i.e. next morning) that a sign-out signature was not collected. The parent will sign out on the hard copy sign-in/out sheet with the original sign out time. In CLOUDS, staff will enter "Parent no sign out" from the drop down menu as the reason under the attendance sign-in/out sheet for the specific child.

In the event that the electronic system fails and parents are not able to sign their children in or out of CLOUDS, staff MUST do the following:

- A hard copy sign-in/out sheet shall be maintained by each classroom teacher which the parents will use to sign in and/or out until CLOUDS is back on-line.
- As soon as the system comes back up, staff will sign children in and/or out (as applicable) of CLOUDS without a signature to place them in or out of the classroom and use their Actual sign-in/out times from the hard copy sign-in/out sheet.

A code is used consistently throughout the entire program to mark Present, Excused Absence, and Unexcused Absence. Absences are marked with an "A" and given the excuse provided by the parent in the comment section of the sign-in sheet. The teacher determines if the absence is excused in accordance with the excused and unexcused absence policies included herein. When absences are excused, the "A" is enclosed in a circle. All information must be immediately entered into CLOUDS when the system becomes available through Galaxy tablets (iCLOUDS) by doing the following:

**iii. Galaxy Tablets (iCLOUDS):**

- Under "My Classroom", click on the child's name you want to enter attendance for
- Click on "Attendance Sign-in/out sheet"
- Select the Month
- Click on the Day you want to enter attendance

- Enter Attendance data

**iv. CLOUDS (CSB Partner Unit Staff):**

- Go to Attendance Folder
- Select Manual Attendance
- Click on the “A” box for that child
- Enter the Attendance date

Partner Teachers must enter absence reasons by Friday of each week via the Galaxy tablets. Parents are required to give the reason for a child’s absence when the child returns to school if not already provided. On occasions where the child has not returned to school, the Site Supervisor (CSB Staff) can enter the reason for absence in CLOUDS after contacting the parent.

At the end of the month, the Partner Teacher reviews each attendance record via the Galaxy Tablet and verifies the totals for the days of attendance, excused and unexcused absences. After verifying each attendance record, the teacher will click on the “Submit” button by the 3rd day of the following month which will send the electronic file to the Site Supervisor (CSB Partner Staff) for their approval. All hard copy sign in and sign out sheets and absence notes should also be forwarded to the Site Supervisor (CSB Partner Staff) by the 3rd of the following month.

After Teachers have submitted the attendance records through the Galaxy Tablet, Site Supervisors (CSB Partner staff) shall review the submitted attendance sheets under the Track Forms section in CLOUDS under the “Submitted” section. After reviewing each attendance sheet for accuracy, the Site Supervisor (CSB Partner Staff) shall “Approve” or “Deny” each attendance record. If the attendance record is denied, it will go back to the Galaxy tablets for correction and must be re-submittal by the Teacher.

**v. CSB Partner Staff**

- Collect hardcopy attendance sheets & absence notes from Partner agencies no later than the 3rd of the following month and enter into CLOUDS Manual Attendance module by the 5th of each month.
- all attendance records need to be verified (i.e. excused, un-excused and BID...etc.) via CLOUDS

**vi. CD 9400 Process**

CLOUDS will automatically generate the state Monthly CD 9400 sheets (Programs funded by the State). To complete the submission process, staff will do the following:

- Using the CLOUDS 9400 Monthly Enrollment report, Site Supervisors or Partner Staff will check each child’s funding, day length, adjustment factors and attendance records for accuracy. The Site Supervisor compares each child’s 9400 record with their electronic

attendance record (CLOUDS>Track Forms>Attendance) & hard copy sign-in/out sheets (CSB682). Any discrepancies are to be corrected in CLOUDS via the Attendance Analysis module.

- After all discrepancies have been corrected, the Site Supervisor or Partner Staff will click on each child's individual verification button in which they can change the selection from "No" to "Yes" signifying that information for that child is correct. When all the children listed under each 9400 sheet has been verified (All "Yes" for each child listed), the site supervisor can now complete the sheet by clicking on the final "Verify" button which will record the site supervisor's or CSB Partner staff's digital signature on the 9400 sheet thus completing the process.
- All 9400 sheets must be completely verified by the 5<sup>th</sup> workday of the month on CLOUDS.
- Assistant Directors/Cluster Clerks or partner staff confirms that all CD 9400 sheets have been verified on CLOUDS via the 9400 Monthly Enrollment report by the 6<sup>th</sup> workday of the month. Only the hard copy sign-in/out sheets (CSB682) must also be submitted to the Assistant Director or CSB Partner Analyst for their review. It is not necessary print out the 9400 sheets and electronic attendance sheets from CLOUDS as that data is already in CLOUDS. When all 9400 sheets have been verified in CLOUDS via the 9400 Monthly Enrollment report (requires a visual inspection from AD or CSB Partner Analyst), all hard copy sign-in/out sheets (CSB682) are forwarded to Business Systems by the 6<sup>th</sup> workday.
- Business Systems staff will confirm that all children have been verified on the 9400 Monthly Enrollment report (visual inspection). If there are any discrepancies, the specific Site Supervisor or Partner Analyst will be notified of necessary corrections. Corrections must be done as soon as possible.
- Business Systems staff will notify Fiscal when CD 9400s have been checked and completed by the 10<sup>th</sup> work day of each month.
- When the Fiscal Department is notified by the Business Systems Unit that all 9400s have been verified, CSB Fiscal staff will generate the electronic CDNFS 9500 and CDNFS 8501s to review. Once CSB Fiscal staff determines the reports are accurate, they will print and submit the reports to the California Department of Education by the 20<sup>th</sup> of the month for each quarter (September, December, March & June).
- The Business Systems Analyst will generate the CD 801A report in CLOUDS and submits it electronically to the State CDMIS website by the 20<sup>th</sup> of every month for the preceding month.

**vii. Excused Absences**

- **Illness:** Absences may be excused for illness of the child, parent, or any sibling. If the absence is due to the illness of the child, the specific reason must be recorded on the sign-in sheet (e.g. cold, cough, sore throat, fever, runny nose, etc.). Illness absences lasting three (3) or more consecutive days may require appropriate medical professional documentation.
- **Family Emergency:** Absences due to family emergencies may be considered excused absences. The reason for the family emergency must be specified in the sign in and out sheets. Any of the following reasons can be considered family emergencies:
  - Death of a family member.
  - Immediate need for medical health treatment of anyone in the family unit.

- Any incident caused by a situation which results in the family having their normal schedule disrupted to the extent that the parent cannot safely accompany their child to the site (i.e., theft, fire, flood, arrest and/or incarceration of a parent, or any other similar situations)
  - If regular means of transportation to school is disrupted, and no alternative, i.e. public transportation is available.
  - Any other situation at the discretion of the site supervisor.
- Best Interest Days (BID): Absences may be excused for the “best interest of the child” which would include time for a child to be with a parent or relative (i.e. vacation or visitation with non-custodial parent, a court-mandated visit, or participating in cultural or religious holidays). Other requests for BID are at the discretion of the Site Supervisor. BID absences are limited to ten (10) days per program year per child, with the exception of children who are recipients of protective services or are at risk of abuse or neglect. Proof of such services must be documented in the child’s data file. The reason for the “Best Interest Day” must be specified in the sign in and out sheets.
  - Exclusion due to unmet health requirements: Children must be excused for immunizations that are not up-to-date or a physical or TB clearance that is not received within 30 days of enrollment. Parents are allowed one extension for physicals beyond the 30 day requirement with proof of an appointment on file. No extensions are allowed for TB clearances. Children are permitted up to three days of excused absences. After that, a Notice of Action (as applicable) will be issued for termination from the program.

#### EE. Title XXII Requirements for All Children

Record of “up to date” immunizations must be on file before children can attend. A complete physical examination by the child’s physician is required within 30 days of admission. A form is provided at the intake interview for use by the family physician. An immunization record authorized by a Medical Doctor or a Registered Nurse must be shown. The Site Supervisor or Comprehensive Services staff will review and file a copy at the time of enrollment. Immunizations must be kept current while the child is attending the centers. The Site Supervisor or Comprehensive Services staff member notifies parents when immunizations are due. Children whose immunizations are not kept up to date will be excluded from the center until they are brought up-to-date, unless there is a medical waiver on file.

Although TB clearance must be obtained within thirty days of admission, the physical must also have indicated the result of the TB screening on the child’s record. Children may be eligible for a free physical through the Child Health Disability Prevention Program. Parents should be encouraged to discuss this option with the Site Supervisor or Comprehensive Services staff member.

Enrollment information is kept confidential from all but: (1) authorized program staff, (2) California Department of Education program evaluators (3) authorized public officials. Information will not be released without parental permission, except as mentioned above.

Children with disabilities are accepted by the centers when CSB is able to obtain appropriate documentation to determine the child’s needs. CSB will work with the family to make all reasonable



accommodations for the child. CSB complies with ADA and IDEA.

## FF. Fees for Non-Head Start and Early Head Start Funded Programs

### 1. Purpose

The purpose of these procedures is to document the process of billing, collecting, and depositing of childcare fees in accordance with County policies and the State's Funding Terms and Conditions related to child development programs.

### 2. County Administrative Bulletins

Community Services Bureau shall comply with the requirements set forth in Administrative Bulletin Number 205 regarding cash collections procedures.

### 3. Fee Assessment

CSB shall use the current fee schedule prepared and issued by California Department of Education for child care programs funded by the State.

- The family fee will be assessed either a flat monthly full-time or part-time fee based on certified hours of care for the month, income, and family size.
- If family's certified need is 130 hours or more, the family will be assessed full-time fee.
- If the family's certified need is less than 130 hours, the family will be assessed part-time fee.
- Upon initial enrollment or final enrollment month, a family may be charged cost of care fee (current State Reimbursement Rate (SRR) multiplied by adjustment factor multiplied by days of enrollment) if this is less than monthly part-time fee rate.
- The family fee will be assessed:
  - **At initial enrollment.** If the enrollment day is the first of the month, the family fee will be assessed a full-time or a part-time fee based on their certified hours of care. If the enrollment day is not the first day of the month, fee will be based on the certified hours for the partial month and another fee for each subsequent month based on their certified hours. The first payment is due the first day of enrollment and due the first day of each subsequent month.
  - **At recertification.** The assessed fee will be effective on the first of the subsequent month after the new fee is assessed (Issue date of NOA) if there are 14 or 19 calendar days remaining in that month. If there are less than 14 or 19 days remaining in the month following the issue date of NOA, the assessed fee will become effective on the first of the month a month after the subsequent month.
  - **When family voluntarily requests a reduction of family fee.** The assessed fee reduction will be effective on the first day of the month that follows the issue date of the NOA. Families must still be given 14/19 calendar days from the issue date of the NOA, to file an appeal.
- If more than one child in a family is participating in the state funded program the family's fee shall be assessed and collected based on the child who is enrolled for the longest period in a day.

- If the children are located at different child care centers, the fee shall be collected by the center in which the child who is enrolled the longest period in the day is enrolled.
- If a child drops at one center and enrolls in another before the NOA period, both centers must communicate throughout the transition to determine the impact on related fees. (We must communicate)

For Fee for Service Program (Tuition Based), CSB shall use the monthly rate approved by the County Board of Supervisors.

#### **4. Exclusions from Fee Assessment**

- The exclusions shall apply only to State-funded childcare programs.
- No fees shall be collected from CCTR, FP, and FPL families with an income level that, in relation to family size, is less than the first entry in the fee schedule.
- There is no family fee for PP and PPL programs
- Families receiving services because the child is at risk of abuse, neglect, or exploitation, may be exempt from paying fees for up to twelve (12) months if the referral prepared by a legally qualified professional from a legal, medical, or social services agency, or emergency shelter specifies that it is necessary to exempt the family from paying a fee. The cumulative period of time that a family may be exempt from paying a fee for this reason shall not exceed 12 months.
- Families receiving services because the child is receiving protective services may be exempt from paying fees for up to twelve (12) months if the referral prepared by the county welfare department, child welfare services worker specifies that it is necessary to exempt the family from paying a fee. The cumulative period of time that a family may be exempt from paying a fee for this reason shall not exceed 12 months.
- In accordance with the State's Management Bulletin 09-18, all families that currently receive a CalWORKs grant on behalf of the children will not be assessed a fee. Former CalWORKs grant recipients are not included in this exemption.

#### **5. Credit for Fees Paid to Other Service Providers**

This section shall apply only to State-funded child care programs.

- When CSB cannot meet all of the family's needs for child care for which eligibility and need have been established, CSB shall grant a fee credit equal to the amount paid to the other provider(s) of these childcare and development services. CSB shall apply the fee credit to the family's subsequent fee billing period. The family shall not be allowed to carry over the fee credit beyond the family's subsequent fee billing period.
- CSB shall obtain copies of receipts or cancelled checks for the other child care and development services from the parent. The copies of the receipts or cancelled checks and a complete and signed CSB Fees Rendered Form shall be maintained in the parent's fee assessment records.
- The copies of the receipts or cancelled checks and a complete and signed CSB Fees Rendered Form are due by the first day of the month. Fees due shall be considered delinquent if this documentation and any remaining fees owed are not collected within seven (7) calendar days.
- Copies of the receipt or cancelled check shall include the following: name of the other service provider, amount of payment, date of receipt or payment, the period of child care services covered by the payment, name of the parent, and name of the child who received childcare

from the other service provider.

### GG. Billing Procedures

Childcare fees are paid in advance. One week before the end of each month, each Center shall submit to the CSB Fiscal staff a Billing Worksheet that contains the following information:

- Name of the parent or guardian
- Name of the child enrolled
- Funding category of the program where the child is enrolled
- Monthly rate determined by the Site Supervisor based on State's fee schedule (for child development contracts) or county approved rate (for fee for service program)
- Total amount assessed
- Collections made in prior month
- Comment section for effective date of the monthly rate, last date the child will attend the day care, and other pertinent information that affects the calculation of monthly billing.

No adjustments shall be made for excused or unexcused absences. The parent or guardian shall pay the total amount billed if the child is absent regardless of the reason during the billing month.

Periodic review of billing information – Assistant Directors shall reconcile or perform independent review from the participant's files to the billing report to ensure all parent fees are billed correctly.

CSB Fiscal staff shall input the information from the Billing Worksheet to QuickBooks in order to generate the Monthly Invoice for the following month. The Invoice shall be sent to the Site Supervisor for distribution to fee paying parents on or before the first of the following month.

Childcare fees can be paid in advance or are due by the first of the month. They shall be considered delinquent if not paid after seven (7) calendar days.

If account is delinquent at the close of business on the seventh calendar day, a Notice of Action shall be issued to inform the family of the following:

- The total amount of unpaid fees
- The fee rate
- The period of delinquency

That services shall be terminated fourteen (14) to nineteen (19) calendar days (depending on method of issuance) from the date of the Notice of Action unless all delinquent fees are paid and/or documentation of credit for fees paid to other service providers is collected before the end of the 14-19 day waiting period. The 14-day period pertains to NOAs that are hand delivered to the parent; the 19-day period pertains to NOAs that are delivered to the parent via the US Postal Service.

If the family is unable to pay their fee the program shall accept a reasonable plan from the parents for payment of delinquent fees. The plan must be developed before the end of the 14-19 day waiting period and shall not exceed 4 months to repay the full amount of delinquent fees. The center shall continue to provide services to the child provided the parents make a minimum "good faith" payment

of at least 10% of the total delinquent fees at the time the plan is developed, pay their full assessed monthly fees when due and comply with the provisions of the repayment plan. The Delinquent Child Care Fee Repayment Plan Form can be printed from the Intranet-CSB Resource Center under 0600 Enrollment of Electronic Forms.

- Agency staff shall submit the repayment plan to their Assistant Director or Partner Agency Director for approval before finalizing the plan. Once approved, the originals of the termination NOA and repayment plan shall be filed in the family file and copies shall immediately be provided to CSB Fiscal staff and the center's Assistant Director or Partner Agency Director.
- Upon termination of services from non-payment of delinquent fees, staff shall make this indication in CLOUDS, and the family shall be ineligible for childcare services until all delinquent fees are paid.

Center staff must issue a Notice of Action-Delinquent Fees on the morning of the 8th day of the billing month if family fee is unpaid by close of business on the 7th day of the month. Center will keep a copy of the NOA-Delinquent Fees in the child's file and send a copy to CSB Fiscal staff upon its issuance. The center shall make reasonable attempts to collect unpaid fees from families before the exhaustion of the 14/19 day appeal request period.

If unpaid fees have not been collected successfully by the end of the 14/19 day appeal request period, services to the family must be terminate unless a payment plan was established prior to the 14/19 day (see payment plan policies and procedures), CSB Fiscal staff is notified immediately of termination or establishment of Payment Plan, and copies of all paperwork related to action taken, including the NOA and CSB664- Delinquent Child Care Fee Repayment Plan must be sent to CSB Fiscal Staff and original copies are filed in child's file.

If unpaid fees are collected, staff shall send the pre-numbered receipt, Deposit slip/original check marked "electronically deposited", and original bank receipt/bank deposit confirmation to CSB Fiscal Staff immediately for recording. Triplicate copy of Receipt issued to family is filed in child's file.

In the event the child is no longer enrolled at the center:

- CSB Fiscal staff will send a letter of collection together with the Statement of Account and NOA-Delinquent Fees to the family. If the account is still unpaid after 2 weeks, a follow up collection letter as a second notice will be sent to the family.
- All attempts to collect unpaid fees must be made within 45 days of termination
- Any over payment made by the family towards a family fee of \$10.00 or less, will be refunded upon a family's written request.

## HH. Fee Collection Procedures

- Each center shall collect checks, money order or cashier check from the parents. Cash is not acceptable mode of payment. A designated center staff shall issue signed receipt to the parent

for the amount collected. At CSB centers, this person must be a county employee, and may not be temporary staff. The designated staff shall be accountable for the money received and such money shall be stored in a locked cash box placed in a secured area of the center.

- Center staff shall process all collected fees immediately. At least once weekly, or if fee collections exceed \$250, the designated staff must endorse the back of each check properly and deposit the money to the County Wells Fargo Bank account. Immediately following the deposit designated staff shall submit a copy of the receipt(s) issued to the parent(s), a copy of the Deposit Slip/original check marked "electronically deposited" and Original Bank Receipt/bank deposit confirmation to the CSB Fiscal Unit.
- CSB Fiscal staff shall check copies of Receipts to make sure that total amount agrees to Deposit Slip/original checked marked "electronically deposited" and Bank Receipt/bank deposit confirmation amounts.
- CSB Fiscal staff shall enter the payment information to QuickBooks in order to update parent accounts. Receipts shall be stamped "Posted" and filed in numeric order by Center.
- CSB Fiscal staff shall code the collected family fees accordingly and input the data in the county's Electronic Deposit Permit system.
- CSB Fiscal staff shall file the Deposit Slip/original checked marked "electronically deposited", Bank Receipt/bank deposit confirmation and print out of Validated Deposit Permit in the Deposit binder.
- Checks marked "electronically deposited" are to be kept in a locked file cabinet for fourteen (14) days from the deposit date before shredding by CSB Fiscal staff.

## II. Receipts/Banking Procedures

The S-Receipts issued to parents shall be in quadruplicate (four copies).

- Take the hard cardboard piece from inside the back cover of the book to use between the series of S-receipts.
- Give the original S-receipt to the parent and send the duplicate copy of the S-receipt to the CSB Fiscal staff with the duplicate deposit slip and original bank receipt (the transaction record).
- The triplicate copy of the S-receipt shall be put in the child's file at the site.
- The quadruplicate copy of the S-receipt shall stay in the S-receipt book and the entire book shall be sent to the CSB Fiscal staff when a new S-receipt booklet is needed.
- The following steps shall occur for voided receipts:

Write "VOID" across the receipt. The voided S-receipt must be signed and dated by the Site Supervisor. The reason for the void must also be written on the S-receipt. The original, duplicate and triplicate copies shall be sent to the CSB Fiscal staff when an error is made that resulted in the voiding of the S-receipt.

- For credit for fees paid to other service providers, the center staff shall send to CSB Fiscal staff a copy of the receipt or cancelled check paid by the parent to the other childcare service provider. The Site Supervisor shall attach these receipts or cancelled checks to the signed Fees Rendered Form and submit to CSB Fiscal staff. The Fees Rendered Form can be printed from the Intranet-CSB Resource Center, under 0600 Enrollment of Electronic Forms. The form should be properly filled out and the credit amount should be equal to and no more than the amount paid to the other provider and shall not

exceed the parent fees billed during the month.

## JJ. Confidentiality of Records

The use or disclosure of all information pertaining to the child and his/her family will be restricted to purposes directly connected with the administration of the program. The Comprehensive Services Assistant Manager or Site Supervisor will permit the review of the basic data file by the child's parent(s) or parent's authorized representative, upon request and at a reasonable times and place.

## PART II. Planning

### A. Philosophy

The Community Services Bureau Philosophy of Program Management is as follows:

To establish a culturally competent, systematic and innovative process of program planning that demonstrates forward mobility and strategic thinking, in an effort to meet the changing needs of the children and families within the community.

In efforts to fulfill our philosophy, administrative staff including fiscal, personnel, information technology and administration, is committed and dedicated to carry out the following program goals:

- Poor health and nutrition are significantly correlated to children and families living in poverty. CSB will address the need to improve indicators of nutritional health through increased education and physical activity.
- Comprehensive Services staff is required to maintain up to date accurate data in order to provide quality comprehensive services to children and families, and to maintain agency compliance. CSB will provide ongoing training opportunities to assist staff in enhancing their record keeping skills.
- Exposure to violence has a lasting impact on children's development including their emotional, mental and physical health. CSB will promote positive and enduring adult-child relationships that increase a child's level of secure attachments by providing services to promote the safety and well-being of children and families.
- CSB will support parents in their ability to maintain family well-being and promote positive parent-child relationships. Families will become more competent and experience increased joy as they gain confidence in their parenting.
- CSB will achieve and maintain an expanded and stable funding base of diverse sources.

CSB implements a systematic, ongoing process of program planning that includes consultation with the programs governing body, policy groups, program staff and with other local community organizations that serve enrolled families.

CSB planning includes: community assessment, multi-year (long-range) program goals and short-term objectives, systems planning calendar and written plans for implementing services in each of the program areas.

## B. Methodology

### 1. Community Assessment

- The Community Assessment is conducted once over the five year grant period with annual updates at the onset of each program year. The Community Assessment helps keep CSB abreast of substantive issues facing the community which informs all systems and services of the bureau. Strengths, resources, needs, changes, and trends in the CSB service area are identified and integrated into the planning process and into the development and implementation of policies, procedures, service plans and goals and objectives.
- The Community Assessment process is led by a CSB Analyst. The data that is collected externally and internally and must consist of, but is not limited to:
  - The number of eligible infants, toddlers, preschool age children, and expectant mothers, including their geographic location, race, ethnicity, and languages they speak.
  - Eligible children experiencing homelessness;
  - Eligible children in foster care;
  - Eligible children with disabilities, including types of disabilities and relevant services and resources;
  - The education, health, nutrition, and social service needs of eligible children and their families, including prevalent social or economic factors that impact their well-being;
  - Typical work, school, and training schedules of parents with eligible children;
  - Other child development, child care centers, and family child care programs that serve eligible children, including home visiting, publicly funded state and local preschools, and the approximate number of eligible children served;
  - Resources that are available in the community to address the needs of eligible children and their families; and,
  - Strengths of the community.
  - The findings of the Community Assessment are used to assist CSB in developing the following key program planning elements:
    - CSB's program philosophy, including its vision and mission;
    - Long-range and short-range program objectives;
    - The type of services and program options to be provided;
    - The recruitment areas of the program;
    - Identifying locations of centers and home-based programs;
    - Establishing the criteria for recruitment and selection.

The Community Assessment is presented annually to the Policy Council and Board of Supervisors and program staff at all levels.

### 2. Self-Assessment

- Once each program year, CSB conducts a joint Grantee and Delegate Agency self-assessment of the effectiveness and progress of our programs in meeting program goals and objectives and in implementing federal regulations. Self-assessment tools include resources from the OHS Monitoring Protocol and Classroom Assessment Scoring System (CLASS™). The modes of assessment in the protocols include: Observation, Interview, and Records Review.
- A training and overview of the self-assessment process is given prior to the designated week the self-assessment is conducted. The role of the Bureau Director and Delegate Director and/or their designees in the self-assessment process are as “advisor” to the team. The analyst responsible for the self-assessment is the Team Leader and may be supported by a consultant. Teams are comprised of grantee and delegate agency management and non-management staff, parents, community partners, and representatives of the Board of Supervisors. Teams are formed in November of each year.
- The self-assessment process concludes with the team leader and/or his designee(s) writing a cumulative and comprehensive report that addresses program strengths as well as potential non-compliances. If needed, a corrective action plan is developed to remediate areas of non-compliance. The final report of the self-assessment, including the certifications of corrective actions, is presented to the Policy Council, Local Policy Committee, Delegate Board, and Board of Supervisors for approval in March of each year. As soon as these approvals are secured, the final report is then forwarded to the ACF Program Specialist.
- The results of the self-assessment are used in the planning process, in developing and improving program services, and in formulating the program approach included in grant applications.

### **3. Strategic Plan**

With the support of the Employment and Human Services Director, CSB adopts the Program Goals and Objectives as the bureau’s five year Strategic Plan. The plan addresses needs and concerns that are identified through the community assessment, self-assessment, and ongoing monitoring results. They are also developed with input provided from parents through the Policy Council’s Program Services Subcommittee. The strategic plan is reviewed and updated semi-annually by the Senior Management Team. Annual updates are presented to the Policy Council and Board of Supervisors.

### **4. Bureau Planning Calendar**

- The purpose of the CSB Planning Calendar is to provide chronological guidance and a timeline for critical events such as: reviews, audits, reports, etc. that occurs within the fiscal year.
- The planning calendar ensures continuity within the programs as well as throughout the bureau. Included in the planning calendar are methods to ensure consultation and collaboration with the program’s governing body, policy groups and program staff. The



planning calendar is updated and submitted for approval annually by the Policy Council and the Board of Supervisors.

## **5. Management Planning Meetings**

Planning is conducted on an on-going basis at varying levels throughout the bureau during planning meetings, staff summits, and management retreats. Additional information regarding management planning meetings is found under Part I of Section 1-Program Governance.

# **PART III. Education & Child Development Program Services**

## **SUB PART I. Individualization in the Program**

### **A. Description**

Individualization is the process used to design a plan for each child that reflects their unique characteristics, strengths and needs.

Upon completion of the child's first sixty (60) days of enrollment, teachers will develop four (4) individual goals based on:

- Home visits
- Child's health and nutritional screenings and health histories
- Educational screenings: Ages and Stages Three (ASQ-3) and Ages and Stages Social Emotional Questionnaire (ASQ-SE)
- Desired Results Developmental Profile (DRDP 2015) Assessment
- Parent conferences
- Children's Individual Education Plans (IEP or IFSP)
- Observations of children and anecdotal notes

Teachers will create an individualization binder/folder with a section for each child to include copies of parent teacher conferences (CSB118A/B) and a copy of the child's IEP/IFSP, if applicable. Each child is assigned a letter code that is written in the top right corner of the lesson plan during their focus week. The front of the binder must include a key to identify each child's focus week and letter code.

### **B. First Parent Conference**

The first parent conference is completed within the first ninety (90) days of enrollment. Teachers must use the Education Due Date Calculation Sheet (CSB107) to keep track of each child's conference due dates.

During this conference, the teacher and parents discuss the child's progress based on screenings, DRDP 2015 assessment, and parent observations. The teacher and parent develop the goals for the child's individual plan. The child's strengths, individualized goals and activities that will support the development of goals are listed on the conference form. Teachers will collaborate with parents to identify and record strategies for home that will assist the child to achieve their identified goals. Parent

and teacher must sign and date the form.

### C. Second Parent Conference

The second parent conference is completed within thirty(30) days of the third DRDP 2015. During this conference the parent and teacher review the child's progress on their goals set during the first conference and discuss parent observations and teacher observations.. Teachers will collaborate with parents to identify and record strategies for home that will assist the child to achieve their identified goals. Kindergarten readiness information may be shared at this time.

### D. The Infant-Toddler Individual Needs and Services Plan

The Individual Needs and Services Plan (CSB180) (INSP) is completed prior to the first day of attendance. The process includes an interview with a family member by a staff member. The form is updated quarterly and included in the plan is:

- The current feeding schedule and the amount and types of food provided including whether breast milk or formula and baby food is used.
- The meal patterns of the child, including new foods introduced, and food preferences.

The INSP tracking form should be used by teachers to know when the quarterly updates are due. Section D of the INSP is important and required to complete for children who are between the ages of 25 and 36 months. The areas are listed of how the program will ensure provide age-appropriate language development, large/small motor skills, and social emotional activities. Also, notes to ensure the continuity of care for the child should be documented.

### E. Lesson Plans

Lesson Plans are posted weekly. The lesson plan provides various developmentally appropriate activities and materials for the children to engage in to support their physical, social, and cognitive growth. The lesson plan includes activities that meet the children's individualized needs based on the results of their screenings and assessments. Per the individualization process described above, children's individual codes are noted on the lesson plan.

The lead teachers are responsible for:

- Planning and developing the weekly lesson plan with their classroom team.
- Submitting the lesson plan to the site supervisor every Thursday.
- Posting the weekly lesson plan by Monday morning.

The Site Supervisor is responsible for:

- Reviewing and approving the lesson plan.
- Signing off and dating the approved plan.
- Ensuring the lesson plans are posted in the classrooms by Monday morning.

### F. Developmental, Sensory, and Behavioral Screening

All newly enrolled children (including those with an IEP/IFSP) are screened by teaching staff in the areas of social emotional development using the ASQ-SE and cognitive development using the ASQ-3 within 45 days of enrollment. Teachers must use the Education Due Date Calculation Sheet (CSB107) to keep track of each child's screening due dates. Comprehensive Services staff screens all children in hearing, vision, and heights/weights within 45 days of class entry, and annually thereafter. Parents are informed about all screenings and their purposes in advance. The results from the screening are used to begin the individualization process for each child. Should the results indicate a concern, CSB will follow the outlined referral protocol. If a child does not qualify for referral services, CSB staff will support the child and family through outside services, if applicable, and will seek guidance from Mental Health or other qualified staff to ensure the concerns do not affect the child's school readiness. (For more information on screenings, please refer to Part II, Services for Children with Disabilities).

## G. Assessment

The Desired Results Developmental Profile Child Assessment (DRDP 2015) is the required assessment tool mandated by the California Department of Education and also includes the Head Start Outcome requirements. Teachers must use the Education Due Date Calculation Sheet (CSB107) to keep track of each child's assessment due dates.

The assessment of children is accomplished through on-going written observation of the child. Infants, toddlers and preschool children are assessed three times per year. Anecdotal records and work samples are kept for each child to show progress.

Assessment results are entered into CLOUDS within the required timelines. Results of the assessments are shared with parents during parent conferences, and are a basis for developing children's individual goals and plans and used for individualizing the lesson plans.

Child portfolios are used as evidence to support DRDP2015 rating accuracy and to comply with state requirements. Portfolios include, but are not limited to, child work samples, anecdotal notes, photographs, parent observations, and recordings/videos.

## H. Program Transitions

Parents are given the opportunity to participate in and be supported in the transition of their children when they move to new classrooms, programs or enter kindergarten. For families and children who move out of the community in which they are currently served, including homeless families and foster children, CSB staff will support the effective transition to other Early Head Start or Head Start programs. If Early Head Start or Head Start is not available, CSB staff will assist the family to identify another early childhood program that meets their needs.

### 1. Transition Policies and Procedures for Infants and Toddlers

While children are enrolled in Early Head Start, they change classrooms based on their age and developmental level. Transition to a new classroom begins two weeks before a child moves to a toddler or preschool classroom.

There are two types of transitions that happen; one takes place when a child moves to a new classroom based on their age and developmental level and the second takes place when a child transitions out of the Early Head Start program. Transition to a new classroom begins two weeks before a child moves to a toddler or preschool classroom. During this time, a transition plan is developed that may involve the child and family member visiting the new classroom.

Over the next days, the child gradually increases the amount of time spent in the new classroom. Initially, the primary caregiver plays an important part to help the child adjust to his/her new environment by assisting the child in their new classroom.

Whenever possible, CSB makes attempts to ensure a continuation of early childhood education services. Staff works in conjunction with other centers and programs to provide a quality and effective transition to preschool. The transition plan from the toddler program to preschool is mandated to begin six months prior to the transition. The CSB Transition form (CSB161) is completed by the parent/family member, child's caregiver and the site supervisor six months before the transition and updated quarterly.

The child may then be placed on the CSB wait list if an immediate transition to a Head Start classroom is not available. The Comprehensive Services staff notifies the family member if a space becomes available and a transition to a Head Start program will occur.

Three weeks prior to the transition, the child will begin visiting their preschool classroom accompanied by their caregiver teacher. The length of the visits and the number of visits will be determined by the child's comfort level and will be gradual in duration. A final home visit will close the child's Early Head Start file. When the child begins Head Start, they begin a specific orientation process (see section B; Curriculum Implementation; 1 Orientation).

## **2. Kindergarten Transition**

Kindergarten registration information is provided to families between January and March. Parents are given information on their local school district registration procedures.

Collaboration with the local school districts regarding kindergarten transition may include activities such as open houses, kindergarten fairs, field trips, school representatives at parent meetings, collaboration meetings with kindergarten teachers and other representatives, joint training and professional development opportunities for preschool and kindergarten teachers, and registration resources. Parents are also encouraged to visit kindergarten classrooms and to familiarize themselves and their child with the school facility. Current kindergarten children are also often invited into the classroom as a guest speaker to talk about their kindergarten experiences. Site staff assists parents with the kindergarten registration process, and if necessary, assist parents to obtain the necessary documents required for kindergarten entry.

Kindergarten transition meetings are conducted between April and June. At that time, resources for parents to assist their child in transitioning to kindergarten are provided, in addition to kindergarten school supplies for children.

The Creative Curriculum has a specific Getting Ready for Kindergarten Teaching Guide that our teachers must use for planning at the end of the year, specifically, the last few weeks of school, that

focuses on kindergarten readiness through literacy, math, arts and technology. Teachers will also use the Second Step Early Learning curriculum to support children throughout the school year and in particular for those children going to kindergarten, during the last few weeks of school. The last three lessons in Second Step specifically focus on transitions to kindergarten (Learning in Kindergarten, Riding the Kindergarten Bus, and Making New Friends in Kindergarten).

For the PD/PY classrooms that do not operate during the summer, CSB staff will collaborate with school districts to determine the availability of summer school programming for children who will be entering kindergarten and will work with parents and school districts to enroll children in such programs, if available.

### **3. Kindergarten transition planning for children with disabilities**

- Identify family concerns, priorities, resources that relate to the change, and parents' expectation(s) of kindergarten.
- Provide training to parents to become knowledgeable regarding the application procedure and their parental rights.
- Review placement options, parental rights as they relate to responsibilities within the school system, and steps they can take to help their child do well in school.
- Review child's progress and update records. Complete "Authorization to Release Information" (CSB139).
- Provide activities for parents to do at home to prepare their child for kindergarten.
- Inform parents of transition meetings, and allow them to decide what role they will play.
- Schedule an introduction for parents with their new contact, either in person or by phone.
- Encourage parents to arrange a visit to the prospective school before their children transfers.

## **SUBPART II. Curriculum (Education and Early Childhood Development)**

### **A. Child Development and Education Approach**

All CSB Centers implement The Creative Curriculum for Infants, Toddlers and The Creative Curriculum for Preschoolers. Goals for curriculum promote children's active involvement in their own learning. Children will have a learning environment and varied experiences appropriate to their age and stage of development that will help them grow physically, socially, linguistically, intellectually and emotionally. The education program is aligned with Head Start Performance Standards (45 CFR 1304), The Head Start Early Learning Outcomes Framework (HSELOF), The California Preschool/Infant-Toddler Learning Foundations, National Association for the Education of Young Children Developmentally Appropriate Practices, Program for Infants and Toddlers Caregivers (PITC) and Reggio Emilia Inspired Project Approach. The Program Services Committee of the Policy Council provides input into the program curriculum and approach to children's education.

#### **1. Educational Options**

- Center based: Preschool/infant toddler full-day and Preschool part-day program options.

- Full Inclusion programs: Children with disabilities are mainstreamed into center based classrooms in collaboration with the school districts.
- Preschool Special Day class: School district operates special day classes in collaboration with CSB.
- Home Based: Home base educators serve as facilitators of children’s learning in the child’s home environment. The program provides one home visit per week for a period of 1.5 hours and two group socialization activities per month.

## 2. CSB Educational Programs

The curriculum goals are based on the State Child Desired Results and Head Start Child Outcomes.

- Desired Result 1: Children are personally and socially competent
- Desired Result 2: Children are effective learners
- Desired Result 3: Children show physical and motor competence
- Desired Result 4: Children are safe and healthy
- Desired Result 5: Families support their child's learning and development
- Desired Result 6: Families achieve their goals

The curriculum is enhanced by the Project Approach. The Project Approach is a meaningful way to teach content built on children’s knowledge and interests. Projects support the development of a child’s knowledge, skills, and feelings.

In addition, the curriculum is supported by Second Step Social Emotional Skills for Early Learning program supports children’s growth and helps teachers guide children to learn, practice and apply skills for self-regulation and social- emotional competence.

## B. Curriculum Implementation

### 1. Orientation:

Child and family orientation is ongoing throughout the year. Orientation Steps are as follows:

- Phase In: The first day of school is called phase in and lasts a minimum of two hours. The goals for phase in are to welcome the child and family into the program and familiarize them with program philosophy and procedures.
- The teacher completes the Tour of the Classroom and Education, Health, and Nutrition sections of the Classroom Orientation Checklist form (CSB112).
- The Site Supervisor completes the Review of Program Policies and Procedures section of the Classroom Orientation Checklist form (CSB112).

### 2. Classrooms:

Preschool Classrooms are divided in clearly defined interest areas based on the Early Childhood Environmental Rating Scale and Creative Curriculum:

- Block, Art, Discovery (science), Dramatic Play, Toys and Games (manipulative and

math), Library, Writing, Sand and Water, Technology and a quiet/cozy area where children can play alone or with one classmate.

- There is a place where each child can keep personal belongings.
- Learning materials are logically organized, age appropriate, open ended, labeled and accessible to children.
- There are enough materials in each area for several children to work together.
- Materials in the classroom are intentionally and periodically changed using the Material Rotation form (CSB142).
- Classroom displays are current and reflect children’s work and activities.
- Classroom rules are generated by the children and posted. Rules are phrased in positive terms, for example instead of saying “no running”, say “walk”.
- Classroom helper charts are posted.
- The classroom is inviting to families with displays of family photographs, parent information boards, and some adult sized furniture.
- Environments reflect diversity by including visual materials and activities that reflect diversity in gender, family composition, culture, language and ethnicity.
- Rooms are designed to be attractive and comfortable.

Infant and toddler environments are set up using the Infant Toddler Environmental Rating Scale and Creative Curriculum. The classroom environment is guided by the infant/toddlers changing curiosities, considering the needs, interests, and developmental level as the caregiver continuously reads the cues of the infant/toddler, and includes:

- Block, Art (12 months and up), Discovery (science), Dramatic Play, Toys and Games (manipulative and math), Library, Sand and Water (18 months and up) and a quiet/cozy area where children can play alone or with one classmate.
- Gross and fine motor materials, sensory opportunities, books, and classroom displays that reflect family backgrounds and diversity.
- Materials are offered in logical groupings such as manipulatives, blocks, art, etc. to encourage independent exploration.
- Materials are rotated regularly as children’s development and interests change using the Material Rotation form (CSB142).

### 3. Classroom Transitions:

In infant, toddler, and preschool classrooms, teaching staff ensures that transitions are thoughtfully conducted for each child. Between daily events, transitions are implemented intentionally, smoothly, and naturally.

When activities during the day are predictable, it helps children begin to understand the concept of time. Anticipating what is coming next makes children feel they are in control of what is happening. The CSB approach to classroom transitions is:

- **Be proactive and be alert.** Have strategies to engage children who may be having difficulties with transitions.
- **Always transition children in small groups**, and ensure children are assigned to a small group at enrollment.

- **Plan ahead and make transitions fun!** Transitions should be engaging for children and can include finger plays, songs, and short activities to reduce wait time.
- **Prepare.** Prepare all teaching materials and small group activities ahead of time so they are ready for the day and easily accessible.
- **Talk with the children** and let them know when a transition is going to occur. Give children a signal 3-5 minutes before the transition.
- **Review transition safety with the children** at the beginning of the year and whenever needed.
- **Follow the protocols** outlined in the Transition Head Count Policy and CLOUDS In-Transition feature, which include a visual count.
- **Always visually sweep!** Before leaving the classroom or yard by physically walking the perimeter and looking around thoroughly.
- **Communicate** continuously with all team members. -State the number of children who are going with you as you transition.
- **CSB has zero tolerance for lack of visual supervision!** All designated caregivers are to be present, engaged, and calm during transitions.
- **All transitions that require children exiting or entering the classroom** must be conducted using the Classroom Transition Tracking Sheet form (CSB700).
  
- **Teacher placement is critical** as the children transition, with one staff at the front of the group and one in the back. When there is only one staff member present, his/her placement must be such that he/she may be able to see every child as they transition.
  
- **Whenever possible, caregiver groups should be maintained** throughout daily activities, including transitions. Transitions should always occur in small groups.

#### 4. English Language Learners:

Education for children who are learning English is enhanced when programs and families partner together. The learning environment includes usage of the child's first language. Promoting language understanding and use in this atmosphere encourages easy communication among children and between children and adults. The following examples help promote language understanding:

- Give children ample time to talk to each other and ask questions in the language of their choice. Continued use and development of the child's home language will benefit a child as he or she acquires English.
- Encourage free discussions, shared experiences and conversation between children and adults.
- Provide games, songs, stories, or poems that offer new and interesting vocabulary.
- Encourage children to tell and listen to stories. Interest areas offer opportunities for teachers to teach content as children explore materials.

#### 5. The Project Approach:

The educational program is enhanced by the project approach to learning and is expected to be



implemented in every preschool classroom at least twice per program year. Projects are in-depth investigations on a topic based on children’s interests. Projects:

- Must be relevant to children’s experiences and interests.
- Topics of study must be authentic so that children can manipulate and explore real objects.
- Family members are a part of the implementation of projects.
- Project components include:
  - Selecting a topic based on the children’s interests
  - Teaching team creates a “web” of interrelated ideas and activities: ideas may incorporate literacy, math, science, social studies, the arts and technology into the study
  - An opening event
  - Project investigations
  - Field trips and visiting experts
  - Documentation of projects through photographs, children’s written feedback, drawings, etc.
  - A closing event

Creative Curriculum provides predesigned in-depth Studies on a variety of topics. These Studies do not take place of the required twice per year Project Approach, but can be used to support projects. CSB does require two Studies to be implemented each year, The Beginning of the Year and Getting Ready for Kindergarten, in addition to the two projects.

#### **6. Program for Infants and Toddlers:**

The CSB infant and toddler program is enhanced by the Program for Infant Toddler Care (PITC) philosophy, which is based on the belief that infants and toddlers come to the program with their own interests, needs, and temperaments. PITC emphasizes program components that focus on responsive caregiving practices based on supporting the child.

PITC Program components:

- Care in small groups; each child is assigned to one special infant/toddler care teacher who is responsible for that child’s care.
- Cultural Continuity; because of the important role of culture in a child’s development, infant and toddler care teachers heighten their understanding of culture in the lives of children, develop cultural competencies, acknowledge and respect cultural differences, and learn to be open and responsive to families.
- Individualized care; this follows children’s unique temperaments and promotes child well-being and a healthy sense of self. This approach supports each child’s growing ability to self-regulate and to function independently in personal and social contexts. It also ensures that teachers read children’s cues throughout the program day.
- Inclusion of children with special needs; this makes the benefits of high quality care available to all infants and toddlers through appropriate accommodation support in order for the child to have full active program participation.

#### **7. Supporting Child and Family Culture and Diversity:**

- Families are asked to share their culture and traditions.
- Food served at mealtimes is culturally inclusive.
- Environments and materials include diverse materials such as pictures, books and photographs. Dramatic play props, puzzles, music, planned activities and books reflect diversity in gender, culture, language and ethnicity.

#### **8. Teacher/Child Interactions:**

Positive teacher child interactions build trusting, nurturing bonds between teaching staff and children which supports the children's developing a love of learning.

Teaching Staff:

- Welcome children and families into the program daily.
- Foster positive social behaviors such as cooperation, conflict resolution, and turn taking by using modeling, coaching and encouragement.
- Speak to the children at their eye level and move to where a child is to speak with them directly.
- Teacher's voices are warm and calm.
- Engage children in conversations throughout the day. Encouraging verbal expression enhances children's self-esteem and cognitive growth.
- Comfort children who are crying and validate their feelings.
- Engage in activities with the children on the floor by sitting on the floor with them as much as possible.

#### **9. Caregiver Groups**

Upon entry, each preschool child is assigned to a caregiver group of six to eight children based on the developmental and individual needs of the child and the classroom. The teaching staff assigned to the caregiver group plans and implements individual activities for their group during small group time.

Upon entry infants are assigned to a caregiver group of three children per caregiver. Upon entry, toddlers are assigned to a caregiver group of four children per caregiver. Infants and toddlers remain with the same caregiver whenever possible throughout their enrollment in the program to ensure continuity of care.

Caregiver groups can be named after animals, shapes, etc.

#### **Caregiver Groups during Transitions:**

- It is CSB's policy to transition children in small groups including; to and from outside time, small group, large group, and bathroom routines.
- Caregiver groups are maintained throughout the daily activities when appropriate.

- Teaching staff work closely with their caregiving group at meal times, small group, hand washing, etc. For children, this reduces confusion, distraction and promotes attachment with the primary caregiver.

## **10. Child Health and Safety**

Teaching staff integrates health and safety lessons and activities into the lesson plan. Health activities may include: oral health, pedestrian safety, good hygiene practices, and emergency safety including: fire, earthquake, shelter-in-place and school safety.

Children wash hands upon entering school, before eating, after wiping noses, after touching animals, before and after messy play, including sand/water play and Play-Doh, contaminated objects, upon returning from the play yard and after toileting.

Staff inspects classroom and outside areas daily to ensure all facilities, furniture, materials and structures are safe and free from hazards. The 7 Health and Safety Daily Classroom Checks in 7 Minutes form (CSB777) is completed daily in all indoor areas used by children, prior to children using the space. The Daily Playground Checklist (CSB136) is completed daily to document inspection of outdoor areas accessible to children.

Teachers perform a daily health check of each child upon their arrival to school. Refer to section 2, IV. Sub Part III, A, Daily Health Inspection for further guidance.

For infants and toddlers, this practice is done using the Daily Communication Form where families and staff document about each child at the beginning and end of the day. The daily health check is also conducted and documented on this form.

Teaching staff conducts head counts hourly in CLOUDS and during transitions in CLOUDS and using CSB700 in accordance with the Protocol for Hourly and Transition Head Count and Tracking as described in CSB700A.

Teaching staff checks that door alarms are set and all gates are secured at all times.

Children are supervised at all times, and always supervised while toileting.

## **11. Nutrition**

Children participate in learning activities planned to affect the selections and enjoyment of a wide variety of nutritious foods.

Nutrition activities may include: field trips, planting gardens, reading stories about food and nutrition, and sampling a wide variety of foods.

Children are involved in simple cooking projects. Teaching staff serve meals family-style at the centers. Children participate in setting the tables, serving themselves, and pouring their own beverages.

## **12. Language / Literacy Curriculum Enhancements**

- **Learning through Literature Curriculum Enhancement:** Each month teaching staff

implements a picture story book to read that contains a written guidance of extension activities and open ended questions to ask.

- **Raising A Reader:** Tote bags with age appropriate books are taken home weekly by each child. Parents are encouraged to read to children daily and discuss the stories. Books are multicultural and include children's stories in Spanish.
- **Tandem:** Similar to Raising a Reader, bags with age appropriate books are taken home weekly by each child. Parents are encouraged to read to children daily and discuss the stories. Books are multicultural and include children's stories in Spanish.
- **Books at Naptime:** Each child may choose a book to read to themselves on their mat.

### **13. Pedestrian Safety**

Children and parents are taught the importance of pedestrian safety within the first 30 days of school. This includes educational videos and materials on pedestrian safety for both children and parents, various classroom activities and educating parents at parent meetings.

### **14. Media in the Classroom**

Classrooms are equipped with Surfaces and installed with ABCmouse. Other media are used in the classroom when intentionally connected to a project topic or curriculum enhancement. Other media must be approved by the site supervisor before they are viewed in the classroom and must be documented on the lesson plan

### **15. Lesson Plans**

The Infant, Toddler, and Preschool weekly lesson plans are designed to ensure that all classrooms provide developmentally appropriate activities consistent with Head Start Performance Standards, Creative Curriculum, and Second Step (preschool). The lesson plan communicates to staff and parents the activities for each day of the week. The preschool lesson plan is enhanced by the project approach. The infant and toddler Plans and Possibilities include activities that support each child's individual goals. Plans for these age groups are flexible, are based on children's interests, and is a guide for the day rather than a strict implementation plan. The teacher submits a completed lesson plan form to the Site Supervisor weekly for approval and is posted by Monday morning. Lesson plans (CSB105A, B, and C) are completed at the center by the teaching staff, with input from parents.

### **16. Required Elements of the Children's Daily Schedule**

The classroom daily schedule provides a balance of structure and flexibility. The schedule establishes sequences for the implementation of activities and possibilities in the classroom. It includes a variety of play activities and more and less active times of the day.

- **Greeting/ Health Check-** each child and family member is warmly greeted when they enter the program daily. A brief health check is conducted by the teaching staff that includes touching of the child's skin and looking into their eyes. Staff may ask a child how they are feeling. Parents must remain during the health check and may be asked questions about their child.
- **Work Time/Child Initiated Activities;** Children have access to all interest areas in the

classroom. Project-based and center activities are offered as additional choices for the children in the preschool classrooms. Teachers add materials for children's creative activities during this time. Teachers work with children and ask open-ended questions to stimulate and enhance child learning. Infant and toddler classrooms may offer special activities in addition to the materials that children may interact with independently

- Small and Large Group Time/Teacher Directed Activities; Small group is a planned activity implemented in caregiver groups. Small group time activities may be conducted anywhere in the classroom or outside. Large group time is a planned time of day and can include music, movement, Second Step (preschool), conversations and discussions. Every child is offered the opportunity to participate but no child should be forced to attend group times. Similar times of the day are planned for infants and toddlers however; these must be based on the children's cues and may be modified in the moment and/or as needed.
- Outdoor Play/Gross Motor - Children are able to use their large muscles and develop socialization skills; activities include tricycles, wagons, balls, games, water tables, obstacle courses, music, art, and dramatic play activities (30 minutes each morning and each afternoon). Outdoor play must still occur in the winter months when the temperature is cooler. If weather, such as heavy rain, does not permit outdoor play, a gross motor activity must be offered indoors.
- Meal Times - Breakfast, lunch and a snack times are provided for children depending on their program model. Infants are fed on demand and toddlers are fed on an individualized schedule. Mealtimes are learning times when teachers assist children with setting the tables, serving their own food and engaging them in conversation. Breakfast and lunch times are approximately thirty minutes and snack time is fifteen minutes.
- Rest Time – Full day classrooms are required to schedule a one and a half to two-hour rest period for preschool and toddler children. Depending on the child's needs toddlers rest and nap on demand. Infants rest and nap on demand.
  - No child is to be restrained in their crib, on their cot or on their mat at any time.
  - Children are encouraged to nap but not forced. Alternate quiet learning activities are provided for non-nappers.
  - All children must be visually supervised at all times (CCL Regs: 101229, p. 137)
- Preschool classrooms: All children must be given an opportunity to rest without distraction or disturbance from other activities or children. Teachers encourage children to rest by offering them a book, engaging them in soft conversation and gently rubbing their backs. "Each center shall provide a variety of daily activities designed to meet the needs of children in care including but not limited to: (2) rest and relaxation. (b) All children shall be given an opportunity to nap or rest without distraction or disturbance from other activities at the center," CCL reg.101230 (a) p.138. Once the children are resting, one staff person may supervise the "napping" children, "provided that the remaining qualified teachers necessary to meet the overall ratio ... are immediately available at the center," CCL Regs:

101230 (c), p. 139.

- Infant and toddler classrooms: Infants are provided an “on demand” schedule for their routines, including napping. Every infant and toddler is required to have a crib, cot, or mat. Once the infants or toddlers are sleeping, one staff person may supervise the sleeping infants/toddlers provided the remaining staff necessary to meet the ratio are immediately available at the center (CCL regulation: 101416.5(d) p.158) No infant/toddler is to be restrained on their crib, cot or mat at any time.
- Rest time napping equipment placement and sanitation guidance for preschool classroom and Infant/toddler classrooms:
  - The napping space for toddlers and preschoolers must be equipped with a mat, or cot, including a sheet and blanket. Each infant is provided a crib. The crib mattress for infants are cleaned and sanitized regularly or as needed. The toddler and preschool cot or mat is cleaned and sanitized regularly or as needed.
  - Preschool bedding is individually stored so that one child’s used bedding does not come in contact with another’s, and is laundered weekly.
  - Napping equipment is arranged to provide access to children and spaced to prevent the spread of germs. Cribs must be placed three feet apart. Cots are placed eighteen inches apart and children are placed so that each child is alternating head-to-feet.
  - Blankets of any type are not allowed in infant cribs because of the risk of suffocation.

### **17. Parent Involvement in providing input into the Curriculum**

Parents are partners in the processes of planning and implementing curriculum, and are encouraged to participate in the program in a variety of ways:

#### **i. Home Visits**

All parents must be given the opportunity to participate in two home visits a year.

- Initial Home Visit: Within the first 45 days of enrollment, or if feasible, before the program year begins, teachers conduct a home visit. Parents begin to develop a positive relationship with their child’s teacher through this initial communication. The home visit gathers information about parent’s observations of their children and the goals they have for them. The initial home visit gives the child an opportunity to meet the teacher in a familiar setting and may be used to plan individual goals for each child. Staff should make every effort to conduct the home visit at the child’s house. The ASQ-SE is conducted at the initial home visit with the family. If parents request that teachers meet them in an alternate location or if they prefer not to have staff come to their homes, the other location will be considered home visit. See Initial Home Visit form (CSB 170 and CSB170IT). If the parent chooses not to have the visit in the home, the reason for that decision must be stated on the home visit form.
- Each new family will be given a CSB Child Development Brochure, a toothbrush and

guidance for tooth brushing and hand washing. The teacher will also assist the parent to complete a social/emotional screening. Teaching staff will enter the parent and print out the results and add it to the child's file.

- Returning Child Home Visit: For children who are enrolled for a second year in the program, the returning child home visit form should be completed (CSB106). As with the initial home visit every effort should be made to conduct the home visit in the child's home. Teaching staff will distribute a toothbrush and hand washing/ tooth brushing guidance.
- Second Home Visit: During the second home visit, the teacher and parent review the child's progress and assessment results. For preschool they may discuss kindergarten readiness. For all children, they may plan activities for the parent and child to do at home and address questions or concerns the parent has.

ii. **Parent Conferences**

All parents must be given the opportunity to participate in two conferences a year. Conferences are not home visits.

- First Parent/Teacher Conference – Within ninety (90) days of the child's first day of school, each parent will be given the opportunity to participate in a Parent/Teacher Conference. During this conference, the teacher and parent(s) will discuss the child's progress (based on results of the screening, assessments, observations, and child's work), and will develop an Individual Plan (IP). If the child has an IEP, the IEP goals must also be included in the plan. DRDP 2015 measure numbers must be reflected next to the written goals. (CSB118A.)
- Second Parent - Teacher Conference – A second Parent -Teacher Conference will be scheduled thirty (30) days after the third DRDP to review the child's progress/goals that were set during the first Parent-Teacher Conference.
- Parents are asked to give input into the weekly lesson plan by reviewing the lesson plan draft and offering input on all aspects of the plan including, but not limited to, small and large group activities, songs, and stories. Parents then sign the lesson plan to show their input and feedback.

### C. Other Elements of Parent Involvement

- Parents have the opportunity to participate in planning and implementation of field trips.
- Families are encouraged to share their culture and traditions by volunteering in the classroom.
- Parents are provided with individualized home activities by the child's teacher to reinforce child's learning objectives at home.
- A variety of family literacy programs are offered to support parents in helping their children develop a love and appreciation of books. These include Raising a Reader or Tandem.

### D. Home-Based Option

CSB's Home-based program option provides opportunities for parents to enhance the parent-child relationship promote the education and development of their children, enrich the home environment to encourage their children's learning, identify and refer children with special healthcare needs, developmental delays, or disabilities. The home educators serve as facilitators, educators, and a support system for parents and families. They act as vital links to the local community and resources. All services provided to the home-visited family are the same quality as those given in centers.

The Home-based Option uses the center-based sites for socialization and plans activities with the parents to use the home as their primary learning environment.

Head Start's Home-based Option services include:

- Providing one home visit per week per family (a minimum of 32 home visits per year), lasting for a minimum of 1.5 hours each.
- Providing a minimum of two group socialization activities per month for each child (a minimum of 16 group socialization activities each year).
- Nutrition objectives are accomplished through both home visits and group socialization activities. The emphasis is on nutrition education, helping parents learn to make the best use of existing resources. Parents receive information and guidance on menu planning, consumer education, and money management.

The program maintains an average of 10 to 12 families per Home Educator with a maximum of 12 families for any individual Home Educator. Services include:

- One home visit per week for each child and provider lasting for a minimum of 1.5 hours each
- Two group socializations activities per month for each child. During socialization, activities and training are planned for parents and providers to increase their knowledge about child development issues.
- Monthly parent meetings are planned and offered at socialization. Parenting classes, support groups, and trainings are scheduled through the year.
- All services provided to the home-visited providers are the same quality as those given in centers. The only difference is the home setting is used as the learning environment, and the provider is the educator.

## **E. Classroom Assignments**

Children are assigned to classrooms and teachers in accordance with their needs, available space, and other relevant variables. Each classroom must have a roster listing all enrolled children. The Site Supervisor notifies the teachers of new enrollees.

Copies of class rosters are continuously available on CSB CLOUDS System and are kept current as children enroll or leave the program.

Classroom rosters do not list more than twenty children on any given day, per federal enrollment regulations except if a waiver has been granted. State Preschool not receiving HS funding may enroll 24 children. CSB centers maintain a minimum class size of at least 95% and a maximum of twenty children, and must never exceed the licensing capacity of the classroom.

## **F. Adult-to-Child Ratio**



## 1. Ratio Requirements

CSB's part day Head Start program is governed by California Community Care Licensing Title 22 Regulations which require a 1:12 ratio. However, Head Start regulations require that the maximum class size is 20 (unless a waiver is granted), so the adult-to child ratio in these classrooms is 1:10.

CSB's California Department of Education programs, including those combined with other funding such as Head Start and Early Head Start is governed by California Community Care Licensing Title V Regulations which require the following ratios: For children ages 3-5, 1:8; for toddlers, 1:4; for infants 1:3. For preschool classrooms, Title V regulations allow a classroom to be out of ratio for up to 120 minutes per day. These 120 minutes allow for rest time in early morning or late afternoon and do not apply during the core instructional time of day. During those times, children must be supervised according to the Title XXII regulation of State Licensing at 1 teacher per 12 children.

Children under three years of age may not be in groups with more than eight children. Each full-day classroom is staffed with a qualified Teacher and 2 Associate Teachers. If this is not possible, an Associate Teacher may be substituted for a Teacher and a Teacher Assistant Trainee for an Associate. Each part-day classroom is staffed with two Teachers and a Teacher Assistant Trainee.

The EHS Infant and toddler classrooms have the following ratios: Infants (birth – 18 months) is one to three (1:3) and toddlers (18-36 months) is one to four (1:4). Maximum group size for infants is six at all times. Maximum group size for toddlers is 8 at all times.

## 2. Supervision

All staff inside the classroom and outside in the yard are responsible to ensure that all children are visible at all times and that they are being supervised at every moment. Teaching staff supervise infants and toddlers/twos by sight and sound at all times.

Teaching staff, including substitutes and other CSB staff serving as a supervising adult for ratio purposes must sign into the classroom via the CLOUDS Wallpad or tablet. The CLOUDS Staff Management Module is utilized for program oversight and planning, including monitoring to ensure compliance with ratio requirements at all times. For these purposes, staff must also transition in and out of classrooms to account for child to teacher ratio, location of the staff person within the center, and on-duty status, including but not limited to transitions to the playground, another classroom or on break/off duty.

- i. To sign-in/ sign-out of a classroom on CLOUDS:
  - Select the "Staff" button on the Wallpad
  - Select the box with the name of the staff member being signed in or out (staff not already showing on the Wallpad may select the green box and enter their employee ID# to place themselves into the classroom)
  - Select the "Sign-In" or "Sign-Out" button on the pop-up
- ii. To transition on CLOUDS:

- Select the “Staff” button on the Wallpad
- Select the box with the name of the staff member being transitioned
- Select the “In-Transition” button on the pop-up
- If transitioning to another classroom, select the “Staff In-Transition/ Substitute” box on the wallpad
- Select the “In-Transition” button, then find and select the box with the name of the transitioning staff
- Select “Yes” in pop-up

## G. Sign-In and Out Procedures

### 1. Signing-In:

Everyone must sign in at a center: visitors and guests. Upon arrival, every child must be signed in by a parent, friend or relative over 14 years of age, denoted on the emergency contact list. The full signature is required, along with the time of arrival. If a child arrives at the center unaccompanied, teaching staff must bring that child into the center, and contact the parent (and State Licensing) immediately so they may return and properly sign in the child. Failure to sign children in properly may require a referral to County Child Protective Services.

For our part-day sessions, if a parent and his/her child arrive before the start of session or stay after the closing of the session, the teaching staff will remind them that the child is the parent’s responsibility during that time.

### 2. Signing-Out Procedures:

The parent must always sign a child out at the end of the day.

Children who leave and return to the center during the day must be signed out and in by an authorized adult, e.g. a child leaving for a doctor’s visit.

Adults who arrive at the center to pick up a child must be listed on the Children's Center File Emergency Card. Picture identification must be provided before child is released. It is the teacher's responsibility to keep emergency numbers current. At least two people must be listed who can pick up the child in an emergency.

If a person picking up the child is not on the emergency form, written preauthorization from the parents is required before CSB staff will release the child from the center. Children will not be permitted to leave the center unless accompanied by a preauthorized adult. Parents may not give verbal authorization for pick-up of children.

### 3. Child Release Policy:

The safety of the children is the priority for all CSB staff; therefore, the following policy must be enforced at all times:

- All parents are required to complete emergency forms during the enrollment process. Emergency forms with the names and telephone numbers of persons authorized to pick up the child will be kept in the child’s file. Emergency forms must be updated at

- least every 12 months or anytime information changes.
- Photo identification will be required of all newly authorized individuals or individuals not recognized by staff prior to release of the child. Under no circumstances will a child be released to an unauthorized person.
- If CSB personnel are not certain the pick-up person is who he/she claims to be, the child will not be released.
- Staff will not release children if the person picking up the child smells of alcohol or if staff has reason to believe the person is under the influence of alcohol or other foreign substance.
- Staff will not release children to the person picking up the child if there is a court ordered restraining order on file against the person.
- Children will not be forced to leave the center with someone they are not familiar with.

#### **4. Sign-Out Disputes Due to Child Custody Issues:**

If a parent requests that the other parent not be allowed to remove a child from the center, Site Supervisor or Head Teacher must request a copy of the court order, and place it in the child's file in the locked cabinet.

The parent must be informed that CSB is not a law enforcement agency and cannot undertake that role. (A parent cannot be denied access to his/her child unless there is a Court Order.)

If a dispute over custody should occur in the classroom, the teaching staff will deal with the family calmly. The staff will ask the person if they would like to talk with a Supervisor. If it seems likely that the parent may become violent, the teacher may release the child, and inform the parent that they (teacher) must call the police as soon as the likelihood of violence becomes apparent. Should the parent leave with the child prior to the arrival of the police, the teaching team must be prepared to provide a description of the person, the car, and the license plate number. The teacher must call her/his Site Supervisor to report and document the incident. Such unusual incidents must be reported to an Assistant Director and to Community Care Licensing using the standard procedure.

#### **5. Adults Signing Their Child In or Out While Under the Influence of Alcohol or Drugs:**

Any parent or other person who is authorized to pick up an enrolled child and appears to be under the influence of drugs or alcohol, or in an impaired physical condition which may prevent him/her from assuring the child's welfare, will not be allowed to take the child. In the event that this occurs, staff must use their best judgement in determining if the behavior presents a risk to the child. Staff may also seek a second opinion from another staff or site supervisor to ensure their assessment of impairment is accurate. Staff will let the parent or other person picking up know that the child cannot be released, but another authorized person from the child's emergency card can be called. Staff can try to keep the parent at the site by discussing the child's day or any other broad topic. At any point, if necessary, staff may call 911 or the local police if they feel additional support is needed. Should the parent/other person continue to insist leaving with the child, and staff or children are physically threatened, allow the person to take the child. Should this happen. Staff must get the license number of the vehicle and call the police immediately. Teaching staff must:

- Call County Child Protective Services and file a child abuse report

- Make an unusual incident report to Community Care Licensing  
Inform their AD of the situation/concern

If the police arrive at the center while the adult is still present, it is their responsibility to determine what further action should be taken. Only a police officer can officially determine if an adult is intoxicated or in an impaired physical condition.

#### **6. Late Sign-Out Procedures:**

A parent is considered to be late when he/she has not picked up their child by the agreed upon time. Staff should not call parents to pick up their children before these times. (CSB132) When a parent is late, the teaching staff will implement the following procedure:

- First Time - The staff will verbally inform the parent of the importance of picking up their child on time. This must be documented on the child's folder at the center.
- Second Time - When the child is picked up, the staff will give a late child notice to the parent. A copy of this notice will be kept in the child's file at the center.
- Third Time - The staff will call the Site Supervisor. The Site Supervisor will inform the parent that if this occurs again the child will be suspended from the center and placed on the waiting list. The Site Supervisor will give a "Late Child" letter to the parent. A copy of this letter will be placed in the child's folder at the center. (CSB132.)
- Fourth Time - The staff will call the Site Supervisor, who will inform the family that their child will be placed on the waiting list. If the family receives collaborative funding from the CA Department of Education, a formal Notice of Action will be given terminating the state funding after the 14-day grace period for appeal. The Site Supervisor will notify the Assistant Director and the Comprehensive Services Assistant Managers of the change in that child's status.

Closing Time - If a child has not been picked up by closing, and no one can be reached to pick up the child, the Site Supervisor will determine the plan of action (which may include calling Child Protective Services). CSB staff must never transport children from the center via vehicle or on foot.

#### **7. Full-Day Program Sign In/Out Procedures:**

The number of hours for each child enrolled in a full-day program is based upon their Contracted Hours Agreement, completed with the staff responsible for enrollment at that site. All full-day children must be signed in according to their contract hours. Each parent will have an individual sign-out time based on their unique needs for full-day services and Contract Agreement. The same procedures for late pickup are to be followed although "late" times will vary according to the parent's contract hours. Parent(s) may request a change in hours through "Request for Change of Contract Hours" form. (CSB-607)

## **H. General Classroom Celebration Policy**

### **1. Description:**

The Community Services Bureau avoids endorsing commercialism surrounding the holidays. The focus is about learning and celebrating diversity. The following guidelines are followed when planning activities with staff and parents:

- Holidays are not a major part of the curriculum. They are integrated within the total curriculum. No more than a few days and few activities are dedicated to any holiday.
- Holidays are not a theme and the whole room is not to be decorated reflecting a holiday.
- Learning about holidays broadens children’s awareness of their own, and other, cultural experiences. Activities must be thoughtfully planned and implemented for inclusion of all children and families.
- Every group represented in the classroom (children and staff) is to be honored.
- Teachers must not assume that everyone from the same ethnic group celebrates holidays in the same way. Teachers check with the families to ensure that activities are indeed reflective of the cultures represented in the classroom.
- Teachers must plan strategies for working with children whose family beliefs do not permit participation in holiday celebrations. Their parents are to be included in planning a satisfactory alternative for these children in the classroom.

### **2. Children’s Birthdays:**

Children’s birthdays are very important and birthday celebrations are as unique as each child. However, the classroom’s daily routine should not be changed to accommodate birthday celebrations. Because children learn by example, and to reinforce the nutrition education in the classroom, the following ideas are suggested:

- Giving and/or reading a book to the child and classmates
- Bringing educational toys to share
- Bringing a baby book or other symbolic item, or a special family story to share
- Lead a game
- Decorating the classroom
- Leading a nutritious class project (any food provided cannot be served in place of regular food service)

### **3. Inappropriate Activities in the Classroom:**

- Staged performances, plays, and ceremonies where children have memorized vocal parts or if rehearsals are required
- Lectures, where children have to sit and listen for a long period of time
- Commercial displays
- Adult-directed activities that focus on a product rather than a process (i.e., patterned art / work)
- Combined classrooms with large groups of adults and children
- Graduation ceremonies with caps and gowns

## **I. Field Trip Policy**

### 1. Procedures:

Field trips complement the classroom educational experience, current curricula, and must be developmentally appropriate. Field trips encourage hands-on exploration and experimentation. Field trips permit the child to learn about his/her world (school, neighborhood, and community). Bus or walking field trips may not be taken to amusement/theme parks or have large bodies of water as the main component of the field trip event. Field trips to water parks or swimming pools are prohibited. Field trips where tide pools are observed must have prior approval by an AD.

- Site supervisors must inform Nutrition office one week prior to date of a field trip using the Field Trip Form (CSB115). All field trip lunches will consist of sun butter sandwiches, string cheese, fruit, vegetable, and milk.
- Parent volunteers are encouraged to plan and participate in field trips. Only children enrolled in the classroom taking the field trip may participate. CSB will not provide parent/family transportation, with the exception of the exception of the previously determined 2-3 parent volunteers/chaperones. Parent volunteers must adhere to the immunization requirements.
- Parents may drive their own child to a field trip after signing their child out of school. Parents may not drive other students or parents on a field trip. Upon arrival of the field trip, parents must sign their child in using a paper copy if tablets are not available. Should parents chose to leave early or leave at any time with their child, parents must sign their child out
- Field trips are approved in advance by the Site Supervisor and AD are documented in the classroom lesson plan. Teaching staff notifies the Site Supervisor or designee when leaving/returning from the trip.
- Parental permission slips are required for all field trips (CSB114). Transportation is provided for staff and children.

In general, travel time for field trips should be no more than 60 minutes in length, round trip, and allow for heavy traffic conditions when necessary. Additional travel time may be accommodated with prior AD approval. Walking field trips are encouraged, with the destination within a half- mile radius of the center.

- A field trip should be completed within four hours, including lunch and transportation.
- Full-day programs require a two hour nap/rest period. A field trip should not interfere with the regular naptime schedule.
- Requests for additional time for field trips may be submitted to the Assistant Director for approval.

AM and PM classes do not combine or change program hours to go on a trip. On bus field trips, multiple classrooms may share buses as capacity allows, however, children must be separated into smaller

caregiver groups upon field trip arrival and while boarding and exiting the bus. Adult-to-child ratio on all field trips is a minimum of one adult for every four children (1:4). This ratio may be adjusted lower (1:3 or 1:2) at the discretion of the teacher or Site Supervisor. Staff (and volunteers) must have assigned groups of children for whom they are responsible at all times. Each group must stay together, within the teacher's area of vision/supervision. Teachers are responsible for ensuring that each adult volunteer properly supervises his/her assigned group of children on the field trip. Documented headcounts on field trips will be taken at the following times:

- Upon leaving the center
- On the bus or van
- Upon arrival at the destination
- At random times during the field trip
- When boarding the bus or van for the return to the center
- After return to the center
- Use paper copy for parents to sign-in and out if tablets are not available.

Emergency information for each child, three blank accident forms, a cell phone, and a First Aid Kit must be taken on walking or driving trips, including bus field trips (CSB-113-Field Trip Information and CSB-1015-Vehicle Use Request Form)

- During field trips, each child must wear a tag at all times that only identifies the name of the center and the center's telephone number on the front. Child's name may be written on the back of the tag, but never on the front.
- Field trip leaders must keep to their schedule, or call the center if there are any changes.
- If there are insufficient adults, inclement weather or any circumstance that would make it less than an optimal experience, the trip must be cancelled. A well-planned field trip taken under adverse conditions or circumstances may become a danger.

## **2. Planning Protocols:**

When planning a field trip or socialization, the following must be completed:

- Establish educational goals and objectives for the planned trip
- Teacher, or their representative, is to visit the destination to check travel time and accommodations, and to ensure the safety of the children

The field trip planning form (CSB115) must be completed and submitted by the teacher and approved by the Site Supervisor and AD at least one month prior the field trip. If planning the use of a bus for the field trip, CSB115 must be given to the AD clerk immediately to schedule a bus at least one month in advance.

- If applicable, the request for change of menu and purchase requisition must be completed and submitted one month prior the field trip
- Parents are notified at least two weeks in advance of the upcoming trip, at which time they are encouraged to volunteer for the trip
- Children are prepared for the trip at least one week in advance through in-class

- discussions of field trip safety
- When transportation is provided at least one trained bus monitor is aboard each vehicle at all times

The bus monitor training will include:

- Child boarding-and-exiting procedures
- Use of restraint systems
  - Bus: Properly fastened seat belts per the waiver for transportation services
  - Van: Properly installed car seats
- Required paperwork
- Emergency response and evacuation procedures
- Use of special equipment
- Child pick-up and release procedures
- Pre- and post-trip vehicles checks

In Case of Minor Accident at Site or on Field Trip

- A designated staff member with a valid First-Aid Certificate assesses the situation, and renders first aid if necessary.
- If a minor accident occurs on a field trip, the teacher of an injured child must notify the child's parents on return to the center. (As noted above, the emergency contact list must be on hand.
- The Injury/Incident Report form (CSB245) " form is completed, signed, and dated
- The teacher retains one copy for the center and gives one copy to the parents.
- In Case of Major Accident at Site or on Field Trip  
The teacher calls paramedics immediately. Classroom staff assesses the situation, and renders first aid as indicated for life-saving measures.  
Injured children are taken to the nearest emergency facility and the teacher or Site Supervisor accompanies the child.  
The teacher of an injured child must notify the child's parent(s) immediately. (The emergency contact list must be on hand)  
The teacher must immediately notify the Site Supervisor, who will notify the Assistant Director and/or the Bureau Director or designee.
- Licensing must be notified by telephone (with a follow-up of the "Unusual Incident/Injury" report) as soon as possible.
- The parent may accompany the child in the emergency vehicle.
- If the parent is not at that location, the child's teacher accompanies the child in the emergency vehicle.
- If necessary, CSB staff will provide transportation for the parent to/from the emergency facility.
- The "Accident/Incident Report" form (See Form CSB208) is completed, signed, and dated by the staff person involved in the situation.



- An insurance form is also completed, signed, and dated.
- The teacher retains one copy of the “Accident/Incident Report” and insurance form for the center, and submits copies of the reports (within 24 hours) to the Site Supervisor.
- The Site Supervisor submits copies of these reports to the Assistant Director and/or the Bureau Director.
- The CDE must be notified by the Bureau Director if the client is in a program funded by the state.

## **PART IV. HEALTH PROGRAM SERVICES**

### **SUBPART I. Prevention and Early Intervention**

#### **A. Determining Child Health Status**

Community Services Bureau establishes and maintains individual, comprehensive files for children and families. Health records, developmental progress portfolios, and files, including Administrative, Delegate Agency, and Grantee-Operated Program and Subcontractor’s filing systems, are kept confidential with use of the Access to File form (CSB900) and following the approved Confidentiality Policy. All staff with access to health information is trained on HIPAA (Health Information Portability Accountability Act) requirements.

CSB obtains parental consent prior to the administration of health or developmental procedures through the program or by contract or agreement and maintains documentation of parental refusal of authorization for health services through use of the Parental Refusal of Health Services Form (CSB298).

CSB staff collaborates with parents to address the health and well-being of each child in a linguistically and culturally appropriate manner, communicating the child’s health needs and developmental concerns.

##### **1. Physical Examinations - Well Child Check (CSB207)**

Each parent is provided with a Report of Health Examination - Well Child Check (CSB207) for use in obtaining their child’s physical examination. As much pertinent health information as possible is accumulated and recorded for each child, paying particular attention to the items required by the Bright Futures Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Schedule to ensure that children are following a schedule of complete well child care. The child’s initial physical examination required for program entry must be current (in accordance with the EPSDT schedule) and received no later than thirty days after entry into the program. One extension is allowed with documentation of a pending appointment. Children returning for a second year require additional physical exams in accordance with the EPSDT Schedule. Comprehensive Services Teams enter all data on the physical exam into the CLOUDS data management system. This enables program staff to track services and follow-up on actions such as treatment needed, future appointments, and referrals. Managers access reports to help monitor progress in meeting program requirements in a timely manner.

##### **2. TB Clearance – CSB Center-Based Program**

In accordance with section #101220 of Licensing Code, TB Clearance documentation must be obtained for each child within 30 days of enrollment (admission) into the program. TB Clearance documentation must consist of either:

- A negative TB Skin Test or Chest X-Ray result, or
- A physician's check mark indicating "No Risk" on CSB207–Report of Health Examination - Well Child Check or other signed or stamped document from the physician/clinic.

The TB screening referenced in the TB Clearance documentation must be in accordance with the EPSDT schedule. The one extension allowed for pending physical exam appointments does not apply to TB Clearance documentation. Children without TB Clearance will be excluded if clearance is not obtained within 30 days of enrollment.

### **3. Health Insurance**

Through use of the Health History and within 30 days after the child first attends the program, or for the home-based program option, when the child receives a home visit, those children with and without medical and/or dental insurance are designated as such. In the event that the child does not have insurance coverage, Comprehensive Services Teams will assist families in accessing insurance as soon as possible by referring the child to various programs such as the Child Health and Disability Prevention (CHDP) Gateway program, Medi-Cal/Denti-Cal, the Kaiser Permanente Children's Health Plan, and services through Covered California.

### **4. Health Records**

In the event that health records are returned to the program with information missing, Comprehensive Services Teams obtain consent for release of information from parents. This consent is used to obtain information from medical/dental offices, medical records departments and laboratories. Every effort is made to educate parents regarding the EPSDT schedule and the documentation needed prior to visiting a doctor or dentist.

The following information shall be obtained and entered into CLOUDS and the child's confidential file:

- Health and developmental history
- Immunization record including immunizations and in series/waivers
- Treatment plans
- Age-appropriate physical exams, dental exams and screening results
- Records of major/minor illnesses and injury during program activities
- Schedule of daily medications - prescription and over-the-counter medications such as sun screen and rash ointment
- Allergic reactions
- Dietary intake and food habits
- Age and gender-appropriate growth charts
- Source of payment for services, including free federal, State of California, and locally funded health services
- Medi-Cal number or private insurance identification
- Referral and follow-up information

- Record of follow-up and documentation of actual services provided
- Emergency information/Parent Contact
- Signed parent consent forms
- Parent Refusal of Health Services Forms
- Family Meeting Documentation
- Teacher observations
- Progress reports
- Other information as needed

A child whose authorized representatives adhere to a religious faith that practices healing by prayer or other spiritual means shall not be required to meet the requirements of the health examination. In this case, the authorized representatives must provide:

- Information on the child's health history
- A signed statement that indicates:
  - Their acceptance of full responsibility for the child's health.
  - Refusal to obtain a medical examination for the child.
  - Request that no medical care be given to the child.

## **B. Protocols for Determining Child Health Status**

### **1. Application**

Before enrollment, Comprehensive Services Clerks are responsible for:

- Reviewing the electronic application information/intake documents.
- Noting concerns (known or suspected) using the Red/Yellow Flag System as indicated on the Eligibility Certification Checklist Form (CSB604).
- Generating a CLOUDS referral based on application information, as needed and clearly noting details of child's condition in Referral Observation/Comments.

Before enrollment, Comprehensive Services Assistant Managers are responsible for:

- Reviewing the application information/intake documents and ensuring referrals are generated and Red/Yellow Flags are in place if needed.
- Coordinating with the Site Supervisor to set up Family Meetings or interventions as appropriate.

Before enrollment, Site Supervisors are responsible for:

- Reviewing the application, Red/Yellow Flags, and referrals.
- Coordinating with the CSAM to set up Family Meeting or interventions as appropriate.
- Communicating child health status and needs with teaching staff.

### **2. Immunizations**

The State of California Immunization Branch requires that programs institute a “No Shots, No School” policy, however, medical providers may indicate that a child may not have any or all immunizations. In this case, the waiver on the back of the California School Immunization Record Card (blue card) must be completely filled out. Medical exemptions from a licensed physician (MD or DO) will continue to be permitted and require a written statement including which immunization(s) is to be exempted and the specific nature and probable duration of the medical condition. If the medical exemption is permanent, the requirement for the designated immunization(s) is met: check box A and box C on the front of the Blue Card. If the medical exemption is temporary, check box B and box D; this child requires follow-up. Per Senate Bill 277, immunization waivers based on personal beliefs is no longer permitted beginning January 1, 2016. A personal belief exemption submitted prior to January 1, 2016 will remain valid until the student enters kindergarten/transitional kindergarten.

Names of all exempt children will be maintained on an exempt roster for immediate identification in case of disease outbreak in the community. Immunization training, including the most current immunization schedule for children 0-5, is provided to staff annually. Children are tracked throughout their enrollment to ensure they remain up-to-date or in-series. Records are updated accordingly. Comprehensive Services staff completes the annual immunization report due to the local health department in September/October of each year.

**i. Responsibilities of Comprehensive Services Clerks**

Prior to enrollment Comprehensive Services Clerks are responsible for:

- Collecting valid immunization records from parent.
- Obtaining parent consent for use of California Immunization Registry - CAIR (CSB243) and requesting immunization registry search if parent is unable to provide immunization verification.
- Entering immunization data into CLOUDS, completing the results column on the right to indicate one of the following: In Compliance, In Series, Medical Waiver or Non Compliance and ensuring “Overall Immunization Status” below is correctly identified.
- Emailing the name of child exempt from immunizations to the Comprehensive Services Manager (Health Content Area) for placement on the exempt roster.
- Determining overall immunization status.
- Notifying parent of shots needed.
- Assisting the parent in obtaining a doctor office/clinic for immunizations needed.
- Using the Red/Yellow Flag system on the Eligibility Certification Checklist (CSB604) to indicate temp files as needing immunizations prior to start date.
- Printing the Immunization Blue Card from CLOUDS or manually filling in blanks, signing it, and placing it in the temporary file with documentation of a physician’s statement for medical exemptions.

On an ongoing basis, Comprehensive Services Clerks are responsible for:

- Obtaining immunization updates and entering the data on the Blue Card and in CLOUDS.
- Tracking in-series children and notifying the parent of the next dose due prior to the due date.

As needed, Comprehensive Services Clerks are responsible for:

- Assisting the parent in obtaining a doctor office/clinic for immunizations needed.
- Preparing exclusion letters if child fails to obtain shots on time.

Annually, Comprehensive Services Clerks are responsible for:

- Attending the annual immunization training.
- Reviewing and updating immunizations for the annual immunization report prior to submission each September/October.
- Assisting with the annual immunization report as needed.

**ii. Responsibilities of Comprehensive Services Assistant Managers**

Prior to enrollment, Comprehensive Services Assistant Managers are responsible for:

- Reviewing files to ensure up-to-date or in-series immunizations or waiver is in place before file is provided to Site Supervisor for placement.
- Conducting ongoing immunization registry searches as needed.

On an ongoing basis, Comprehensive Services Assistant Managers are responsible for:

- Ongoing monitoring of CLOUDS for immunization compliance.
- Tracking children with in-series immunizations.
- Supporting the parent by coordinating with the Site Supervisor to set up a Family Meeting as needed regarding immunizations.
- As needed, reviewing exclusion letters generated by clerk and verifying information, which is forwarded to the Site Supervisor for action.

Annually, Comprehensive Services Assistant Managers are responsible for:

- Reviewing annual immunization reports prepared by the clerk, to verify accuracy.
- Collaborating with the Comprehensive Services Manager (Health Content Area) prior to online submission each September/October and with the Site Supervisors after online submission is complete.
- Attending annual immunization training.

Site Supervisors are responsible for:

- Reviewing immunization compliance prior to enrollment.
- Returning the temporary file to the Comprehensive Services Assistant Manager if immunizations are not complete or required exemption documentation is missing.
- As needed, verifying, signing, dating and issuing exclusion letters prepared by the clerk and reviewed by the Comprehensive Services Assistant Manager.

Comprehensive Services Health Manager is responsible for:

- Providing immunization training annually.
- Overseeing the process and submission of the annual immunization report to the local health department by the September/October due date of each year.
- Conducting ongoing immunization registry (CAIR) searches.
- Obtaining access to CAIR for new team members.
- Maintaining a roster of children who are exempt from immunizations for immediate identification in case of disease outbreak in the community.

### **3. TB Clearance – CSB Center-Based**

#### **i. Program Comprehensive Services Clerks are responsible for**

- Informing parent of 30-day TB requirement and ongoing TB requirements per the EPSDT Schedule.
- Assisting parents with gaining access to TB testing.
- Collecting valid TB screening records from parents which include either a negative TB Skin Test or Chest X- Ray results, or a Physician’s Clearance indicating "No Risk" on the Report of Health Examination - Well Child Check (CSB207) or other signed or stamped document from physician/clinic.
- Date stamping TB documentation upon receipt and review.
- Inputting TB screening data into CLOUDS upon receipt.
- Updating TB section of the Blue Card in child’s file.
- Updating CLOUDS with referrals and case notes.
- As needed, preparing the exclusion letter if TB Clearance is not provided within 30 days of enrollment (TB Clearance: Negative TB skin test or Chest X-Ray results, or "No Risk" per medical provider).

Comprehensive Services Assistant Managers are responsible for:

- Tracking immunization compliance through CLOUDS Reports.
- Supporting the parent by coordinating with the Site Supervisor to set up the family meeting as needed.

Site Supervisors are responsible for:

- Notifying the parent of 30-day requirement at enrollment.
- Tracking receipt of TB screening records.
- Ensuring that no child is attending the program without TB Clearance beyond 30 days from enrollment.
- Coordinating with the Comprehensive Services Assistant Manager to set up family meetings as needed.
- Communicating with the Comprehensive Services Clerk to prepare exclusion letters.
- Reviewing, authorizing and signing all exclusion letters, and designating staff for distribution.

#### **ii. Health History (CSB217)**

Prior to enrollment, Comprehensive Services Clerks are responsible for:

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- Completing the Health History on CLOUDS.
- Printing a copy of the Health History for the child's file.
- Obtaining signatures on the Health History if possible.
- Placing a "sign here" sticker on the Health History document if the parent is not present to sign.
- Reviewing the Health History to determine whether each child has a medical/dental home and medical/dental insurance coverage within 30 days of enrollment. Such care is defined as 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 care or urgent care.
- Reviewing information and flagging any suspected or known special needs using the Red/Yellow Flag System on the Eligibility Certification Checklist Form (CSB-604).
- Generating a CLOUDS referral for any special needs noted on the Health History.
- Providing medical/dental home and insurance intervention with all families that indicate they have no medical / dental provider or coverage. Document intervention on the Health History in CLOUDS.

Prior to Enrollment, Comprehensive Services Assistant Managers are responsible for:

- Reviewing the child's Health History for completion and concerns.
- Ensuring proper Red/Yellow Flags are in place as appropriate with sufficient detail noted for the Site Supervisor.
- Reviewing CLOUDS referrals generated from the Health History.
- Meeting with parent to ensure understanding of the benefits of consenting for services, if parent has not given consents on the Health History.
- Contacting the Comprehensive Services Manager for guidance if unsure of how to proceed with any special needs.
- Coordinating with the Site Supervisor to set up a pre-enrollment family meeting as needed.

Site Supervisors are responsible for:

- Returning any file without a Health History.
- Reviewing the Health History, checking for Red/Yellow flags and referrals, coordinating with the Assistant Comprehensive Services Manager to set up a family meeting / intervention as appropriate.
- Acquiring a parent signature on the Health History, if necessary at enrollment.
- Ensuring that teaching staff has reviewed the Health History in order to address health conditions/needs and the completion of the consent section.
- Coordinating with Comprehensive Services Assistant Manager to set up pre-enrollment family meeting as needed.

Comprehensive Services Health Manager is responsible for:

- Providing and/or arranging training and technical assistance as necessary for special needs identified in the Health History.
- Attending family meetings for complex cases as needed.
- Tracking and providing follow-up as needed.

**iii. Physical Exam Report of Health Examination - Well Child Check**

Comprehensive Services Clerk is responsible for:

- Providing a physical exam - Report of Health Examination - Well Child Check (CSB207) to the parent and informing the parent of the 30-day requirement prior to enrollment.
- Educating the parent on the use and importance of the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) schedule copied on the back side of the Well Child Check (CSB207).
- Noting in the Child Case Notes in CLOUDS that the parent was given a physical form.
- Referring the parent to a medical provider/insurance and providing support as needed.
- Date stamping the physical exam upon receipt and review of the CSB207 form.
- Immediately notifying the Comprehensive Services Assistant Manager of any known or suspected health concerns or disabilities.
- Inputting the physical exam data into CLOUDS and documenting completion of data entry and staff follow-up by placing notes (as needed), clerk’s signature and date on the lower right hand side of the exam form in the “Staff Follow-up” box.
- Entering follow-up data on CLOUDS as needed.
- Generating referrals as needed.
- Collecting parental consents for health services and release/exchange of information.
- Contacting clinics, doctors’ offices, and laboratories to obtain missing results.
- Tracking physical exam due dates and sending reminder notices to parents as needed.
- Obtaining authorization from parents for health services administered by the program, or by agreement or contract with a partnering entity.
- Obtaining complete Parent Refusal of Health Services Form (CSB298) for those parents who refuse to give authorization for health services.
- Providing handouts for screening value results and guidelines as needed.
- Providing exclusion letters at the direction of the Site Supervisor.

CHDP Assessment Guidelines for Blood Pressure Readings:

Further evaluation or follow-up is indicated for a child who sustains a systolic or diastolic reading at or above the 95th percentile for age and gender (measured on at least 3 occasions and averaged together). If results are entered in CLOUDS as “Abnormal”, a CLOUDS health referral is generated and follow-up in completed as needed.

Age in Years	90 <sup>th</sup> and 95 <sup>th</sup> PERCENTILE BLOOD PRESSURE ACCORDING TO AGE and GENDER							
	Boys				Girls			
	Systolic		Diastolic		Systolic		Diastolic	
	90th%	95th%	90th%	95th%	95th%	95th%	95th%	95th%
3	107	111	68	73	73	73	73	73
4	108	112	69	73	73	73	73	73
5	109	113	69	74	74	74	74	74

Blood Lead Levels:

Provide nutrition resources and lead education materials if child's lead blood level is 4.5 or greater. If the



lead level is 9.5 or greater a referral must be made to the Comprehensive Services Health Manager.

Comprehensive Services Assistant Manager is responsible for:

- Tracking receipt of Well Child Check for children ages 0-5 years old on an ongoing basis, in accordance with the EPSDT Schedule and in collaboration with the Site Supervisor.
- Reviewing all physicals with known or suspected health conditions/disabilities immediately upon receipt of exam.
- Communicating with the parent immediately when problems are suspected or areas of concern arise.
- Tracking referrals and follow-up.
- Initiating care plans with providers as appropriate.
- Conducting follow-up with parents on an ongoing basis.
- Ensuring completion of parental consents and documentation of parent refusal of health services.
- Conducting follow-up with providers to obtain documentation to complete the exam per the EPSDT Schedule or to obtain follow-up information.
- Monitoring physical exam due dates to ensure compliance with the EPSDT Schedule.
- Coordinating with parent and Site Supervisor to set up family meetings as needed.

Site Supervisors are responsible for the following:

- Notifying the parent of the 30-day Well Child Check (CSB207) requirement at enrollment.
- Tracking receipt of the initial Well Child Check (CSB207) for children 0-5 years.
- Ongoing tracking receipt of Well Child Checks for children 0-5 years in accordance with the EPSDT Schedule.
- Ensuring that no child is in the program without a physical past 30 days (one extension allowed with documentation of a pending appointment).
- Directing clerks to prepare exclusion letters as necessary.
- Issuing Notice of Action (NOA) for children in state-funded programs that have not complied with requirements.
- Referring families who need assistance in accessing care to the Comprehensive Services Team.
- Reviewing the physical exam for each child and calling for a family meeting when appropriate.
- Working with teaching staff to ensure child's medical and developmental needs are addressed appropriately.
- Ensuring implementation of care plans.

Comprehensive Services Health Manager is responsible for the following:

- Supporting staff and families through the family meeting process for complex cases as needed.
- Interfacing with community partners to obtain health education, services, assistance and follow-up.
- Reviewing CLOUDS Reports to ensure compliance with health requirements.
- Maintaining a Health Services Advisory Committee that includes Head Start parents,

professionals and other volunteers from the community to address the health concerns impacting CSB's children and families and to gain knowledge of current health opportunities available to families and children in the community.

**iv. Dental Exam**

Comprehensive Services Clerks are responsible for:

- Informing parent of the 90 day dental exam requirement upon enrollment.
- Educating the parent about the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Schedule for Dental/Oral Health Care.
- Providing parent with the dental exam form (CSB-206).
- Providing a list of dental providers/insurance options to the parent and providing support as needed.
- Tracking dental exam due dates on an ongoing basis.
- Preparing reminder letters and contacting parents regarding dental exams and treatment needed.
- Date stamping the dental exam on the bottom right hand section under "Date Received", upon receipt and review of the form and entering "Date Obtained" on the Dental Tab in CLOUDS.
- Entering dental exam data into CLOUDS upon receipt and documenting data entry in CLOUDS by placing signature and date in the "CSB Staff Follow-up" section at the bottom of the exam.
- Collecting consents for release of information as needed.
- Generating referrals for children without dental care access, with treatment needed or with non-compliance issues as needed and documenting referral follow up under referral/ case notes.
- Tracking dental treatment follow-up on the Dental Exam (CSB206) and documenting "Receiving Treatment" and/or "Treatment Complete" in CLOUDS on the Dental Tab.
- Obtaining parental dental consents for release/exchange of information and onsite dental services and events.
- Obtaining complete Parent Refusal of Health Services Form (CSB298) for those parents who refuse to give authorization for oral health services

Comprehensive Services Assistant Managers are responsible for:

- Monitoring dental exam due dates on an ongoing basis.
- Following up to ensure treatment plans are in progress, ongoing or complete.
- Coordinating with the Site Supervisor and parent to schedule and attend family meetings for oral health education, dental access, non-compliance issues, etc.
- Assisting the Comprehensive Services Manager with coordination of exams by volunteer dentists/mobile dental care, and other oral health events/services.

Site Supervisors are responsible for:

- Collecting dental forms and forwarding them to Comprehensive Services Clerks.
- Coordinating with the Comprehensive Services Assistant Manager and parent to schedule and attend family meetings regarding oral health as needed and keeping teachers informed with

updates.

- Coordinating with Comprehensive Services and teaching staff to support onsite dental activities/trainings/events.

Comprehensive Services Health Manager is responsible for:

- Support staff and families through the family meeting process for complex oral health issues.
- Reviewing CLOUDS Reports to ensure compliance with oral health requirements.
- Coordinating volunteer dentists, mobile services and oral health events on an ongoing basis.
- Collaborating with the Children’s Oral Health Program, Contra Costa Dental Society and other community partners, for oral health education, services, assistance and follow-up.
- Ensuring Health Services Advisory Committee participation in addressing the oral health concerns currently impacting CSB’s children and families.

**v. Staff Protocol for Dental Referrals if Treatment is Needed**

Comprehensive Services Clerk is responsible for:

- Generating a dental referral and updating the status as needed in CLOUDS.
- Determining dental insurance status for treatment needed and providing contact information for local community dentists/clinics, the current schedule for mobile dental services in the community, and Covered California or other insurance resources to ensure treatment completion for all children including those in need of, or unable to obtain dental insurance and those with unaffordable co-pays.
- Providing the parent with “Dental Exam/Treatment” Form (CSB206).
- Obtaining parental consents as needed.
- Obtaining documentation of Parental Refusal of Health Services (CSB298) as needed.
- Entering contact information and date referral information was provided in CLOUDS Dental Referral Case Notes (indicating status “in progress”).
- Following-up with the parent (within 2 weeks) regarding the status of scheduled appointment and frequently thereafter until treatment is complete.
- Entering each follow-up activity in CLOUDS Dental Referral Case Notes and once treatment is finished enter status “complete”).
- Referring to the Comprehensive Services Assistant Manager if the family has exhausted all options without success.

Comprehensive Services Assistant Managers are responsible for:

- Monitoring CLOUDS reports to identify children in need of dental services, referrals and follow up.
- Communicating immediately with parent upon identification of oral health concerns.
- Following up with the Comprehensive Services Clerks and the parent to assist with extended “in progress” referrals.
- Coordinating with Site Supervisor and parent to schedule and attend family meetings regarding oral health as needed.
- In cases where the co-pay is unaffordable or the child is not eligible for insurance and parent cannot afford treatment, referring to providers such as local clinics, mobile dental services, the Children’s Oral Health Program, Give Kids a Smile dentist, and the Children's Dental Health

Foundation.

- Entering status/follow-up data in CLOUDS Dental Referral Case Notes.
- Referring to the Comprehensive Services Health Manager if services for treatment cannot be provided or treatment is unaffordable.

Comprehensive Services Health Manager is responsible for:

- Collaborating with community partners to provide services on site or through local dental offices, mobile dental vans and dental events.
- Initiating the request process for Head Start funds (last resort) - working with Comprehensive Services Assistant Manager to acquire treatment estimate, letter from parent, date of dental appointment and additional documents needed.
- Reviewing CLOUDS Reports to ensure compliance with dental treatment follow-up.
- Attending family meetings for complex cases.

**vi. Medical/Dental Home**

Comprehensive Services Clerks are responsible for:

- Consulting with parents through use of the Health History to determine within 30 days after child attends the program or, for the home-based program option, receives a home visit, whether or not each child has ongoing sources of health care provided by a health care professional that maintains the child's health records and is not primarily a source of emergency care.
- Assisting families with gaining access to a source of ongoing and continuous care and navigating the managed care system to access services as needed and as soon as possible.
- Documenting Medical/Dental interventions and health/oral health coverage in CLOUDS within 90 days of enrollment.
- Providing ongoing support for families in need of a medical/dental home.

Comprehensive Services Assistant Managers are responsible for:

- Supporting clerks with families that are facing barriers to medical/dental home access.
- Monitoring CLOUDS reports on an on-going basis to identify children in need of a medical/dental home.
- Coordinating with the Site Supervisor and parent to schedule and attend family meetings regarding medical/dental homes.

Comprehensive Services Health Manager is responsible for:

- Collaborating with community partners to obtain access to medical/dental homes for CSB families.
- Reviewing CLOUDS Reports to ensure compliance with medical and dental homes.
- Calling upon advocacy organizations to address any gaps in service or access.

**C. Developmental, Sensory, and Behavioral Screening**

All children are screened by the teaching staff in the areas of social emotional development and cognitive development including children with an IEP/IFSP, and as needed, by the Comprehensive Services Team for hearing, vision, and nutrition, within 45 days of class entry. Parents should be informed about all upcoming screenings and their purposes in advance. Results of the screenings are used as part of the individualization process for each child.

It is the Site Supervisor's responsibility to work with the teacher and Comprehensive Services Team to ensure that ASQ-SE and ASQ-3 screenings are completed within 45 days of class entry.

The teacher places completed ASQ-SE and ASQ-3 Screenings in the Education section of the child's file and enters screening data in CLOUDS. Teachers give each child time to adjust to the new environment before rescreening if necessary.

### **1. Protocols for Sensory (Vision and Hearing) Screening**

Evidence-based vision and hearing screenings are to be completed within 45 days after the child first attends the program or for home-based program option, receives a home visit, for children who do not have results as part of their Well Child Check and for returning children, as needed, based on the EPSDT schedule.

Comprehensive Services Assistant Manager is responsible for:

- Identifying those newly enrolled children in need of initial screenings, returning children in need of screenings based on the EPSDT schedule and re-screenings due within two weeks of the initial screening through use of CLOUDS Smart Reports.
- Coordinating screening team logistics for Comprehensive Services Clerks to administer screenings on an ongoing basis.
- Notifying the Site Supervisor of the upcoming screening schedule with a minimum one week notice. Note - One week notice may not apply for children absent on the initial screening date.
- Directing Comprehensive Services Clerks to input data results in CLOUDS, preparing referrals as needed and providing follow-up until treatment is established and complete.
- Communicating immediately with parent upon identification of screening concerns.
- Coordinating with the Site Supervisor and parent to schedule and attend family meetings regarding sensory screenings.
- Tracking referrals to physicians and providing ongoing assistance to clerks and parents until testing/treatment is established and the referral is complete.
- Ensuring the completion of the health section of the Screening Results Form (CSB212) within 75 days of enrollment.
- Completing vision and hearing screening certification courses as soon as possible after hire.

The Site Supervisor is responsible for the following:

- Obtaining a screening schedule from the Comprehensive Services Assistant Manager and providing a schedule for teaching staff.
- Providing teaching staff with the screening preparation curriculum.
- Monitoring the implementation of screening preparation in the classroom curriculum and on

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the lesson plan.

- Providing an appropriate screening area on site for the administration of screenings.
- Designating teaching staff to accompany children to and from designated screening location.
- Coordinating with Comprehensive Services Assistant Manager and parent to schedule and attend family meetings regarding screenings.
- Ensuring the completion of the education section of the Screening Results Form (CSB212) within 75 days of enrollment.

Teaching Staff is responsible for:

- Implementing screening preparation curriculum in the classroom.
- Including screening preparation on the lesson plan. Note – In an effort to complete all screenings within the 45-day deadline, it is important to include screening preparation into the lesson plan for the first week of school for part year programs and two weeks prior to July 1 for year round programs.
- Providing flexibility with the classroom schedule to support Comprehensive Services in completing the screenings.
- Introducing Comprehensive Services Staff to children on the screening day.
- Assisting Comprehensive Services with gathering children to be screened, tracking children as they are removed from and re-enter the classroom and accompanying children to and from the screenings as directed by Site Supervisor.
- Completing the educational areas of the Screening Results Form (CSB212) including the Behavioral Screening (ASQSE) and Cognitive and Language Screening (ASQ3) and signing in the designated area.
- Assisting with the distribution of Screening Results Forms (CSB212) to parents.

Comprehensive Services Clerks are responsible for:

- Engaging parents in conversation about the importance of screenings.
- Notifying parents of dates and screenings to take place through one-on-one conversation and by posting flyers on site, one week in advance of the screening days.
- Reviewing reports of children to identify those that need to be screened.
- Verifying consents for screenings on the Health History forms of those children to be screened.
- Obtaining additional consents for screening to be administered by collaborative agencies as needed.
- Obtaining documentation of Parent Refusal for Health Services (CSB298).
- Obtaining equipment needed and setting up screening tools on site.
- Introducing screening staff to the classroom teaching staff and allowing teaching staff the opportunity to introduce the screening staff to the children.
- Encouraging teachers to assist in choosing the order in which the children will be screened. Note: those children unwilling to participate will be given future opportunities and parents and/or staff may be encouraged to accompany the child to complete needed screenings within the 45-day deadline.
- Partnering with teaching staff and Site Supervisors to accompany children to and from the classroom and the location of the screening administration.
- Administering the vision and hearing screenings and, noting results on the Hearing and Vision Screening Tracking Form.
- Cleaning up the equipment and leaving the area as it was found.

- Maintaining sensory screening results on the Hearing and Vision Screening Tracking form in a binder onsite.
- Entering all screening data in CLOUDS and documenting screening results, re-screens and referrals.
- Informing the Comprehensive Services Assistant Manager and Site Supervisor of those children in need of re-screening.
- Administering re-screenings within two weeks of the initial screening and within 45 days of enrollment if the child did not pass or was unable to condition.
- Preparing referrals to physicians and in CLOUDS for those children identified as needing further evaluation.
- Contacting parents of children with referrals, offering resources for a medical/dental home/insurance and additional assistance as needed.
- Completing the Screening Results Form (CSB212) and ensuring that teaching staff has completed the education section of the form prior to making a copy for the file and distributing the original to the parent in a confidential manner within 75 days of the child's date of enrollment.
- Providing ongoing assistance for referrals and resources until each referral is complete.
- Completing vision and hearing screening certification courses as soon as possible after hire and prior to expiration of certification.

Comprehensive Services Health Manager is responsible for:

- Overseeing the monitoring of all sensory screenings, referrals and follow up.
- Coordinating annual Vision/Hearing Screening Trainings with CHDP.
- Attending family meetings for complex cases.
- Registering Comprehensive Services Staff in need of vision/hearing training and certification as soon as possible after hire and prior to expiration of certification.
- Coordinating screenings with collaborative agencies and notifying the Site Supervisor and Comprehensive Services Team of those screening dates and requirements.

#### **D. Exams, Follow-Up and Treatment**

Early medical/dental exams and other screenings enable parents and program staff to identify any concerns and respond in a timely manner. Whenever concerns are present the Comprehensive Services Team communicates with the parent immediately and works with the parent to obtain necessary follow-up services or treatment. Assistance is provided in the acquisition of equipment needed for medical/dental conditions and parents are educated regarding their child's specific condition and needs.

- Dental follow up/treatment includes preventive measures and further treatment as ordered by the dental professional.
- Medical Treatment includes treatment of any condition as identified on the physical exam, other health documentation from a health professional or the IFSP/IEP.
- Follow-up treatment for both medical and dental needs is tracked in the CLOUDS system using the referral feature and is referenced in the child's confidential file.

Where no resources exist in the community for follow-up and treatment, the program will pay for services as long as funds remain in the budget earmarked for this purpose. To access program funds, the

Comprehensive Services Team must document that all available resources have been exhausted and that program funds are being used as a last resort. This information, along with proof of need and the estimated cost for treatment, must be submitted to an Assistant Director for approval and submitted to the fiscal unit and the Bureau Director.

**The protocols for Referrals, Follow Up and Treatment are as follows:**

Comprehensive Services Clerk is responsible for:

- Generating a referral in CLOUDS as soon as a need is identified, with attention given to selecting the appropriate Referral Reason, Service Area and Status.
- Provide resources and referrals as needed.
- Assisting in collecting documentation needed for the referral.
- Entering related data into CLOUDS.
- Supporting parents throughout the referral process.
- Obtaining the Parent Refusal for Health Services (CS298) as needed.

Comprehensive Services Assistant Managers are responsible for:

- Monitoring CLOUDS reports and following up on referrals on a weekly basis.
- Coordinating with the Site Supervisor and parent to schedule and attend family meetings.
- Supporting families through the referral/family meeting process.
- Ensuring the updating of the status of the referral as it changes.
- Contacting the Comprehensive Services Manager for training or technical assistance as needed

Comprehensive Services Health Manager is responsible for:

- Providing training and technical assistance as needed.
- Supporting families and staff through the family meeting process for complex referrals.
- Providing reports and updates to the Assistant Directors as needed.

Assistant Directors are responsible for:

- Ensuring follow-up and corrective action plan completion.

## **E. Children with Disabilities- Screenings, Family Meeting and Referral Procedures**

Early childhood experiences are known to shape the developmental outcomes for children. Trauma during the early years also affects long-term outcomes by impacting brain development, cognitive, physical, and social/emotional functioning. The Community Services Bureau has systems in place to mitigate these factors which include early screenings/assessments, family meetings and linkage with appropriate agencies to provide any/all necessary comprehensive services the child and family might need. Parents need to agree and provide a written consent (CSB501) prior to receiving referrals or linkages to any other agencies. Agencies closely working with the Community Services Bureau are: the Regional Center of the East Bay, the Contra Costa School Districts, the Contra Costa Children and Family



Services Bureau among others.

## **1. Screenings**

The Community Services Bureau is committed to early identification of children at risk of developmental delays in order to provide the necessary early intervention that will lead to a better future for the child.

Prior to enrollment during the application period the child's file might be flagged using the Red and Yellow Flag System to alert the staff of known or suspected concerns based on the completed health history by the parent. The health history briefly screens children for possible health, nutrition, and socio-emotional and developmental risks.

Child's Physical Exams/Baby Well Checkups provide a great source of information and they are submitted by the parents within 30 days of enrollment and thereafter as required by the EPSDT schedule.

In addition, sensory and developmental screenings are provided to all enrolled children within 45 days of enrollment including children with an IEP/IFSP.

Children determined to be in need of further evaluation/assessment based on screening results, staff observations, and/or parent observation are referred to the appropriate agency with parental consent.

## **2. Data Gathering, Family Meeting and Referral**

The Community Services Bureau staff follows the next steps when referring a child for a diagnostic assessment and early intervention to an outside agency.

### **i. Data gathering by CSB staff prior to family meeting**

- The child's file and the CLOUDS system are reviewed to identify other related concerns.
- The developmental history taken at enrollment is reviewed. (It provides information regarding the child's history of exceptional items not normally occurring, i.e., low birth weight, allergies, premature and/or post-mature, difficult birth, accidents, eating behaviors, meeting milestones and/or other concerns).
- The medical records completed in the last 12 months are reviewed to identify health concerns or other relevant information given by the pediatrician.
- The sensory/cognitive screening and assessment results are reviewed and verified to ensure further evaluation if necessary.
- The Initial Home Visit form (CSB170) is reviewed to identify parent's concerns.
- The At Risk Referral Form (CSB622) is reviewed. CSB 622 form indicates that the child/family has as an open CFS case and is receiving Child Protective Services and childcare/development services are necessary component of the Child Protective Services Case Plan or the child/family has an At-Risk Case and is NOT receiving Child Protective Services, but is at risk of abuse, neglect or exploitation and childcare and development services are needed to reduce or eliminate the risk.
- Teacher/Site Supervisor/Disabilities Comprehensive Services Disabilities Manager observes the child in the classroom and produces written documentation about child's strengths and

challenges.

## **ii. Family Meeting**

After gathering data, the site supervisor, teacher and CSAM review the strategies that will be presented to the parent in a family meeting.

The Site Supervisor and/or CSAM invite the parent/s to a family meeting to be held at the parent's convenient time and to identify if the parent will need an interpreter.

The CSAM invites the additional team members in collaboration with the site supervisor. The family meeting team members include but are not limited to the class teacher, the Site Supervisor, the assistant manager, content area managers, the interpreter, any other family friend/relatives, the physical therapist, the occupational therapist, the speech/language therapist, CFS welfare social worker and any other professional involved with the child/family receiving services.

The meeting is facilitated by the CSAM but can be led by other agency staff. The meeting is documented in the family meeting Form (CSB514) and/or directly entered in CLOUDS under "Disabilities-Family Meeting Information" attached to the Meeting/Event sign-in Sheet Form (CSB905). All participants are required to sign the CSB 905 form. These original forms will be placed in the child's file under the Special Needs Section.

The purpose of the meeting is to open communication relevant to the individual needs of the child, to provide strategies for the parent and to place necessary referrals to outside agencies for further evaluations. The family meeting is dismissed after identifying actions, roles and responsibilities for each member and scheduling a follow up meeting if necessary.

## **iii. Referral**

The CSAM contacts the family for a follow-up within 30 and 60 days after submitting the referral to ensure proper evaluation meetings are in place, proper support is given to the parent in preparation of the diagnosis meeting, and ensure participation in the IEP/IFSP meeting.

Additional family meeting will follow up as needed and/or as determined in the initial meeting.

## **F. Parent Involvement in Health, Nutrition, and Mental Health Education**

- CHDP consultants train parents and staff on prevention of common childhood illnesses. (Contra Costa County Health Services) MediCal representatives provide education and information to parents and staff on MediCal application procedures and the Managed Care system.
- Dental representatives train parents and staff on dental hygiene.
- A Mental Health Consultant trains parents and staff on early prevention/intervention of children's Severe Emotional Disorder, Behavior Disorders, and stress related behavior.

## **G. Child and Family Mental Health Services**

### **1. Description**

The Community Services Bureau Mental Health Unit provides individual psychotherapeutic services to children enrolled in the Early Head Start and Head Start program. The staff provides individual and group consultation to parents and teaching staff on child abuse, parenting skills, parent advocacy, developmental and mental health issues impacting the 0-5 year-old population and their caregivers.

The Mental Health Unit operates a comprehensive Master's level Internship Program in collaboration with Contra Costa County Health Services Department, Mental Health Division on a year-round basis.

The Contra Costa County Community Services Bureau program staff, partners with parents and mental health professionals, to identify mental health concerns of children and parents in the program. The task of the family meeting team is to:

- Ensure parental consent for Mental Health Consultation is present
- Ensure the delivery of appropriate mental health services in a timely manner
- Assist in designing strategies to identify mental health concerns of children
- Recommend appropriate placement and/or program modifications to meet the individual needs of children
- Support and include parents in the decision making regarding mental health services for their child

#### Goals of the Mental Health Unit

- The goals of the prevention activities provided by the mental health unit address self-concept, building positive relationships among children, their peers and their caregivers; developing coping and problem solving skills, and stress management.

### **2. Mental Health Services**

The Mental Health Unit delivers the following services:

- Prevention, early identification and intervention in problems that may interfere with a child's development
- Developmental/Social and Emotional Screening (ASQ3 and ASQSE)
- Focus on early detection of concerns of caregivers, staff and children who may be in need of mental health services
- Mental health assessment
- Play Therapy (Individual Psychotherapy with children)
- Family Support
- Parent (Guardian) – Child Interaction Therapy
- Staff Training on mainstreaming and social integration techniques
- Parent Training on social, emotional and mental health development of children
- Parent Training on positive child rearing techniques and stress management
- Program evaluation and performance partnership review to ensure planning and delivery of excellent supports and services.

- Family Meeting
- Crisis Intervention
- Provide community resources to families
- Child Abuse and Domestic Violence awareness

The objectives of Mental Health treatment are to alleviate and resolve identified symptoms per a diagnosed mental health issue and medical necessity. The clinicians perform assessment and ongoing treatment based on a diagnosis by their licensed supervisor. The treatment is provided in accordance with the parent or legal guardian's consent; parents or guardians are encouraged to be active participants in the treatment planning process as outlined by the Head Start Performance Standards.

Services are individualized and are primarily provided at the preschool sites in dedicated play therapy rooms. The Clinical Team coordinates care of children, parents and families with other contracted and non-contracted county child and family service agencies while a child is enrolled in and transitioning out of Head Start. The hours of operation vary depending on the child's school program and individual needs. The clinicians provide some services in the early morning or evening to accommodate caretakers' work schedules. Additionally, all Mental Health staff is available via voicemail, and email through the Mental Health unit administrator.

### **3. Mental Health Referral Procedures**

#### **i. Mental Health Recommendations**

Mental Health Staff collaborate with CSB health, disabilities, nutrition, and education colleagues and CFS to determine a child's need for a diagnostic evaluation. Diagnostic evaluations are recommended for all children who present with symptomatic behavior indicating signs of severe stress, social, emotional, educational, developmental delays and/or physical concerns.

A referral for mental health services can be requested by parents, teachers, Site Supervisors, Ed managers, CSAMs and clinicians. If recommendation is for referral to Mental Health services within Head Start/Early Head Start or other agency, the Education Staff or Comprehensive Services member will follow this protocol:

- A child observation is not required if the parent initiates and asks for mental health services for her child and a referral will proceed immediately. "Ed manager may do observation on this child after the referral is submitted if s/he feels the reason for the referral may be due to teaching practice and/or classroom environment."
- If a teacher has a concern about a child's behavior, she/he will inform the site supervisor. Site Supervisor must explore with teacher to ensure best practices including a Positive Guidance Plan (CSB 134B), if appropriate, has been implemented for the child before moving process with MH referral. Site Supervisor has 48 hours to inform CSAM, Ed Manager and Clinician whether MH referral is considered or not, and if not, a reason shall be given.

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- Site Supervisor, Ed Manager or Clinician can provide the observation to help determine if referral to MH is needed. Once all observation is completed and MH referral is needed, CSAM will notify the family for a family meeting to move forward with MH referral.
- Based on the agency identified for referral, the CSAM will explain in detail the requirements for their referral process, their timelines, and provide copies of the parent rights and responsibilities under IDEA to the parent. It is crucial that this portion be clear to the parent and an interpreter assist the parent with any clarification.
- The parent is encouraged to sign the Child Referral and Parent Consents Form (CSB501), only after understanding the referral process and his/her parent rights under IDEA. The assistant manager assists the team by providing the copy CSB501 form to be signed.
- For Mental Health referrals, the medical provider information is completed on the referral form and a copy of the child's Medical card (if insured) is attached. When a child is on a Positive Guidance Policy Step Letter and has a Positive Guidance Plan, a copy of this plan, the child's Ages and Stages Questionnaire – Social Emotional (ASQ-SE) and Development Screening (ASQ-3) is included with the referral.
- The Child Referral and Parent Consents Form (CSB501), is reviewed to ensure the document is correctly filled out after acquiring parent signature. Additional signatures are obtained from the Site Supervisor, Education Manger, and the Comprehensive Services Assistant Manager. A copy of this form (CSB501), is given to the parent, one to the assistant manager to process the referral and the original is placed in the file.
- The CSAM reviews the signed CSB501 and processes it immediately. Once verified referral receipt by phone with the appropriate School District, Early Intervention Agency, or Mental Health Unit, the assistant manager completes the Response to Referral Form (CSB502).
- The original form (CSB502) is placed in the child's file while the copy is given to the parent attached to additional relevant informational resources.
- The CSAM opens a referral in CLOUDS and enters the referral notes in the "Disability Intervention Referral", "Intervention Notification" and "Family Meeting Information" under the disability tab in CLOUDS. Copy of the family meeting (CSB514) or family meeting CLOUD's print out form is placed in the child's file.
- Any clinician who provides the service for a child must share their strategies that are being used with the child's teacher so the teacher can support the implementation of the strategies in the classroom for consistency.
- A regular case meeting will occur monthly or bi-monthly depending on the need (case by case) with the site supervisor, child's teacher, the clinician to follow through on the child's progress and update.

CSAM is responsible for:

- Entering the referral in CLOUDS to include:
  - Entering the reason for the referral in the comment section
  - Entering the 'Parent Consent for Release of info' as "Received" and entering the date

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- that the parents signed the form
- Entering the child's Medi Cal number in CLOUDS
- Faxing referral with cover sheet to confidential fax at CSB Mental Health Unit at (510) 374-7023 and including the following documents:
  - Complete Referral Form
  - MediCal Card or other insurance documentation
  - Positive Guidance Policy Step Letter and Positive Guidance Plan if on file
  - ASQ-SE (as available)
- Sending email or calling Mental Health Clerk to advise that referral is being faxed. Include the following information:
  - The child CLOUDS ID
  - If it is a high priority case and needs immediate attention, such as a CFS At-Risk referral, use the High Priority Flag on the email, and write in, "High Priority Case-Please process ASAP".
  - Updating CLOUDS data entry Changing referral status from "New" to "In Process"
  - Changing the referral status in CLOUDS from "In Progress" to "On Going" when a clinician has been assigned
- Adding extra notes under Case Notes as applicable
- Scheduling family meeting as needed
- Creating a new Referral in CLOUDS if there are no available case openings, the child is not eligible for Medical Services, or the parent declines services and an outside provider is available
  - CSAM will follow-up with the parent to see if they are receiving services. Update in CLOUDS Referral section and note when the child is actually receiving outside services
  - CSAM will continue to communicate with Site Supervisor and the Mental Health team regarding services or for support in providing referrals
- If parent fails to obtain outside services, CSAM will assist in finding services and check back periodically with MH clerk to see if CSB MH has case openings and is able to serve the child, CSAM, updates CLOUDS to reflect status of referral (Complete, Parent Refused).
- Notify Disability MH Manager, if services are going to be provided on site by an outside agency.
  - Obtain outside agency documentation and email copies to Disability MH Manager for review and service delivery approval.
- Obtain signed parental consent to release child to intervention services. (CSB 505)
- File proper related documents under the Special Need section of the child's file.

Mental Health Clerk is responsible for:

- Verifying if the child qualifies for services
- Entering Case Notes under CLOUDS referral, beginning with the date, and ending with her first initial and last name.
- Confirming referral receipt by sending an email to CSAM and Site Supervisor. The referral will

be processed and assigned to a mental health clinician who will perform an assessment and provide ongoing services if the child symptomatic behaviors meet medical necessity for treatment.

- Emailing the CSAM and Site Supervisor with child's CLOUDS # with the child's MediCal eligibility status and advising if services can be provided or if an outside referral is needed.
- Entering in the Mental Health Section of CLOUDS "Facilitated Referral"
- Sending an email to CSAM and CSB Site Supervisor to inform that the child's case has been assigned to a clinician and when services will begin.
- Entering the clinician assignment in the Mental Health section and Case Notes of CLOUDS
- Emailing the CSAM and Site Supervisor when a referral is closed or returned.
- Advising CSAM and Site Supervisor if there are no available case openings, the child is not eligible for Medical Services, or the parent declines services

In this case a second family meeting may be held to communicate with parent/guardian, and to provide support/follow up, and/or additional resources, and/or recommend a referral for outside services if appropriate.

Clinicians are responsible for:

- Contacting the child's parents to obtain informed consent and to start services
- Consulting with CSAM to advise and/or coordinate first parent contact meeting as appropriate
- Participating in family meetings as needed

Mental Health Clerk will update CLOUDS in the Referral Section, change status of the original referral and select "Complete" from the drop down menu and provide a brief explanation in Observation Comments Section.

## **ii. Mental Health Emergency/Crisis Referral Procedures**

If a CSB Site Supervisor and/or CSAM believe that a child is experiencing and/or responding to an emotional crisis or emergency in their life and need urgent mental health intervention, the following people in this order should be notified before making a referral:

- Mental Health Clinical Supervisor East
- Mental Health Clinical Supervisor West
- Comprehensive Services Assistant Director
- Comprehensive Services Disability/MH Manager
- Cluster A Assistant Director
- Cluster B Assistant Director

The responding Mental Health Manager, Clinical Supervisor or Agency Manager will determine an appropriate intervention or course of action based on the level of crisis and an initial clinical assessment. If CSB Mental Health determines that the case needs specialized intervention that CSB cannot provide, the responding clinical supervisor/manager will assist site staff in the facilitation of an appropriate outside referral. If the CSB Mental Health team can provide treatment and the child is determined to be in crisis, a referral will be processed and treatment will be provided regardless of the child's MediCal eligibility.

The referral should be rushed through the current procedure; MediCal eligibility and/or health insurance information can be checked after the referral is faxed to the mental health unit

### **iii. Mental Health Professional Staff**

The Mental Health unit employs licensed Clinical Supervisors and unlicensed Master's level staff working towards Marriage Family Therapist or Clinical Social Worker licensure and who are educated in children and families Mental Health. The staff strives to provide excellent early intervention to children and support services to parents that are designed to meet their specific needs.

The Mental Health unit attempts to employ staff to accommodate the linguistic and cultural needs of a diverse Head Start population. The unit is supported by a senior clerk and a team of CSB Comprehensive Services Assistant Managers CSAMs. The CSAMs facilitate the family meeting that might lead to child referrals for play therapy services.

To promote children's mental wellness, CSB develops collaborative relationships with local mental health agencies for the purpose of securing ongoing prevention, intervention, consultation, and direct services to the program's children and their families.

### **iv. Mental Health Services & Special Education Services Sign-In Protocol:**

Mental Health and Special Education professionals must sign-in the visitor log at all CSB sites. Mental Health Clinicians and intervention professionals are responsible for:

- Signing the Site visitor log at each site when visiting and providing services to a child or attending a meeting. Only sign name/agency and do not identify self as a Mental Health provider to ensure client confidentiality and comply with HIPAA regulations.
- Adhering to appropriate classroom protocols when removing/returning child from/to classroom for play therapy services.

Site Front Desk Staff is responsible for:

- Ensuring that MH or other Early Intervention professional sign in the Site Visitor Log prior to providing services to the children on site.

Outside agency providing services at CSB sites:

- When an outside agency professional is going to provide services at a CSB site, the Disabilities- MH Comprehensive Services Manager must be informed immediately. Outside agency Professionals needs to be informed about Head Start and CSB Policies and Protocols prior to providing services at CSB sites.
- Site Supervisor or CSAM must obtain the following documentation from the outside agency professional.
  - Copy of Parental Consent to Child Release to Early Intervention Services (CSB 505)



- Copy of Parent Consent to exchange information with CSB Staff (CSB 503)
- Copy of Personal ID, work ID and Business card
- These documents need to be filed under the Special Needs Section of the child's file and copies submitted to the Disabilities-MH Comprehensive Services Manager for review and approval or service delivery.

CSAMs are responsible for:

- Informing Disability- MH Comprehensive Services Manager if an outside agency professional is going to provide services at a CSB site and professional's contact information for review.
- Collect copies of required consents and documents prior to allowing services delivered at CSB site.
- Communicate Site Supervisor of new professional providing services on site and coordinate safe and appropriate space for delivery of services
- Entering all Special Services in CLOUDS

#### **v. Policy Regarding Response to Legal Situations**

Description of CSB Policy Regarding Involvement in Custody Disputes by Treating Mental Health Clinical Staff:

- If there is a custody dispute involving the child who is receiving Mental Health services from CSB's Mental Health unit, it is the policy of this agency that the treating clinician or Mental Health Clinical Staff not get involved in such a custody dispute. This dispute may be between the parent and the system or between Social Services and the parent(s).
- Mental Health Clinical Staff are discouraged from writing letter or reports in support of either side in such a dispute. The treating clinician will serve their client best by staying neutral in a custody dispute. Taking sides opens the door for the clinician to be asked to testify in a court of law and expose confidential client information.
- If a parent (or Social Services) requests a written report about the child's treatment, and after a Release form has been signed by the parent, a short treatment summary should be composed and – upon approval by the supervisor – mailed to the child's parent ONLY.

#### **vi. Description of CSB Policy Regarding Subpoenas**

- Subpoena of Records: If a subpoena for records is served to the treating clinician, the clinician must attempt to have the child's parent sign a release form permitting the release of a treatment summary. If such a release cannot be acquired, the clinician must claim the Psychotherapist/Patient privilege. The court will then have to override the privilege and request the records.
- Subpoena to Appear in Person: If a subpoena to appear in person is served to the treating clinician, the clinician, upon consultation with his/her supervisor must also claim the Psychotherapist/Patient privilege. The clinician must not respond to or talk to any court

representative, serving officer, or lawyer for any party, without the special written permission of the child's parent(s) (or Social Worker for Social Services). If a Mental Health Intern gets served with a subpoena, he/she should contact his/her supervisor immediately for a consultation.

#### **vii. On- Site Mental Health Consultation**

The Mental Health Clinical Supervisor and Comprehensive Services Assistant Managers facilitate and make referrals for psychological assessments for children having potential emotional or behavioral problems with written parental consent.

The Mental Health Clinical Supervisor and Comprehensive Services Assistant Managers utilize the Directory of County Mental Health Providers to make referrals when appropriate and work with parents to obtain information on available school resources and services in the area of mental health, locating placement for individual children including securing psychological services.

Parents and staff collaborate in the planning of all mental health and educational services. The Mental Health Supervisor, clinical staff and Comprehensive Services Assistant Managers advise the site supervisor and educational staff on integrating mental health activities into the curriculum. Mental Health clinical staff collaborates with site supervisor and classroom teachers to implement strategies and plans related to social emotional curriculum. Periodic observation of children's behavior and classroom learning environment is performed. Family meetings are held to discuss the observations with education staff, parents and/or Comprehensive Services Managers.

The Mental Health Clinical Supervisor and clinical staff provide workshops to staff and parents on topics relating to child mental health, such as childhood depression, management of difficult childhood behaviors, stress management, recognition of child abuse, increasing children's self-esteem, and play therapy and positive parenting. Information is also provided to staff on identifying mental health needs, making mental health referrals and utilizing family meeting to facilitate a referral. The Mental Health Clinical Supervisor and clinical staff provide consultation at family meeting to discuss children who exhibit a typical behavior or emotional/behavioral needs.

#### **viii. Additional Mental Health Supports**

Staff and parent support group meetings are held to discuss child mental health parenting and caregiver issues and challenges. Family meetings are conducted a minimum of twice per year depending on the needs of the family.

## H. Strategies for Behavior Management

The teaching staff must utilize positive guidance techniques and developmentally appropriate practices in managing children's behavior. Children respond differently to various intervention approaches, and have individual temperaments that staff must consider in behavior management. To help support positive guidance techniques, teachers will utilize the Early Childhood Teacher Self-Reflection Tool. Upon completion, teachers can continue to reflect on their own thoughts and teaching practices to support the classroom. In the fall, teachers will update and refresh their own self-reflection tool, as needed.

- At CSB any form of discipline or punishment that violates a child's personal rights is not permitted.
- "Time out" for children is not accepted as a strategy for dealing with inappropriate behavior.
- CSB will not expel or unenroll any child due to behavior. A temporary suspension may be implemented as a last resort in extraordinary situations. In such cases, CSB will provide the necessary resources to the family to assist the child in returning to full participation in the program.
- Incidents that include challenging and/or unsafe behavior are: aggressiveness, defiance, unexpected extreme emotional outbursts, or other sudden changes in behavior.

To support a positive behavior development, CSB implements the following strategies:

**STRATEGY A-**Teaching staff implement best practices including CSB's social-emotional curriculum for all children, Second Step.

**STRATEGY B-**Create Positive Guidance Plan with parent and site staff during a family meeting. If behavior continues, review and update the Individualized Positive Guidance Plan with parent and site staff in an additional family meeting.

**STRATEGY C-**When strategies A to B have not been successful; the Positive Guidance Policy Step Letter to Parents is implemented. Apply only when Strategies A and B have been implemented.

### 1. STRATEGY A-Implement Best Practices

Challenging or unsafe behavior is discouraged. The following strategies reflect best practices for responding to inappropriate behavior:

- Anticipate/eliminate potential problems
- Evaluate and adjust the environment
- Redirect child away from conflict or negative events to more positive activity
- Offer choices to child
- Assist child to learn logical and natural consequences of their actions
- Encourage respect for the feelings/right of others
- Encourage identification and healthy and socially acceptable ways to express emotion

- Encourage development of self-regulation and behavior control through positive reinforcement of prosocial behavior
- Maintain open communication with children’s care givers

Additional behavior management strategies include:

- Let children know what is expected and why – Inform children what the rules are, and the reasons for these rules. Let children help create classroom rules.
- Model and encourage expected behavior – Show children, with actions and words, what is expected. Praise children’s actions when appropriate.
- Respect children’s developing capacities – Ensure that expectations match/respect children’s developing capacities.
- Talk to children about their behavior on their level; listen and communicate caring concern about them as individuals.
- Review the classroom rules with the children or with an individual child and explain that they are important to keep everyone safe.
- Allow someone else to step in and help – If a teacher becomes frustrated, immediately ask another teacher/supervisor to help. (It is best to request another adult to take over until you can return to the classroom.)
- Observe/record behavior - especially recurring behavior – to determine factors involved in the behavior. Maintain a positive/loving attitude – Keep your sense of humor, do not focus on the difficult behavior. View the behavior and responses as opportunities to help children grow/learn.
- Discuss with children healthy ways to deal with anger, stress, and frustration.
- Invite the Education Manager to do an observation of the classroom and provide feedback in an effort to support the teachers work.
- Consider repeating a certain unit of the Second Step Curriculum that relates to the current concerns in the classroom.
- If little or no progress is made within two weeks of implementing these best practices, proceed to Strategy B. *However, if child demonstrates extreme, challenging or unsafe behavior, document outcome of the consultation with Education Manager in the child case notes section under the Positive Guidance category in CLOUDS. The education manager will assist in determining next steps.*

## 2. STRATEGY B - Positive Guidance Plan

When the above listed strategies are ineffective, the next step is for the Site Supervisor, with teacher support, to conduct a family meeting and develop an individualized Positive Guidance Plan (CSB134B). The Positive Guidance Plan, specifically areas 3 and 4 of the plan, will be created with the parent/family member during the family meeting. Steps include:

- Prior to the family meeting, consult with all key stakeholders
- Define the child’s strengths
- Define the child’s challenging/unsafe behavior concerns
- Partner with parent/caregiver through a mutual decision-making process to define how the family will be involved in guidance plan
- Develop strategies to redirect the behavior that include a timeline for behavior change,

classroom strategies and family involvement plans

- Develop strategies to reinforce the child’s positive behavior
- Discuss other resources if necessary. For example: referral for mental health services, referral to school district or other local support for assessment and services
- Set timelines for plan implementation and progress
- If little or no progress is made within two to four weeks of implementing the Positive Guidance Plan, notify your Assistant Director and proceed to Strategy C, Positive Guidance Policy Step Letter to Parents. *However, if child demonstrates extreme, challenging or unsafe behavior, document outcome of the consultation with Education Manager in the child case notes section under the Positive Guidance category in CLOUDS. The Education Manager will assist in determining next steps.*

### **3. STRATEGY C- Positive Guidance Policy Step Letter**

In compliance with Section #101223 of the Licensing Code, and in support of children’s right to be treated with dignity and respect, the following covers our philosophy and methods for handling behavior of young children. Examples of incidents that include challenging and/or unsafe behavior are aggressiveness, defiance, unexpected extreme emotional outbursts, or other sudden changes in behavior.

If a child continues to display inappropriate behavior and previous interventions (Strategies A and B) have proven ineffective, CSB staff will implement the following four step Positive Guidance Policy (After each step, staff and parents are required to sign that each step has occurred). Ensure that your Assistant Director is informed throughout the process:

STEP 1: If the child continues to show challenging or unsafe behavior, the parent will receive an injury/incident report. The Site Supervisor will meet with parent during a family meeting to review the Injury/Incident report, review the Positive Guidance Plan that was previously created, offer resources as needed to help support your child at home and school.

At the Family Meeting:

- Review and sign Injury/Accident report if not done previously.
- Review and sign step one of the Positive Guidance Policy Step Letter to Parents form (CSB521).
- Review the previously created Positive Guidance Plan.
- If not previously offered, provide parent resources and/or linkages to consultation.
- Discuss if additional resources are needed.

STEP 2: If the child continues to show challenging or unsafe behavior, the parent will receive an injury/incident report. The Site Supervisor will meet with parent for an additional family meeting to review the child’s Positive Guidance Plan and determine if changes or additional resources are needed. Referrals to a confidential consultation and support services will be offered.

At the Family Meeting:

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- Review and sign Injury/Accident report if not done previously.
- Review and sign step two of the Positive Guidance Policy Step Letter to Parents form. (CSB521)
- Review the previously created Positive Guidance Plan and provide resources and make adjustments as needed.
- Offer parent linkage to confidential consultation and support services

STEP 3: If the child continues to show challenging or unsafe behavior and the two previous steps are proving to be ineffective, the parent will receive an injury/incident report and additional strategies will be reviewed. Family support for the child in the classroom is now necessary. The Site Supervisor will immediately discuss the amount of family support needed during the day and how many days. An additional family meeting will be scheduled to discuss more permanent solutions.

At the Family Meeting:

- Review and sign the Injury/Accident report if not done previously.
- Review and sign step three of the Positive Guidance Policy Step Letter to Parents (CSB521)
- Discuss the family support in the classroom
- Discuss more permanent solutions, if needed

STEP 4: If the child continues to show challenging or unsafe behavior and the three previous steps are proving to be ineffective, the parent will receive an injury/incident report and a temporary suspension is necessary while additional supports are put in place. Educational materials will be given to the child to use at home during this time. CSB will support the family and child to return to the program as quickly as possible. Following the temporary suspension, and upon return to the classroom, an additional family meeting will be scheduled. Should the child continue to show challenging or unsafe behavior, CSB will support the family to transition to a program that better meets the child's needs. The length of the temporary suspension will be determined by the Site Supervisor and Assistant Director.

At the Family Meeting:

- Discuss transitioning the child back into the classroom
- Discuss the possible transition to program that better meets the child's needs

#### 4. Behavior Management Tracking

- A running log is kept to strengthen the tracking ability by SS, AD, and CSB of each child's challenging behaviors and to ensure staff and children receive needed support timely. The log can be found on the Document Library under Education Documents and Resources.
- SS maintains log daily as needed in addition to making detailed case notes in child's file in CLOUDS.
- SS analyzes the log regularly for trends and checks that a *tiered approach* to address challenging behaviors was followed in accordance with "Strategies for Behavior Management" protocols, and address accordingly.
- SS submits the running log to their AD monthly with their monthly report.

- AD reviews logs monthly for trends and to ensure adherence with protocols, and submits log quarterly to Division Manager.
- Division Manger reviews quarterly log for trends and ensure adherence with protocols, and submits log quarterly to Bureau Director.

## **5. Family Meeting**

### **i. Description**

Family Meeting is a collaborative process involving parents, CSB staff, and other professionals for the purpose of developing, implementing, coordinating, monitoring and evaluating available and/or required services to meet children and family's needs. Open communication and promotion of the family and child's strengths are key elements to the Family Meeting process and essential to quality outcomes.

Family Meetings are not specific to support only children with disabilities or with social emotional behaviors but as comprehensive way of communicating with families as needs or concerns arise. These meetings are conducted to exchange information and to mutually develop the most appropriate action plan to support the family and the child.

These plans may include, but are not limited to, development of a Strength Building-Family Partnership Agreement (SB-FPA) with the parent(s), home visits, referrals to outside agencies or professionals, requests for additional information from outside agencies or professionals, and classroom placement decisions or modifications.

### **ii. Family Meeting Purpose**

Family Meeting at CSB is strengths-based; enhances access to care and improves the continuity and efficiency of services. Depending on the specific setting and location, Comprehensive Services Managers are responsible for a variety of tasks, ranging from linking clients to services to providing the services themselves. Other core functions include outreach to engage clients in services, assess individual's needs, and arrange requisite support services (such as housing, benefit programs, job training, and advocating for parents rights and entitlements).

Family meetings can be called any time the need arises. However, to provide continuity of care to children receiving MH or disability interventions services, family meetings are conducted as a minimum twice a year.

### **iii. Family Meeting Facilitator Role**

A family meeting facilitator serves as a liaison between the family and the service providers (other professional services including classroom staff. The case manager could meet with parents individually or as a multidisciplinary team; often at their respective sites, via telephone, or even in a casual environment, all for the purpose of enhancing communication between the present parties.

Family Meetings are best offered in a climate that allows direct communication between the family meeting facilitator, the parent, and appropriate program staff in order to optimize the outcome for all concerned. These meetings are always facilitated in a manner that is sensitive to the parent, child and family's needs, allowing the parent maximum opportunity for expression of their concerns, and help the parent develop advocacy skills. All concerns, agreements and process of the meeting are documented in

the Family Meeting Report (CSB514). At the end of the family meeting, necessary and appropriate resources are provided, as well as a copy of meeting decisions such as “Actions and Responsibilities” that parents and staff will implement to support the child. To support monolingual families, efforts are made to provide a prompt written interpretation of meeting Actions and Responsibilities.

Family meeting facilitators are knowledgeable about a variety of community services providers and are able to identify those providers and facilities that can best serve the family’s needs throughout the continuum of services, while ensuring that available resources are being used in a timely and effective manner for families. For example, parents in need of health-related support and services receive assistance in navigating the healthcare system and working with other outside agencies.

## I. Family Meeting Team Members

It is essential not to overwhelm parents by inviting too many individuals to the meeting or having too many agenda items to discuss. Many issues being discussed at these meetings are complicated and can be emotionally difficult for parents. It is important to encourage the parent to bring an advocate if they feel it will help them better understand the information being discussed, or make important decisions. While starting the meeting, it is recommended to explain the meeting purpose and go over staff introductions including their roles and responsibilities, in an effort for the family to meet the staff and understand their roles.

### 1. The Family Meeting Team may include:

- Parent/s
- Teachers
- Site Supervisors
- Education Manager
- Disabilities Manager
- Mental Health Supervisor/Clinician
- Content Area Managers
- Comprehensive Services Assistant Manager
- Other community professionals such as a Pediatric Nurse, Psychologist, Speech Therapist, Resource Specialist, CFS Child Welfare/Social Worker, Public Health Nurse, Special Education Teacher, and/or Mental Health professional

### 2. Family Meeting Team Responsibilities as applicable to each meeting:

- Review staff introductions and purpose of the meeting
- To respect the civil rights of the parents, children and families involved.
- To provide a confidential and safe place for the child/family information to be discussed.
- To ensure that the child/family’s private information is protected and managed in accordance with all state and federal laws.
- To review and discuss assessment, evaluation results, placement and outcomes for children.
- Review and discuss appropriate placement or action to be taken.



- Establish time lines and types of service delivery.
- Develop and implement Strength Building-Family Partnership Agreements with parents.
- Meet on an ongoing basis to review and discuss progress of child.
- Review and evaluate Individualized Positive Guidance Plan.
- Ensure that a family-focused approach is taken to ensure service delivery
- Develop and implementing transition plans for children.
- Ensure that strengths of children and families are encouraged and considered in identifying expected outcomes for children.
- Ensure that family priorities, concerns, and resources are recognized and are part of the Strength Building-Family Partnership Agreement.
- Ensure that Actions and responsibilities are well documented and shared with the family.

**3. Family Meeting process:**

- Concerns are reported to the Site Supervisor
- Prior to the family meeting the Site Supervisors and teachers review the child's information in CLOUDS and file. Notes will be taken but will not be limited to health, dental, nutrition, screening results, disabilities, mental health, family services and parent involvement. All confidential mental health or other health records are stored in accordance with HIPAA.
- After files have been reviewed and the Site Supervisor considers the need for Family Meeting, the SS will inform the Comprehensive Services unit about the concerns.
- The Comprehensive Services Assistant Managers with the support of the SS arranges for a family meeting with the families to address concerns.
- Meeting team participation and meeting notes will be documented on CSB905 and CSB 514
- Meeting decisions such as actions and responsibilities will be shared so parent and staff will implement the items for follow up.

**4. Referral for Inappropriate Behavior:**

If a teacher is concerned about a child's consistent display of inappropriate behavior, the Site Supervisor should be informed.

The Site Supervisor, teaching staff, and Education Manager will observe the child in the classroom and complete documentation on their observations for use at a Family Meeting. A Family Meeting Team meeting must be scheduled to plan strategies on how to effectively meet the child's needs.

**5. The Site Supervisor is responsible for:**

- Requesting assistance from Education Managers to observe the classroom.
- Reviewing classroom observations and Individualized Positive Guidance Plan with the teaching staff prior to a Family Meeting Team.
- Discussing strategies/intervention techniques with teaching staff prior to the Family Meeting Team.

- Coordinating meeting with Comprehensive Services staff so key stakeholders could attend (CSB staff as well as any other professional involved with the child/family).
- During the Family Meeting, discuss intervention techniques and strategies to support the child's positive behavior. As needed, recommend mental health consultation/referral or referral for further evaluations under Local Education Areas LEAs.
- Support the team following the Family Meeting agreements.

**6. If Applicable, the Nutritionist and Health Services Manager are responsible for:**

- Gathering relevant information before the meeting.
- Writing nutritional plans for children and families

**7. The Comprehensive Services Manager/Assistant Manager will be responsible for:**

Gathering relevant information before the meeting: Inviting all applicable parties or individual advocates working on behalf of or providing services for child/parent (with parent consent), including but not limited to legal guardian, CFS Worker, Speech/language Therapist, Occupation Therapist, and Mental Health Therapist.

- Coordinating and gathering relevant information before the meeting. Including file review and classroom observations.
  - Creating an agenda to provide to all participants and keeping the meeting on time/track and have all participants sign-in.
  - Facilitating the meeting by supporting positive outcomes, facilitating referral as needed, sharing next step including roles and responsibility of the participants.
  - Keeping meeting documentation on child's file: Meeting Signing Sheet (CSB-905), Family Meeting (CSB 514) and if applicable consent for referrals (CSB 501).
  - Schedule a follow up meeting if needed to track team meeting agreement progress.

## **J. Child Abuse Reporting Policies**

**1. All CSB and Delegates Agencies will adhere to the following policies:**

Children who are identified by Child family Services (CFS) as at-risk will be given the highest priority for intervention and placement in the school program; and make every effort to retain abused and neglected children and/or admit allegedly abused and neglected children referred by Child Protective Services (if the families are income-eligible)

- CSB and Delegates agencies will maintain secure and confidential records regarding child abuse and neglect in accordance with state laws and Head Start Performance Standards.
- All CSB, Sub-contractors, and Delegate Agency staff must adhere to Mandated Reporters Law- Child Abuse and Neglect Reporting Act as delineated under the Penal Code Section 11164- 11174.3

**2. Child Abuse and Neglect Reporting Act- Penal Code Section 11164-11174.3 (Amended**

***Effective January 1, 2016.)***

**11164. (b)** “The intent and purpose of this article is to protect children from abuse and neglect” and “to prevent psychological harm to the child victim”.

**11164.** As used in this article “child” means a person under the age of 18 years.

**11165.2 -11165.6** These articles include all instances of child abuse such as: neglect, physical, sexual and emotional abuse.

**11166. (a)** a mandated reporter shall make a report to an agency specified in Section **11165.9**, whenever the mandated reporter, in his or her professional capacity or within the scope of his or her employment, has knowledge of or observes a child whom the mandated reporter knows or reasonably suspects has been the victim of child abuse or neglect. The mandated reporter shall make an initial report by telephone to the agency immediately or as soon as is practicably possible, and shall prepare and send, fax, or electronically transmit a written follow up report within 36 hours of receiving the information concerning the incident.

In compliance with penal code **11165.9** CSB, Sub-contractors and Delegate agency staff report reasonable suspect of abuse to the county Welfare department.

**11166. (1)** For purposes of this article, “reasonable suspicion” means that it is objectively reasonable for a person to entertain a suspicion. “Reasonable suspicion” does not require certainty that child abuse or neglect has occurred nor does it require a specific medical indication of child abuse or neglect; any “reasonable suspicion” is sufficient.

**11166. (2)** The agency shall be notified and a report shall be prepared and sent, faxed, or electronically transmitted even if the child has expired, regardless of whether or not the possible abuse was a factor contributing to the death, and even if suspected child abuse was discovered during an autopsy.

**11166. (c)** A mandated reporter who fails to report an incident of known or reasonably suspected child abuse or neglect as required by this section is guilty of a misdemeanor punishable by up to six months confinement in a county jail or by a fine of one thousand dollars (\$1,000) or by both that imprisonment and fine.

**11166. (h)** When two or more persons, who are required to report, jointly have knowledge of a known or suspected instance of child abuse or neglect, and when there is agreement among them, the telephone report may be made by a member of the team selected by mutual agreement and a single report may be made and signed by the selected member of the reporting team. Any member who has knowledge that the member designated to report has failed to do so shall thereafter make the report.

**11166. (i) (1)** The reporting duties under this section are individual, and no supervisor or administrator may impede or inhibit the reporting duties, and no person making a report shall be subject to any sanction for making the report. However, internal procedures to facilitate reporting and apprise supervisors and administrators of reports may be established provided that they are not inconsistent with this article.

**11166.01** Subdivision (c) of Section 11166, any mandated reporter who willfully fails to report abuse or neglect, or any person who impedes or inhibits a report of abuse or neglect, in violation of this article, where that abuse or neglect results in death or great bodily injury, shall be punished by not more than one year in a county jail, by a fine of not more than five thousand dollars (\$5,000), or by both that fine and imprisonment. *\*(Amended. Effective January 1, 2007.)*

### **3. Procedures for Reporting Suspected child Abuse**

- i. CSB staff in all divisions MUST report suspected child abuse or neglect IF:

- They have knowledge of it, or
  - They have observed it, or
  - They have reasonable suspicion of its occurrence or
  - They receive second-hand information of the suspected abuse
- ii. The report must be made as soon as the suspected abuse is noticed. Report of child abuse takes priority over other matters. In Contra Costa County, it is the responsibility of the local Welfare Department and the police to assess whether or not abuse has occurred.
- iii. CSB staff is encouraged to consult with their immediate supervisor for guidance and support prior to reporting. Staff may also call the Mental Health Unit for additional support at the following number: 925-890-7540 or 925-305-3564. However, reporting duties under this section are individual and no supervisor or administrator may impede or inhibit such reporting duties and no person reporting shall be subject to any sanction for making such report.
- iv. For the purposes of reporting, staff is encouraged to review the child’s file and data entered in CLOUDS. Particular attention should be made to Health History, physical exam, and Strength Building-Family Partnership Agreement (to become familiar with any details that may provide further explanation for the incident prompting suspicion of abuse or neglect).
- v. Reporting suspect of child abuse:
- In accordance with mandated reporting responsibilities and laws call:

Contra Costa Children & Family (Protective) Services Hotline Numbers	Hot Line (24 hours) 877-881-1116
	West 510-374-3324
	Central 925-646-1680
	East 925-427-8311

- Complete a “Suspected Child Abuse Report” (CSB-510 or Form STAR SS 8572) within 36 hours after the report was made. The Person Making the report must sign the written report and provide the report to their site supervisor for filing.
- Mail or Fax the completed report (CSB 510 or Form STAR SS 8572) to:  
 Children and Family Services  
 400 Ellinwood Way  
 Concord, Ca 94523  
 Fax: 925-602-6981

Site Supervisor is responsible for:

- Maintaining and storing all CFS reports in a locked confidential file, which is separate from the child’s cumulative/educational file.
- Communicating with cluster AD and completing an Unusual Incident

Report to Community Care Licensing within 24 hours of the initial CFS call.

**vi.** Feedback to Reporter:

- A CFS investigation will be open. CSB staff is encouraged to participate in the process.
- After investigation is completed, the CFS will inform the mandated report of the result of the investigation. At the end, the reporting person's name will be kept confidential. Unless, legal actions are taken when the name will be revealed and the person might be called as a witness.

**vii.** CSB Mental Health staff is responsible for:

- Informing and consulting with their clinical supervisor.
- Providing a copy of the CFS report to the Mental Health Clerk and filing a report in the child's mental health file.
- Actively collaborating with Children and Family Services to coordinate delivery of necessary services to children and families to support family preservation, reunification and child/family mental health.

**viii.** The Comprehensive Services Managers, Health, Disabilities-Mental Health and Family Engagement will coordinate activities regarding the issues of child abuse/neglect. Their responsibilities are to:

- Provide training and consultation for staff and parents regarding identification/reporting of child abuse. The purpose of this training will be to educate participants that the abusing parents or caretakers need help and support - not punishment.
- Provide support and educational services to parents as a preventive measure to reduce the likelihood of an additional abuse/neglect occurrence.
- Provide training to parents and staff yearly on the significant aspects of abuse/neglect. Comprehensive Services Disabilities/Mental Health Manager will maintain documentation of such training.
- Establish liaison with Child Protective Services (which has legal responsibility for receiving reports of abuse and neglect).
- Collaborate with Human Resources to ensure that program staff is properly informed/trained on procedures for identifying/reporting suspected child abuse and neglect.
- Collaborate with Human Resources to ensure there is a signed document in each CSB program personnel file acknowledging that the person has been trained regarding child abuse and neglect.
- Ensure that information/training is provided for parents and staff on the legal requirements regarding reporting of abuse/neglect.
- Provide written explanation of the legal requirements of reporting (given to every parent when he/she enrolls in the program). Obtain a signed acknowledgment from the parent that he/she has received and understands

- the information. (CSB-360)
- Review annually child abuse reporting laws and update all employees on new requirements. Obtain signed Acknowledgement of review from each staff. (CSB- 508 )
- Ensure that parents are provided ongoing educational opportunities to learn about positive parenting and child abuse prevention techniques.

## Sub Part II. Child Nutrition

### A. General Description-Identifying Children’s Needs

A comprehensive system of services are implemented to help prevent health problems and intervene promptly when they exist. Comprehensive services are responsible for identifying cases for nutrition referral, follow-up and arranging family meetings.

### B. Nutrition Referral

#### 1. Comprehensive Services Assistant Managers and Clerks perform the following:

- Review medical records, health histories and growth assessments.
- Identify nutrition risks following the guidelines listed below in the table.
- Initiate nutrition referral in CLOUDS.
- Update existing referrals in CLOUDS.
- Use the “What To Say and What To Do” protocol (see CSB Resource Center > Document Library > Comprehensive Services Documents and Training Resources > Nutrition) based on the specific nutrition risk when speaking with parents.
- Complete WIC/Food Stamp screening form with parent, and provide other nutrition resources as appropriate (weight, iron-rich foods, picky eater, lead poisoning, and other areas of concern).
- Encourage parents to attend nutrition presentations, such as at parent meetings.
- Document in CLOUDS all actions/services provided to parent.
- Initial and date all documentation.

#### 2. Guidelines for Identification of Nutritional Risk:

##### i. Iron Deficiency Anemia – Criteria

Criteria for Providing Nutrition Information to Child’s Parent			
Age / Years	Sex	Hgb	Hct
0 to 5	Both	11.0 – 11.5	33.0 – 34.0
Criteria for Initiating Nutrition Referral and MD Referral			
Age / Years	Sex	Hgb	Hct
0 to 5	Both	10.9 or less	32.9 or less

##### ii. Diabetes

- If child has been diagnosed with diabetes, obtain “Child Diabetes Care Plan” from child’s MD.
- If child requires blood glucose testing or glucagon for emergency life saving measure, Community Care Licensing requirements must be met prior to enrollment.

**iii. Underweight**

Input child’s height and weight under Growth Assessment in CLOUDS to determine nutritional status. Refer any child with considerable underweight status.

If child’s status is slightly underweight and there is a family history of small stature, a nutrition referral should not be made. If CLOUDS triggers an automatic referral, click “no referral needed,” and explain why under comments, unless there are additional concerns such as:

- Failure to thrive
- Developmental disabilities
- Anemia

For infants, initiate nutrition referral if following values are determined after plotting on the growth chart:

- Weight-for-age < 3-5%
- Weight-for-length < 5%
- Head circumference < 5%

**iv. Overweight & Obese**

To effectively manage children’s nutritional concerns follow-up must be monitored through resolution of the problem. Assigned staff is responsible for the following.

- Comprehensive Services Clerks:
  - Hand out resources and enter resource titles in CLOUDS
  - Follow steps as indicated on the “What To Say and What To Do” protocol (see CSB Resource Center > Document Library > Comprehensive Services Documents and Training Resources > Nutrition).
- Comprehensive Services Assistant Managers:
  - Monitor to make sure follow-up is completed.
- Site Supervisor and Partner Agency Staff:
  - Obtain updated list of Overweight and Obese children from Comprehensive Services Clerks.
- Teachers:
  - Model correct portion sizes of food for children, i.e., teachers do not serve themselves adult sized portions.
  - Monitor children's food consumption during meal time and assist children in making healthier choices if needed.
  - If a child is extremely underweight or obese, staff will follow policies and

procedures related to reporting suspected child abuse and neglect. Nutrition Manager and Health Services Managers are available for consultation as needed.

#### **v. Picky Eaters**

When picky eaters are identified, Comprehensive Services Assistant Managers and/or Clerks are responsible for providing the nutrition handout to parents, and for documenting actions and parent conversations in CLOUDS in the comment section under Health History. No referral is needed. However, if child is identified as a picky eater and there is another nutrition issue then a referral is needed.

- **Comprehensive Services Clerks:** Inform CSAM that a family meeting is needed due to child being a picky eater and having another nutrition issue such as obesity, overweight, or anemia.
- **Comprehensive Services Assistant Manager:** Schedules family meeting with Nutrition Manager and any other managers who may be needed.
- **Site Supervisors:** Inform CSAM so that a family meeting may be called, once site supervisor is aware that child is a picky eater and has another nutrition issue such as obesity, overweight or anemia.
- **Teachers:** Inform Site Supervisor, Comprehensive Services clerks or CSAMs.

#### **vi. Tube Feeding**

If child requires gastrostomy-tube care Community Care Licensing requirements must be met prior to enrollment. A family meeting takes place prior to Community Care Licensing notification and prior to enrollment into a CSB program.

#### **vii. Special Meals and/or Accommodations**

If dietary modifications are indicated based on a child's medical or special dietary needs and/or religious/personal/cultural belief, the Nutrition Manager will modify or supplement the child's diet on a case-by-case basis, in consultation with parents and the child's medical provider.

#### **viii. CSB is a Peanut-Free Program**

Each CSB center is designated a Peanut-Free Zone. CSB does not serve foods that contain peanuts due to their increasing health risk for young children. Peanuts are currently the leading food-related cause of severe life-threatening allergic reactions.

#### **ix. Food Allergies and Special Diets**

When food allergies and special diets are identified, the following will apply to Comprehensive Services Assistant Managers, Clerks, Site Supervisors, and Site-Based Clerks:



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- Identify food allergy/intolerance or need for special diet if any.
- Immediately give parent a “Medical Statement to Request Special Meals and/or Accommodations” (CSB401). This form is to be used only for food allergies and/or intolerances, and is not complete without the designated healthcare provider’s signature.
  - Use "Request for Special Meals Due to Cultural, Religious, and/or Personal Beliefs" form for non-medical special diets (CSB403). This form is not to be used for personal food preferences.
  - Submit completed forms to Nutrition Office two business days prior to child’s first day. Original to be kept in child’s file, with a copy sent to Nutrition Office.
  - All parties will communicate directly with others involved to keep them informed
- 3. Schedule family meeting before child starts in the program if food allergy is life-threatening or if several different food items are restricted so that meal pattern becomes unbalanced.

Site Supervisor or assigned staff must:

- Check latest meal modification to confirm accuracy.
- Post meal modification weekly in each centers kitchen and classrooms, with names covered for privacy.
- Review meal modifications and address any questions to the Nutrition Office.
- Immediately inform the Nutrition Office when children who need meals modified have left the program or have moved to another classroom.

Teaching staff must:

- Check latest meal modification daily to confirm accurate food preparation and delivery.

Comprehensive Services Assistant Manager must:

- Write family meeting case notes in CLOUDS so that all relevant parties will be informed.

Nutrition Clerk is responsible for:

- Adding and maintaining each center’s records of children in the Food Allergy or Food Restriction List.
- Forwarding copy of list to center.
- Updating list as information is received from Site Supervisor or Comprehensive Services for children who are enrolled or dropped from program.
- Updating and keeping Meal Modifications on file.
- Sends out weekly Meal Modifications to centers.

The Nutrition Manager is responsible for making any food modifications/substitutions.

When a recommended food item is not available:

- The Nutrition Manager will be immediately notified by FS Worker III, Food Operations Supervisor, or AD. The Nutrition Manager will provide an alternate food substitute.

- If the Nutrition Manager is not available, the Food Operations Supervisor will check past meal modifications to determine appropriate substitution. The Food Operations Supervisor will inform kitchen staff of change.
- The Food Operations Supervisor will also inform the Nutrition Manager when substitutions have been made.
- If the Food Operations Supervisor is also not available, the Supervising AD will check past meal modifications to determine appropriate substitution. The Supervising AD will then inform kitchen staff of change.
- The Supervising AD will also inform the Food Operations Supervisor and Nutrition Manager when substitutions have been made.
- The Nutrition Office will inform Site Supervisor or assigned staff of food substitutes.
- Kitchen staff is not to make any substitutions without approval from Nutrition Manager, Food Operations Supervisor, or Supervising AD.

#### Heights and Weights:

As part of nutrition screening, heights and weights must be taken regularly by designated staff to determine the nutritional status of each child.

The Child's Teacher is responsible for:

- Taking heights and weights every March and November of all preschool children currently enrolled.
- Following height and weight protocol when filling out Height & Weight Log (CSB430).
- Using Height & Weight Log to monitor and ensure healthy growth of all children.
- Comprehensive Services Clerks are responsible for:
  - Taking heights and weights of all newly enrolled preschool children within their first 30 days of enrollment.
  - Promptly recording heights and weights in CLOUDS from the Height & Weight Log completed by the teachers.
  - Returning Height & Weight Log to Site Supervisors for grantee and Site Directors for the partners.
  - Plotting Early Head Start length-for-age, weight-for-age, and head circumference-for-age on growth chart whenever information is available on well baby exam based on periodicity schedule.

### C. Child Adult Care Food Program (CACFP)

#### 1. General Description

To ensure our participation in the USDA Child Nutrition Program, the following must be accomplished by assigned staff:

- The Food Operations Supervisor (or designee) will be a second eye in checking to ensure accuracy after receiving original enrollment rosters from site supervisor (or designee).

The Nutrition Clerk or designee is responsible for:

- Verifying in CLOUDS that the current enrollment rosters are correct. The clerk will send the enrollment roster to site supervisors for verification.

The Site Supervisor or designee is responsible for ensuring enrollment totals are correctly calculated and entered into the claim for reimbursement:

- Completing CACFP form (s) before child attends school, or upon enrollment.
- Completing CACFP enrollment document.
- Filling in days and hours child attends and types of meals served to child while in attendance.
- Ensuring enrollment document is signed and dated by the parent.
- Parent's completion of Meal Benefit form for child(ren) being enrolled, and for signing Meal Benefit form.
- Determining eligibility using current eligibility guidelines.
- Collecting enrollment document and meal benefit form from July 1st to October 31st.
- Sending CACFP form (s) and CACFP enrollment document to the Nutrition Office.
- Checking the enrollment roster to make sure the correct entry of names and numbers of children are on the list, i.e., the names and numbers of the children currently enrolled has been certified.
  - Sending checked enrollment roster to the Nutrition Clerk by the expected due date.
- Completing Enrollment Eligibility Roster each month, which includes:
  - Listing new children for the current month.
  - Determining whether child is free, reduced or base.
  - Marking whether child is in Head Start.
  - Listing child's certification date.
  - Listing children who have dropped for the current month and the drop dates.
  - Sending monthly Enrollment Eligibility Roster to Nutrition Office by the 5th of each month.

## **2. Nondiscrimination in Child Adult Care Food Program Services**

Community Services Bureau Head Start will comply with Title VI and Title VII of the Civil Rights Act of 1964. Title XI of the Educational Amendments of 1972, Title II of the Americans with Disabilities Act of 1990 and Section 504 of the Rehabilitation Act of 1973.

Each center will prominently display the And Justice for All poster. Staff will receive annual training on Civil Rights requirements and on handling Civil Rights Complaints. Nutrition Office will monitor and oversee training.

The most current version of the nondiscrimination statement will be used on all CSB forms of communication made available to the public regarding program availability, except for menus. The appropriate nondiscrimination statement is to be used and it must be prominently displayed on the document and be the same text size.

The short statement “This institution is an equal opportunity provider.” can be used on flyers, posters, or documents that are one page by nature, in a font size no smaller than the text size.

#### **D. Child Adult Care Food Program (CACFP) Monitoring**

To ensure compliance and meet CACFP requirements, all grantee sites must be monitored three times a year.

Nutrition Manager's responsibility:

- Unannounced monitoring of mealtimes.
- Conducting CACFP Facility Reviews at each center three times per academic year.
- Using CACFP Centers Facility Review form (see Form CSB440).
- Reporting findings to Site Supervisor or designee immediately after monitoring.
- Sending findings to the Assistant Directors.
- Filing CACFP Center Monitoring Review Report form at Nutrition Office.
- Following up to confirm completion of corrective action within 60 days of findings.
- Completing CACFP 5-day reconciliation to ensure accuracy of meal claims by each site.

Site Supervisors responsibility:

- Implementing corrective actions and/or responding to monitoring report within 2 weeks.
- Sending the Nutrition Manger documentation of the corrective action plan and date of completion, e.g. Individual/Small Group Conference form or agenda and sign-in sheet for verification of corrective action completion.
- Writing corrective action plan based on recent findings.

### **Sub Part III. Child Health and Safety**

#### **A. Daily Health Inspection**

The teacher is mandated by Community Care Licensing to perform a daily health check of each child. The daily health check is performed when greeting the child and parent as they arrive. Parents are requested to remain present while the teacher performs this assessment. The Daily Health Inspection is a head-to-toe check of emotional and physical well-being. This is an effective tool to develop a baseline of what is normal for each child. This exercise helps the teaching staff reduce the spread of illness and establish rapport with the child and parent each day. It is important that this health check be conducted in the form of a greeting and that no invasive inspection, such as lifting clothing, or discussing findings out loud in front of others, should take place. For preschool classrooms, teaching staff will complete in CLOUDS use the Daily Health Check log (CSB230) to document completion of the Health Check for each child in attendance. For infants, the daily health inspection includes a diaper change and is documented on the Daily Communication Form (CSB155). Teachers must also observe the child throughout the day.

To complete a daily health inspection, the teacher will do the following:

1. Listen: Greet the child and parent.

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- Ask child the following question: “How are you today?”
  - Ask parent the following questions: “How’s (name of child)?”
2. “Was there anything different last night?”
  3. “How did he/she sleep?”
  4. Listen to what the child and parent tell you about how the child is feeling. If the child can talk, is he/she complaining of anything? Is he/she hoarse or wheezing?
  5. Look: Get down to the child’s level so you can see him/her clearly. Observe signs of health or illness:
    - General appearance (e.g., comfort, mood, behavior, and activity level)
    - Is the child’s behavior unusual for this time of day?
    - Is the child clinging to the parent, acting cranky, crying, or fussing?
    - Does he/she appear listless, in pain, or have difficulty moving?
    - Is the child coughing, breathing fast, or having difficulty breathing?
    - Does the child look pale or flushed?
    - Do you see a rash, sores, swelling, or bruising?
    - Is the child scratching his/her skin or scalp?
    - Do the child’s eyes look red, crusty, goopy, or watery?
    - Is there a runny nose?
    - Is he/she pulling at his ears?
    - Are there mouth sores, excessive drooling, or difficulty swallowing?
  6. Feel: Gently run the back of your hand over the child’s cheek, forehead, or neck.
    - Does the child feel unusually warm, or cold and clammy?
    - Does the skin feel bumpy?
  7. Smell: Be aware of unusual odors.
    - Does the child’s breath smell foul or fruity?
    - Is there an unusual or foul smell to the child’s stools?
    - Pay particular attention to a child who has been absent or exposed to contagious disease.

After doing the health check, teacher must now use findings to determine if the child looks healthy or sick. Use this chart to identify signs of health and illness:

	Looking Healthy	Looking Sick
General Appearance	Comfortable Cheerful, responsive Active, playing Behavior appropriate for child and time of day	Excessive crying, clinginess, fussiness Doubled over in pain, unable to move Listless, lethargic, unresponsive No appetite Vomiting, diarrhea

Breathing	Breathing slowly Relaxed Quiet	Breathing fast Difficulty breathing Sucking in around ribs Flaring nostrils Persistent Cough Wheezing
Skin	Normal skin color and texture for child Normal skin temperature No rashes, sores, swelling, or bruising No scratching at skin or scalp	Pale, grayish, flushed, yellowish Hot or cold and clammy skin Skin rash, sores, swelling or bruising Scratching at skin or scalp Skin doesn't spring back when pinched
Eyes, nose, ears, and mouth	Eyes bright and clear Nose clean Ears clean Mouth without sores, swallowing comfortably	Eyes swollen, red, crusty, goopy, watery, yellowish, or sunken Nose congested or runny Ears draining pus or blood Pulling at ears Mouth or lips with sores, excessive drooling, difficulty swallowing
Odors	No odor or normal odor for child	Breath smells foul or fruity Stool smells foul

## B. Hand Washing

Hand washing is the single most important routine in disease prevention. Both children and staff are required to wash hands upon arriving to work or school, before eating, before/after preparing or serving food, and after outdoor play, after wiping noses or using the bathroom, after handling animals/pets, before and after medication administration, and before and after gloving.

All adults and children in the classroom should follow the procedures for proper hand washing:

- Use soap and running water
- Scrub hands vigorously for at least 20 seconds
- Wash all surfaces, including:
  - Backs of hands
  - Wrists
  - Between fingers
  - Under fingernails
  - Under and around rings

- Rinse well
- Dry hands with a paper towel
- Turn off water using paper towel instead of bare hands

### C. Infection Control in the Classroom

In addition to Standard Precautions, the following measures are recommended for infection control in the classroom. It is the teacher's responsibility to insure that simple routine practices which reduce disease risks in the group setting are implemented in the classroom. These practices include:

- Hand washing
- General environmental sanitation
- Sanitary food service
- Good personal hygiene
- Careful diapering procedures
- Prompt exclusion of children and adults who have signs and symptoms of communicable disease
- Placement of cribs at least 3 feet apart and cots at least 18" apart

#### 1. Hygiene – Standard Precautions

##### i. Training

All teachers, site supervisors, managers and food service staff will be trained annually on food sanitation and safety. At least one employee in the Central Kitchen must be trained and must hold a current Food Safety Manager certificate.

##### ii. Tuberculosis (TB) Tests/SB 792 Immunization Requirements

Licensing requires that proof of a negative TB test or chest x-ray of staff and volunteers (except student volunteers under the age of 18) must be kept in the center Licensing Folder. Resources for obtaining a TB test are available for parents and other volunteers in need. All teachers and volunteers supervising children must comply with immunization requirements of SB 792. Volunteer immunization records will be kept in the Volunteer Binder on site. Please refer to the Volunteer Policy under Human Resources of the Policies and Procedures for more information on CSB Volunteer Policy.

##### iii. Standard Precautions

Precautions should be used at all times to protect staff and volunteers from the risk of being exposed to blood, fecal material, vomit, urine, or other potentially infectious materials.

CSB Standard Precautions procedures apply to all program staff and volunteers maximize worker protection from the spread of communicable disease resulting from occupational exposures to blood or other potentially infectious materials. Staff will take the same precautions (hand washing, use of gloves, disinfecting, and other safety measures) when dealing with the blood or body fluids of all children and adults, whether or not they appear sick.

CSB supplies Blood Borne Pathogen Kits in each classroom to ensure staff has access to appropriate

standard precaution personal protective equipment including gloves, aprons, mouthpieces for CPR, etc. Blood Borne Pathogen Kits can be located in the classroom by Bloodborne Pathogen Kit signage and will be replaced immediately after a single use. The program will ensure that all program staff receives training in the use of this equipment.

CSB trains staff in standard precautions through annual trainings and as a function of the American Red Cross First Aid certification course. American Red Cross First Aid re-certification is required every two years.

Anyone who has questions regarding the appropriate use of this protective equipment should call the Comprehensive Services Health Manager. If personal protective equipment becomes damaged or lost, ask for a replacement immediately.

## **2. Diapering and Toileting Procedure**

### **i. Description**

Since diapering and toileting are every day procedures for staff, and are a way that infectious diseases can be spread, it is extremely important that proper techniques be used at all times. It should also be noted that no child may be denied the opportunity to participate in any program on the basis of toilet training. The program does not make successful toilet training a condition of enrollment.

The center staff must ensure that there are sufficient changes of clothing and diapers. Each child's clothing and/or diapers must be changed as often as necessary to ensure that the child is clean and dry at all times.

### **ii. Diapering**

Proper Diapering Procedure

- Get organized. Assemble supplies in the changing area within reach, (disposable diaper, wipes, gloves, non-absorbent paper liner, clean clothing and plastic bag if needed). Cover the entire changing surface or table with paper. Wash hands thoroughly with soap and warm running water.
- Place child on paper covered changing surface or table. Never leave child unattended during diapering processes.
- Remove child's clothing and put soiled clothing aside. Put on gloves using posted procedure.
- Unfasten diaper and leave soiled diaper under child. Lift the child's legs and use disposable wipes to clean skin creases, genitalia, and bottom. Thoroughly as needed, wipe front to back using a clean wipe each time. Place used wipes in dirty diaper.
- Remove soiled diaper. Fold diaper inward and place in covered, hands-free, plastic-lined container. Fold back paper liner if a clean surface is needed. Remove gloves.
- Clean your hands with a disposable wipe and then clean the child's hands with another fresh wipe.
- Put clean diaper on child. (Put ointment provided by parents following CSB Policies and Procedures for over-the-counter medication.)
- Dress the child. Change the child's clothing if wet or soiled.



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- Wash the child's hands with soap and water. Put child safely in supervised area.
- Clean and sanitize the changing surface or table. Throw away the paper liner in covered, hands-free, plastic lined container. Clean any visible soil with detergent and water. Wet the entire changing surface with sanitizing solution.
- Wash your hands with soap and water.

**iii. Toileting**

The following procedure should be followed when toileting a child:

- Have all materials at hand before starting procedures.
- Never leave a child unattended; visual supervision is required.
- Have child sit on potty, but never longer than 5 minutes.
- After child has finished, teach child how to wipe self from front to back.
- Before child leaves bathroom, the child is to wash hands properly.
- Staff member washes hands when done.

**D. Napping Policy**

To promote safe sleep practices and reduce the risk of Sudden Infant Death Syndrome (SIDS):

- Infants, unless otherwise ordered by the physician, are placed on their backs to sleep on a firm surface manufactured for sale as infant sleeping equipment that meets the standards of the United States Consumers Product Safety Commission.
- Pillows, quilts, comforters, sheepskins, stuffed toys, and other soft items are not allowed in cribs or rest equipment.
- Blankets are not used in cribs or with sleeping babies however Sleep Sacks are available as needed to ensure appropriate temperature for sleeping babies.
- The infants head must remain uncovered during sleep.
- After being placed down for sleep on their backs, infants may then be allowed to assume any comfortable sleep position when they can easily turn themselves from the back position.

**E. Dental Hygiene**

All children with teeth shall brush or have their teeth brushed with fluoride toothpaste once a day during the hours the child is in care. If possible, for full day and family child care programs, children will brush their teeth after lunch, part day morning program children will brush their teeth after breakfast and part day afternoon program children will brush their teeth after lunch.

Size appropriate toothbrushes, tenders and fluoride toothpaste will be obtained through the health supply ordering process and will be use as follows:

Children age three and older - Once daily and in conjunction with a meal as noted above, staff should either brush the child's teeth (for those lacking the motor skills to brush themselves) or supervise as the child brushes his/her own teeth. Fluoride toothpaste, not larger than the size of a pea should be placed on a disposable cup for each child.

Children under three years old - Once daily and in conjunction with a meal as noted above, staff should either brush the child's teeth (for those lacking the motor skills to brush themselves) or supervise as the child brushes his/her own teeth. Fluoride toothpaste, the size of a grain of rice should be placed on a disposable cup for each child.

All children without teeth shall have their gums wiped with a moist cloth or a product called "Tenders" (a soft, single finger swab ordered and provided by the Health Content Area Manager) to remove any remaining food/liquid that coats the teeth and gums at least once a day and after a feeding. By doing this, caregivers are breaking up plaque in order to create a much healthier environment for the teeth that will be coming in later.

Follow these steps when caring for infants without teeth:

- Wash hands thoroughly and slip "Tenders" onto your index finger
- Moisten slightly with cool water. Do not use toothpaste
- Carefully swab infant's gums using a gentle circular motion
- Place used "Tender" in garment bag to be washed prior to next use

#### F. Health Issues in the Classroom

- Call your assigned Site Supervisor when a health concern is identified. It is crucial to provide appropriate intervention or resolution. Any unusual behavior, any injury or any signs of illness requiring assessment and/or administration of first aid by staff must be reported to the parent and documented in the child's confidential file.
- Health issues include, but are not limited to rash, high fever, head lice, signs of conjunctivitis ("pink eye"), diarrhea, intestinal problems, vomiting and nutritional problems.

The Site Supervisor, Comprehensive Services Staff or Health Manager must follow up with the parent and medical provider(s) to confirm any diagnosis given by the parent or family member. The information will be evaluated, and a decision made as to whether the child can attend school at that time. The Site Supervisor and the teaching staff will be kept abreast of the health considerations that impact this decision.

#### G. Child Safety and Supervision

Visiting/socializing on the playground or the premises of a child care facility while on duty is prohibited. Visiting/socializing with fellow employees, who are still on duty regarding non-classroom activities, during break times, is not allowed. All visitors, former employees and relatives must report and sign in at the main office of each center before entering program areas. Information on the nature of the visit will be required.

Children must be visually supervised at all times indoor and outdoor, including while toileting and napping. Essential practices indoors and outdoors include, but are not limited to, active supervision, "zoning" and strong team communication.

##### 1. Playground safety and supervision

Yard staffing must support visual supervision at all times. Staff must “sweep” the yard by walking and visually scanning all areas before leaving.

## **2. Morning outdoor time and field trips**

Whenever the classroom is outside on the yard in the morning or on a field trip, all members of the teaching team must be present to ensure the health and safety of children. No scheduled prep time or breaks are permitted during field trips or morning outside time.

## **3. Afternoon outdoor time**

During the afternoon outdoor time, staffing must meet required teacher-child ratios, and the Lead Teacher must accompany the class and other staff in transitioning the children to and from the yard. If a low ratio allows only one staff person on the yard, that person must be at least an Associate Teacher level staff. Scheduled outdoor time must be approved by Site Supervisor with consideration of approved prep-time and break schedule.

## **4. Preschool outdoor safety**

- No more than two (2) preschool classrooms shall be outside on the playground at any time.
- This policy may be waived with written approval from the Assistant Director. If approval is granted, a written plan must be developed by the Site Supervisor and approved by the Assistant Director outlining additional safety measures that will be established, including but not limited to safe transitions and staff knowing all children on the yard.

## **5. Infant and toddler outdoor safety**

- Infant and Toddler classrooms shall have no more than eight (8) children present for any activity, including outdoor time.

## **6. Semi-Annual Child Safety Check**

Semi-annually, during the first month of the Program Year (when all programs are in session) and in March, each Site Supervisor will complete and submit to their Assistant Director the Semi-Annual Child Safety Checklist (CSB form 751). This checklist will be used to confirm that the following has occurred as required:

- Annual review of Ready To Learn Curriculum safety considerations;
- Annual review of Pedestrian Safety Training for parents and children;
- Semi-annual review of outdoor schedule against staff breaks and prep time and against peak pick-up/drop-off times to ensure no overlap in the morning and limited overlap in the afternoon;
- Semi-annual review of schedule and plan of class consolidations in early morning and late afternoon;
- Semi-annual meeting with staff to review child safety, visual supervision, staff placement , and

- safe transitions;
- Semi-annual completion of Transition Observation Checklist (CSB form 750) in each classroom;
- Semi-annual review of center documentation that all volunteers and substitutes have received an on-site orientation and have reviewed *CSB Substitute and Volunteer Handbook* with a signed *Handbook* receipt on file at the center;
- Semi-annual meeting with front desk/lobby/entrance/exit staff to review procedures to ensure Child Safety at all times; and
- Semi-annual meeting with parents to review Child Safety procedures, facility security, and handout *Parent Guidance for Keeping Children Safe*.

## H. Child Illness Procedures

### 1. Admission and Exclusion

The decision to admit or exclude a child with an illness is the responsibility of the Site Supervisor and will be based on whether there are adequate facilities and staff able to care for the ill child and the other children in the group. The Site Supervisor, not the child's family, makes the final determination about whether the ill child can receive care in the childcare program. Children will be excluded if:

- The child's illness prevents the child from participating in activities that the facility routinely offers for well children or mildly ill children.
- The illness requires more care than the childcare staff is able to provide without compromising the needs of that particular child or of the other children in the group.
- Keeping the child in care poses an increased risk to the child or other children or adults with whom the child will come in contact.
- The childcare staff is uncertain about whether the child's illness poses an increased risk to others. The child will be excluded until a physician or nurse practitioner notifies the child care program that the child may attend. A child whose illness does not meet any of these conditions listed above does not need to be excluded.

### 2. Admission and Permitted Attendance

Specific conditions that do not require exclusion are:

- Children who are carriers of an infectious disease agent in their bowel movement or urine that can cause illness, but who have no symptoms of illness themselves.
- Children with conjunctivitis (pink eye) who have a clear, watery eye discharge and do not have any fever, eye pain, or eyelid redness.
- Children with a rash, but no fever or change in behavior.
- Children with cytomegalovirus infection, HIV or carriers of hepatitis B.

### 3. Procedure for Management of Short-Term Illness

The behavior and health of each child must be continually observed during the course of the day, and should a child become ill, the following steps must be taken:

- The ill infant, toddler or child must be isolated on a cot/crib in an area, which is easily supervised

and away from the kitchen, bathroom and any other area used by the other children. Infants, toddlers and children in isolation must be under constant visual observation by designated staff.

- Children ill enough to require isolation may not use the same toilets as other children. One toilet and sink must be designated exclusively for the ill child's use. The other children must be prevented from using that toilet and sink until the sick child has been picked up, and those facilities have been thoroughly disinfected.
- The Site Supervisor or designee will call the parent or other emergency numbers to arrange to have the child picked up. If no one can be contacted, the child must remain on the cot/mat under close supervision and staff will continue to try to reach the parents or emergency numbers.
- If the child's condition worsens and becomes life threatening, the teaching staff must call 911. Notification of parents must be noted in the child's file. The Assistant Director must be notified immediately.

#### **4. Short-Term Exclusion and Admittance**

As the program is not set up to care for ill children, staff and parents should use the following three criteria to exclude children with short-term illnesses from the group care setting:

- The child does not feel well enough to participate comfortably in the usual activities of the program.
- The staff cannot care for the sick child without interfering with the care of the other children.
- The child has any of the following that indicate a contagious disease or an immediate need for medical evaluation:
  - Fever and behavior changes or other signs or symptoms, until the child's inclusion is checked with a health professional who determines that the child may be in child care.
  - Signs or symptoms of a possible serious condition, such as those defined below under "Conditions that Require Immediate Medical Attention", until the child is checked by a health professional who determines that the child may be in child care.

An ill child may only be excluded for the period of time when he or she poses a significant risk to the health and safety of anyone in contact with the child and until the child meets the criteria for re-admission.

#### **5. Conditions that Require Immediate Medical Attention**

Get help immediately for a child with any of the following conditions:

- Specific fevers:
  - A baby less than 4 months of age has a temperature of 101° F rectally or 100° F axillaries (armpit).
  - A temperature of 105° F or higher in a child of any age.
- For infants under 4 months, forceful vomiting more than once.
- Looking or acting very ill or getting worse quickly.
- Neck pain when the child's head is moved or touched.

- A stiff neck or severe headache and looking very sick.
- A seizure for the first time.
- Acting unusually confused.
- Unequal pupils (black centers of the eyes).
- A blood-red or purple rash made up of pinhead sized spots or bruises that are not associated with injury.
- A rash of hives or welts that appears and spreads quickly.
- Breathing so fast or so hard that the child cannot play, talk, cry, or drink.
- A severe stomachache without vomiting or diarrhea after a recent injury, blow to the abdomen, or hard fall.
- Stools that are black or have blood mixed in them.
- Not urinating at least once in 8 hours, a dry mouth, no tears, or sunken eyes.
- Continuous clear drainage from the nose after a hard blow to the head.

### I. Return to School After Illness

Children who have been excluded from the classroom should not return until:

- A physician has certified that the symptoms are not associated with an infectious agent or the child's symptoms do not threaten the health of other children.
- The child has received treatment following a head lice infestation.
- The child has an axillary or oral temperature of less than 100°F, and does not have symptoms such as:
  - Sore throat
  - Vomiting
  - Diarrhea
  - Headache and stiff neck
  - Undiagnosed rash
- The child has no respiratory problems, such as:
  - Difficult/rapid breathing, severe coughing or a high-pitched croup or whooping sound while coughing.
  - Inability to lie down comfortably, due to continuous coughing.
- No Diarrhea (an increased number of abnormally loose stools in the previous 24 hours), observe the child for other symptoms such as fever, abdominal pain, or vomiting.
- No Vomiting (two or more episodes of vomiting within the previous 24 hours).
- No Eye/Nose Drainage (thick green or yellow mucous from the eye or nose).
- No Sore Throat, especially with fever or swollen glands in the neck.
- No Skin Rash (undiagnosed or contagious), infected sores; sores with crusty, yellow, or green drainage which cannot be covered by clothing or bandages.
- No Persistent Itching (or scratching) of body or scalp.

## J. Medical Alerts

Medical Alerts need to be posted by the teacher after the Site Supervisor has investigated and determined that there was exposure to a communicable disease.

In some cases, the teaching staff may be notified by the parent regarding a confirmed diagnosis (i.e., a child with Chickenpox). In this event, the Medical Alert may be posted immediately. The Site Supervisor, Comprehensive Services Team member, and Health Manager must still be notified about the illness.

After two weeks, the Medical Alert must be taken down from the classroom where it has been posted. (CSB221 to CSB238.)

## K. Children Injured at the Center

### 1. Professional Medical Treatment

- All head injuries require an immediate call to the parent. Parents can make the determination to pick up their child or not based on the staff report and advice as to the seriousness of the injury. The Injury / Incident Report (CSB245) must be completed.
- In the event that medical treatment is required, the center staff will instruct the parent to take their child to the doctor. If the parent cannot be contacted and a child needs to be transported by ambulance to the hospital, the teacher will accompany the child. The teacher will notify the Site Supervisor if a child needs professional medical treatment.
- The parents will be responsible for any medical expenses incurred. If the parent feels that it is the responsibility of the program to pay for these expenses, they must file a claim against the program. Contact the Health Manager for details regarding submission of claims.

### 2. Student Injury / Incident Report

- Whenever a member of the center staff uses first aid or informs a parent that a child has been hurt, the Site Supervisor or Teacher will call the Assistant Director to report the incident. If necessary, immediate arrangements for obtaining medical treatment will be made.
- The teacher is required to complete an Injury / Incident Report (CSB245). This report is also used for minor injuries such as scrapes or small cuts that require minor first aid. A copy of completed form is to be shared with the parent on the same day as the injury/incident occurred and the original is kept on site.
- If the incident involves more than 1 child, a report must be done for each child. The information as to who was involved is written and kept confidential, but not given in the report the parents receive. To maintain confidentiality, the names of other children involved in the incident should not be written on the Injury / Incident Report (CSB245).
- Depending on the nature of the injury / incident, Site Supervisor may need to follow-up with the appropriate CSM (Education, Health & Nutrition, Mental Health/Disability) and/or Business Systems Unit after the injury/incident occurred.
- The Assistant Director should be notified immediately of all injuries/incidents. If the Assistant Director notices that an elevated amount of incidents are occurring, he/she should call the Site

Supervisor/Teacher to discuss the situation and develop a plan/solution to prevent further incidents.

- Site Supervisors must maintain a Site Injury/Incident Log for each injury / incident at all times.

## L. Blood Protocol

### 1. Description

This protocol is used to prevent the remote and unlikely possibility of the spread of blood and blood diseases in the school setting and applies to all site personnel who have direct contact with children and custodial personnel as necessary. Bloodborne Pathogen Training is provided annually.

### 2. General Information

- The so-called blood-to-blood diseases (AIDS, Hepatitis B, etc.) are spread by an organism's travel from the blood of an infected person to the blood of a non-infected person.
- Blood and semen are the only body fluids that have been demonstrated to be capable of transmitting AIDS (Acquired Immune Deficiency Syndrome).

### 3. Supplies needed

- Blood Borne Pathogen Kits are available in each classroom with signage to designate storage location and to ensure staff has access to appropriate standard precaution personal protective equipment including gloves, aprons, mouthpieces for CPR, plastic bags, etc. Blood Borne Pathogen Kits will be replaced immediately after a single use. Additional gloves, CPR mouthpieces, etc., are located in the First Aid Kits in classrooms and in the office.

### 4. Procedure

Wash hands and put on gloves when having any contact with blood or bodily fluids. Use gloves one time and only on one student.

- After completing the necessary task, remove gloves by grasping the cuff and then stripping it off by turning it inside out. Be careful not to touch the contaminated surfaces of the gloves.
- Dispose of glove in a disposable plastic bag. See "Disposal of Blood/Body Fluid" below.
- Wash hands after de-gloving. This is necessary because bacteria multiply rapidly inside a glove.
- Fill out Injury/Incident Report (CSB245) as applicable.

### 5. Disposal of Blood / Body Fluid

- Put all blood/body fluid disposals in clearly marked garbage containers. Examples: soiled wet diapers, used gloves, wipes, vomit, blood products, and all other contaminated materials/supplies.
- Close the bag and tie it, then double bag, and dispose of it in a separate container marked for such disposals. Make sure this container is not used for trash, and that is out of children's reach and can be easily moved around.
- Be safe - always wear gloves. Questions should be directed to the Health Manager.



## M. Medication Administration

In compliance with Community Care Licensing, Community Services Bureau sites maintain an Incidental Medical Service Plan of Operation. CSB supports and provides incidental medical services to children with all medical conditions per CCL regulations including, but not limited to, the administration of medical services for asthma, allergic reactions, and G-tubes.

### 1. Administering Medication

Because the administration of medication poses an extra burden for staff, and having medication in the facility is a safety hazard, families must check with the child's physician to see if a dose schedule can be arranged that does not involve the hours the child is in the child care facility. Whenever possible, the first dose of medication should be given at home to see if the child has any type of reaction. Parents may administer medication to their own child during the child care day.

### 2. Procedure

Staff, designated by the Site Supervisor, will administer medication only if the parent has provided written consent, the unexpired medication is in an appropriately labeled and stored container, and the facility has on file the written instructions of a licensed physician to administer the specific medication as needed and the appropriate forms/care plans such as CSB280, CSB282, CSB219, CSB219A, and the CSB213 have been completed.

For prescription medications, parents will provide caregivers with the medication in the original, child-resistant container that is labeled by a pharmacist with the child's name, the name of the medication, the date the prescription was filled; the name of the health care provider who wrote the prescription; the medication's expiration date; the administration, storage and disposal instructions. Instructions for the dose, frequency, method to be used, and duration of administration will be provided to the child care staff on the prescription label and on CSB forms by a licensed physician or other person legally authorized to prescribe medications.

Over-the-counter medications are treated in the same manner as prescription medications. For administration of over-the-counter (non-prescription) medications, (including diaper cream and sunscreen) parents will provide the unexpired medication in an original child-resistant container that is labeled with the child's first and last names and instructions for storage supplied by the manufacturer. Over-the-counter medications shall be administered only if the facility has on file the written orders (ex: CSB280 and CSB282.) from a physician including the signature or stamp of the physician or other person legally authorized to prescribe medications and in accordance with the instructions of the physician for the dose, frequency, method to be used and duration of administration.

A physician may state that a certain medication may be given for a recurring problem, emergency situation, or chronic condition. The instructions should include the child's name, the name of the medication, the dose of the medication, how often the medication may be given, the conditions for use, and any precautions to follow. Example: children may use sunscreen to prevent sunburn; children who wheeze with vigorous exercise may take one dose of asthma medicine before vigorous activity (large muscle) play; children who weigh between 25-35 pounds may be given 1 teaspoon of acetaminophen for up to two doses every four hours for fever. A child with a known serious allergic reaction to a specific substance who develops symptoms after exposure to that substance may receive epinephrine from a

staff member who has received training in how to use an auto-injection device prescribed for that child (e.g., EpiPen®). A child may only receive medication with the permission of the child's parent and when the staff person who will give the medication has the skills required. All documentation regarding a child's medication and its administration shall be kept in the child's confidential file.

Prescription and over-the-counter medications cannot be administered without the appropriate documents in the child's confidential file.

### **3. Storage**

- Medications will be kept at the temperature recommended for that type of medication in a locked container that is inaccessible to children, separate from any other hazardous material storage. An example of an acceptable location is at the back of a locked file cabinet that is not used to store any other hazardous products or materials. Medications that do not require refrigeration, such as inhalers for asthma, should not be placed in the refrigerator. This can damage them and render them ineffective.
- Medications that require refrigeration must be stored in the designated locked refrigerator medication boxes supplied to each center.
- EpiPen Auto-injectors must be stored in a designated EpiPen box and should be out of reach of children in an easy and quick to access area with EpiPen signage posted. EpiPens should not be stored in extreme heat or cold and should be protected from light.
- When the child no longer needs the medication or the child drops from the center, the medication must be returned to the parent or disposed of if the parent cannot be reached.
- Medication will not be used beyond the date of expiration on the container or beyond any expiration of the instructions provided by the physician or other person legally permitted to prescribe medication. Instructions which state that the medication may be used whenever needed will be renewed by the physician at least annually.

### **4. Medication Log Documentation**

A medication log will be maintained by the classroom staff to record the instructions for giving the medication, consent obtained from the parent, name of medication, dose, date, and time of administration, and the signature of the person who administered each dose of medication. Spills, reactions, and refusal to take medication will be noted on this log. All records of any changes in the child's behavior, as documented on the Medication Log, will be communicated to the parent. Parents will be assisted in communicating these incidences to the physician as necessary. (CSB213-Medication Form) Parents will be informed as to when authorized medications have been given via this log.

### **5. Asthma Protocol**

Asthma is a common health condition and one that typically requires medication. Teachers will receive training regarding asthma, its symptoms, and treatment procedures and the following protocol will assist the teaching staff:

- The Comprehensive Services Assistant Manager, upon review of the child's Health History form, will contact both the parent and medical provider(s) to clarify the current status of the asthma

condition. It is the responsibility of the Comprehensive Services team to obtain confirmation of the diagnosis and any current treatment using the Asthma Action Plan (See Form CSB219).

- Subsequent to the initial health review by the Site Supervisor and Comprehensive Services team, if the teacher becomes aware of a possible asthma condition, previously unknown to staff, she must call the Comprehensive Services team assigned to the classroom. The Comprehensive Services team will then follow the procedures described above.
- Once all relevant information is obtained, a meeting will be held with the Comprehensive Services team, Site Supervisor, parent, and teacher to ensure teaching staff have the training to carry out the action plan for the child and to review the following:
  - Asthma Action Plan from the doctor.
  - Medication form (See Form CSB213) completed by parent.
  - Inhaled Medication – Nebulizer Consent forms (See Form CSB219a) completed by the parent for each teacher/staff administering the medication.
- Copies of the Asthma Action Plan will be kept by the center staff, parent, with the medication and in the child's main file. If the plan indicates medication is used routinely or "as needed," CSB must have medication on site before the child can attend class.
- Until complete physician's instructions are provided, medications to treat asthma symptoms will be given according to the prescription labels. Medication will be dispensed outside of center hours whenever possible.
- When asthma symptoms occur during center hours, the teaching staff will call the parent to alert them about the child's condition. The child will be sent home if the asthma symptoms interfere with the child's ability to fully participate in the program. In the event that the parent cannot be contacted, the teaching staff will call 911 (if the asthma appears life threatening).

#### **6. Training of Caregivers to Administer Medication**

Medication Administration Training is provided annually and any caregiver who administers medications shall be trained to:

- Read and understand the Asthma Action Plan, the Medication Form and the Inhaled Medication- Consent Form;
- Check that the name of the child on the medication and the child receiving the medication are the same;
- Read and understand the label/prescription directions in relation to the measured dose, frequency, and other circumstances relative to administration (such as in relation to meals);
- Administer the medication (including inhalers and EpiPens) according to the prescribed methods and the prescribed dose;
- Observe and report any side effects from medications;
- Document the administration of each dose by the time and the amount given;
- Store and handle medication appropriately;
- Record changes in child's behavior and help parents communicate observations to their provider;
- Demonstrate ability to comply with medication policy.

#### **7. Inhaled Medications**

An Inhaled Medication-Consent Form (See LIC 9166 and Form CSB219A) must be filled out and signed

by the parent before staff administers inhaled medications. A copy of the completed form must be kept in the child's file. A separate form must be filled out for each person (staff member) who administers inhaled medication to the child. This requirement includes all inhaled medications.

### **8. EpiPens**

EpiPen Training is provided annually, and in addition staff is trained through CPR/1st Aid Training and on-line EpiPen training under the direction of the Site Supervisor when a child with an EpiPen is identified onsite.

### **9. Sun Protection Policy**

Sun protection routines in childhood can establish lifelong preventive habits. At CSB, shade is provided at all sites, infants under six months of age are not exposed to direct sunlight, children are encouraged to wear light colored, loose fitting clothing that covers as much skin as possible, parents are encouraged to apply sunscreen to their child's exposed skin as part of their school drop off routine and following the procedure for the over-the-counter medications sunscreen provided by the parent will be applied by teaching staff. Drinking water is available to children during outdoor play.

## **N. Incomplete Health Records**

1. The Site Supervisor and/or Comprehensive Services team will notify parents and teaching staff if a child is to be excluded from the classroom due to incomplete health records.
2. Exclusions due to unmet health requirements: Children must be excluded for immunizations that are not up-to-date or a physical or TB clearance that is not received within 30 days of enrollment. Parents are allowed a onetime extension beyond the 30 day requirement for a physical exam with proof of an appointment on file however this extension does not apply to the TB clearance. Children excluded for unmet health requirements are permitted up to three days of excused absences. After that, a Notice of Action (as applicable) will be issued for termination from the program.
3. Parents will be informed during enrollment and at parent conferences that the health requirements are the following: up-to-date immunizations, physical and dental exams, follow-up and required TB Clearance. Parents will be assisted in identifying and accessing a source of care/insurance coverage and family meeting will take place as needed to make every possible effort to meet the health requirements for the child. If, after these notifications and assistance, the child has not obtained the needed services, the parents will be informed that they need to schedule an appointment that day and notify the Site Supervisor or Comprehensive Services Team of the appointment date and time.
4. When the parent has no phone, contact will be made by the Site Supervisor or Comprehensive Services team through the center. The center staff will be asked to have the parent contact the Site Supervisor or Comprehensive Services team the same day. In all cases, teachers will be notified and asked to reinforce the request made by the Site Supervisor or Comprehensive Services Team regarding health requirements.
5. Children may be excluded from the program for missing or incomplete initial physical exam, incomplete immunizations, and lack of a TB Clearance only.
6. For all other health requirements that are incomplete, the Comprehensive Services Team will

request updated information from the parent with a Health Records Update Form (See Form CSB242). As needed, family meeting will take place with the site staff, Comprehensive Services and parents and a plan will be implemented.

## O. Health and Safety Training for Center Staff and Parents

### 1. Staff

- The Site Supervisor of each center must ensure that each of his/her staff members has current CPR / First Aid Certification in the following: Adult / Child/Infant CPR Training and First Aid Training (good for two years from date of issue). Staff can be sent to training via a request by the Site Supervisor to the Training Coordinator. The Site Supervisor is responsible for maintaining the personnel records of staff at his/her site to ensure that staff is certified in CPR / First Aid at all times. CPR / First Aid certified staff must be available at all times when children are present at the facility, or when children are offsite for facility activities.
- In addition to the CPR / First Aid training, one staff person or Director at each day care center must have at least 15 hours in preventive health practices. This training must include, but is not limited to, pediatric cardiopulmonary resuscitation; pediatric first aid; recognition, management, and prevention of infectious diseases, including immunizations; and prevention of childhood injuries and at least 1 hour of child nutrition education, with content to include age- appropriate meal patterns based on the most current Dietary Guidelines for Americans. The training may include sanitary food handling, child nutrition, emergency preparedness and evacuation, caring for children with disabilities and identification and reporting of signs and symptoms of child abuse. The supervisor makes requests for such training to the Personnel Unit.

### 2. Parents

- Site Supervisors will share the policies for health emergencies that require rapid response on the part of staff or immediate medical attention at the time of completing the Classroom Orientation (CSB112) with parents.
- Through collaboration with parents to promote children's health and well-being, CSB staff provides medical, oral health, nutrition and mental health educational support services. Opportunities for parent education include, but are not limited to: medical and oral health, emergency first aid, environmental hazards, health and safety practices for the home including safe sleep, lead exposure and tobacco use, healthy eating, physical exercise and vehicle/pedestrian safety. In addition, pregnant women and families are provided educational opportunities to learn about pregnancy and postpartum care including breastfeeding, parental mental health, substance abuse, and perinatal depression.

## P. Posting of Documents (Health Emergency Procedures)

CSB conforms to all Federal, State, and local regulations by posting or having on file at each facility: mandated notices, licenses, and permits.

- Site Supervisors and teachers are required to post mandated facility compliance documents on bulletin boards, which are attractive, neat, updated, and highly visible. Signage guidance can be found as follows: CSB Resource Center>Document Library>Comprehensive Services Documents and Training Resources>Signage>Signage Guidance.
- The Site Supervisor is responsible for routinely monitoring bulletin boards and classroom files for compliance with this standard. The Comprehensive Services Managers/Assistant Directors are responsible for monitoring all compliance documents.

## Q. Pet Protocol

- Animals can bring joy to the classroom while offering children the opportunity to be responsible for another living creature.
- When an animal is being considered for inclusion in the classroom, child and staff allergies and fears must be considered. The animal must be tame and classroom staff must agree to accept responsibility for the care of the pet. Assistant Director's approval must be obtained.
- Turtles and other reptiles are not allowed in the classroom because they are potential carriers of salmonella bacteria.
- Before the animal is included in the classroom, children will be instructed on the proper care and handling of the animal and the importance of proper hand washing.
- When the animal arrives in the classroom, the animal must be provided an appropriate habitat and space with opportunities to exercise, appropriate temperature, and all other natural conditions and activities.

A Pet Care Plan must be posted to designate care needed to provide quality care to the animal. The Pet Care Plan will include details specific to that particular pet and will inform staff and parents about the pet, and noting the specifics required to provide quality care to the animal. The Pet Care Plan must include:

- Name of animal
- Description of the animal - example: rat - nocturnal, affectionate and playful pets
- Description of appropriate housing/cage/bedding and recommended cleaning pattern
- Description of food needed to provide a healthy diet including portion size and frequency
- Explanation of exercise needed
- Explanation of proper handling practices
- List of vaccines needed (if any), date when administered and future due dates
- The name and phone number of a veterinarian in case of emergency- Site Supervisors will be contacted for veterinarian visits approval.

A log must be posted for staff to initial and date as animal care and related duties are completed. The log must include:

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- Daily feeding (food and water) schedule
- Daily exercise
- Cage cleaning schedule

Accommodations must be made for:

- Scheduling weekend, holiday, and vacation care
- Maintaining care in the case of an emergency (natural disaster, animal illness, bites, and other similar situations)

Responsibility of the teaching staff:

- Review each child's Health History to identify children with allergies to specific animals.
- Complete the Pet Care Plan.
- Maintain the overall care of the animal.
- Initial the log noting responsibilities completed.
- To report any bites or scratches to the Site Supervisor and complete health documentation as required.

Responsibility of the Site Supervisor:

- Submit a request to the AD for classroom pet approval.
- Oversee the health and well-being of children, staff and animals as they interact in the classroom.
- Report bites or scratches immediately the Comprehensive Services Health Manager and the Assistant Director.

Responsibility of Assistant Director:

- Provide pet approval for a classroom on an individual basis.

### R. Safety / Sanitation Procedures

- Facilities have available first-aid kits readily accessible/clearly marked for emergency use.
- Facilities are equipped with a fire extinguisher securely mounted and readily accessible.
- Employees are trained in the use and type of fire extinguishers available.
- All fire extinguishers are tagged, noting months/years/dates of inspections/annual maintenance, and identified use (class of fire).
- Facility exits are clearly marked with visible, approved EXIT signs. Aisles, hallways, and other exits are kept free of obstacles, including furniture and equipment.
- All materials and surfaces accessible to children, including toys, shall be free of toxic substances.
- All plants must be non-toxic.
- Air fresheners will not be allowed in any space accessible to children and families.
- Baby walkers shall not be used or kept on the premises.
- Playground equipment shall be securely anchored to the ground unless it is portable by design.
- Equipment and furniture shall be maintained in a safe condition, free of sharp, loose or pointed parts.

- Equipment and furniture shall be age and size appropriate so as to allow children present to fully participate in planned activities.
- All items on shelves above three feet tall (plants, sculptures, books, and other items) shall be secured with museum putty, safety latches, barriers, or other similar items to prevent items from falling onto children.
- Open shelves and cabinets over three feet tall shall be free of heavy objects.
- Tall furniture over four feet tall shall be braced to the wall or floor.
- Cots shall be maintained in safe condition and bedding shall not be shared by different children without first laundering the bedding.
- Floor mats are constructed of foam at least  $\frac{3}{4}$  inch thick and covered with vinyl, with no exposed foam. Floor side must be marked so that it can be distinguished from the sleeping side.
- Aisles and trafficked areas are kept free of obstacles and obstructions, with empty food containers promptly removed.
- Cots shall be arranged so that each child has access to a walkway without having to walk on or over the cots or mats of other children.
- Safe stools/ladders are available and used for reaching shelved items.
- Employees are trained in the proper use of equipment that their duties require them to use. Employees who have not been trained in the proper use of equipment may not operate such equipment.
- Employees are required to be attentive to their tasks, especially when cooking or operating moving equipment.
- Smoking is prohibited in all areas.
- All employees must consume food only in designated areas.
- All employees are required to adhere to procedures for kitchen sanitation and the cleaning schedule.
- Firearms and other weapons shall not be allowed on or stored on the premises of a child care center.

## S. Safety Surveillance

### 1. Identification and Correction

The Health and Safety Officer will conduct monthly inspections of the facility for hazards using the Health and Safety Checklist on CLOUDS. The Site Supervisor will review the result of the site inspections and will submit a Track-it request for correcting hazardous conditions identified.

### 2. Escape Hazards

The Site Supervisor will maintain and review with the staff annually a list of potential high-risk locations/situations where a child might escape unnoticed from the group. Staff will use this list to plan increased supervision in these high-risk locations and situations. If such a high-risk escape hazard is identified between annual reviews, staff will take action immediately.

### 3. Evacuation Hazards

The Site Supervisor will be responsible for establishing and updating a checklist of locations to be



assessed during evacuation to assure complete surveillance of the building before and after evacuation is declared complete. The checklist will identify usual and likely-to-be-forgotten locations such as: under a cot, behind a sofa, in a toy bin, in a closet, kitchen, or toilet room.

#### **4. Injury Prevention**

Whenever an injury occurs, a copy of a completed Incident/Accident Report (CSB245) will be filed in an injury log. The injury log will be reviewed every three months by the Site Supervisor or Assistant Director to identify hazards in need of corrective action.

- Staff and volunteers must be able to demonstrate safety procedures. Both staff and volunteers will review safety procedures with the Site Supervisor prior to working in the classroom. Emergency procedures, the Health and Safety Checklist, and playground safety shall be reviewed with each staff person and volunteer before any interaction with children may occur.
- Child and parent activities must include safety awareness for the home and in the program. Videos, brochures, newsletter articles, and parent training will be used to foster safety awareness for the home and in the program.

#### **T. First Aid Kits**

All centers should have a first-aid kit and manual that is easily accessible (location should be marked by “First Aid Kit” signage), available to staff, and out of reach of children. The following items should be in the first-aid kit:

- CPR Mask (inside or outside in conjunction with the first aid kit)
- Disposable, nonporous gloves
- Scissors
- Tweezers
- Thermometer
- Adhesive tape
- Sterile first aid dressings
- Bandages or roller bandages
- Pen/pencil and note pad
- Antiseptic solution
- Cold pack
- First aid manual
- Poison Control number

The Health and Safety Officer, using the Health and Safety Checklist, will inventory the First Aid Kit monthly. Orders for restocking the kits are placed with designated staff. The First Aid Kits are only to be used in an emergency. Everyday health and safety supplies such as Band-Aids, cold packs and gloves are stocked separately in designated locations within each center, inaccessible to children.

## U. Preparing For Emergencies

Each classroom has a disaster preparedness plan in case of fire, earthquake, or other emergency. Children and staff must be prepared to execute the plan in the event of such emergency. Regular drills are an essential element in strong preparation.

### 1. Operations Procedure

- Staff receives training on the disaster preparedness plan from their supervisor during their initial work orientation, and at subsequent staff development training. Such training is filed and documented with training records.
- All CSB centers post evacuation plans and documentation of completing required monthly drills (Disaster Drill Log CSB117) in location visible to families, staff and regulatory agencies.
- Classroom teachers provide an orientation to children on how to respond to an emergency as part of the ongoing curriculum.
- Drills shall be conducted as a whole center as to simulate a real emergency.
- Drills can be planned or unplanned. Periodic unannounced drills coordinated by the Site Supervisor are encouraged.
- Fire and Earthquake drills are held at least once per month, and Shelter-in-Place drills are held on the first Wednesday of each month.
- When a Fire drill takes place and the building is being evacuated, teachers must bring the following items outside with them:
  - Emergency cards
  - Inhalers and Epi-Pens for applicable children
- After each drill:
  - The Site Supervisor or designee shall complete the Disaster Drill Report form CSB116 and maintain documentation of reports at the center.
  - The Site Supervisor or designee documents the drill on the Disaster Drill Log form CSB117. When log is full, logs shall be filed with the Disaster Drill Report forms CSB116 at the center and a new log will be started and be posted.
- The Site Supervisor shall submit a copy of the Disaster Drill Log form CSB117 monthly to the Assistant Director with the monthly report.
- The Assistant Director shall review logs monthly to ensure drills are conducted regularly.
- The Assistant Director shall periodically review the Disaster Drill Report form CSB116 documentation on file at the center.
- The results of the Disaster Drill Reports shall be reviewed at least annually with staff and parents.
- In the event of an actual emergency,
  - When children are moved to another location, medications and related supplies, equipment and documentation for children with health conditions that may require incidental medical services must be transported with the child by the Lead Teacher or designee who is designated to administer the medication.

- Site Supervisor shall ensure s/he has possession of the two-way emergency radio at all times.

Contra Costa County maintains an Office of Emergency Services (OES) Plan, which is activated during major disasters. The functions performed at the OES include gathering and evaluating damage information, determining emergency response priorities, obtaining necessary resources (materials, supplies, equipment, and personnel) and providing information to the news media. Community Services Bureau staff will provide information to the County OES on the status of the department’s staff, buildings and equipment, including vehicles.

A verbal report to Community Care Licensing must be made within 24 hours and a written report must be submitted to the licensing agency within seven days of the occurrence of any of the following events:

- Death of any child from any cause
- Any injury to any child requiring medical attention
- Any unusual incident or child absence which threatens the physical or emotional health or safety of any child
- Any suspected physical or psychological abuse of any child
- Epidemic outbreak
- Poisoning
- Catastrophe
- Fire or explosion occurring in/on the premises

Reports must be made in writing to the funding sources as soon as possible after any of the above.

**2. Emergency Disaster / Earthquake Supplies**

All sites have emergency/disaster supply containers that are easily accessible. The sealed containers hold the following items appropriate to the number of adults, children and infants at the site. The inventory with the expiration date of the contents is listed on the outside of the container.

First Aid Supplies	Food Bars	Formula	Formula Bottles	Bottle Bags	Bottle Nipples
Pliers	Crow bar	Water	Latex Free Gloves	Hand Sanitizer	Trash bags
Multi-purpose Tool	Shovel	Radio	Safety Goggles	Solar Blankets	Work Gloves
Gas Shut off Tool	Scissors	Dust Masks	Zip Lock bags	Masking Tape	Duct Tape
Fleece Blankets	Batteries	Whistles	Toilet Paper	Rope	Adult Vests
Germicidal Tablets	Wrench	Buckets	Flashlight	Soap	Cold Packs
Antiseptic Wash	Hammer	Lanterns	Shovel	Eye Wash	Vinyl Tarp

Toilet Bags	Toilet Chemicals	Bucket Toilet Seats	Dust Masks	Hard Hat	
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### 3. Meal Delivery-Emergency

Each center should have the items listed below available when food cannot be transported to the centers due to unforeseen circumstances such as traffic, breakdown of van, or breakdown of equipment in kitchen. All of these food items should be stored and marked “Emergency Food”. The requisite amount of milk (two half-gallon jugs for preschool and one half-gallon jug for toddlers per classroom, per meal) and fluid milk substitutions if needed for milk intolerances are to be on hand at all times.

- Infant food:
  - Meats, fruits and vegetables
  - Dry cereal
  - Formula
  
- Breakfast food:
  - Dry cereal
  - Canned fruit
  - Milk
  
- Lunch food:
  - Sun butter
  - String cheese
  - WW crackers
  - 1 can of fruit and 1 can of vegetables
  - Milk
  
- Afternoon snack:
  - Graham crackers
  - Milk

## V. Classroom Sanitation

### 1. General Description

Each classroom is responsible for preparing the spray bottle of sanitizing solution on a daily basis.

- The proportions of bleach to water are: three quarters ( $\frac{3}{4}$ ) teaspoon of chlorine bleach to two (2) cups of water or one (1) tablespoon of chlorine bleach to one (1) quart of water. Other disinfectants may be used with the approval of the Assistant Director for that site.
- Classroom staff is instructed to clean off any visible soil with soap and water prior to spraying each table lightly with the bleach solution, to wipe it with paper towels and air dry. This is to be done before and after each meal service.
- The bleach solution, as well as any other disinfectants, cleaning solutions, poisons and other items that could pose a danger to children, should be placed in a locked cabinet after each use

to prevent children from reaching.

- Warning Signs and Mixture instruction posters should be posted on the cabinet door where the solution is stored (See CSB Forms for forms “Warning Sign Poster” and “Warning Mixture Instruction Poster” in English and Spanish).
- Tabletops and eating surfaces must be cleaned/sanitized before and after each meal, counter tops are cleaned between preparation of different food items, and can openers are cleaned/sanitized after each use. Classroom staff is responsible for sanitizing toys weekly, as well as cleaning shelves and all areas of the classroom where toys are stored.
- In classrooms that have kitchen equipment, the teaching staff will ensure that, on a weekly basis and as needed, the pantry is swept, and ovens and refrigerators are cleaned. The building service worker washes trashcans as needed.

## **2. Classroom Sanitation in Infant Care Centers:**

Particular emphasis on classroom sanitation for infant centers is critically important in ensuring the health of the children and staff and in preventing the spread of communicable disease. Keep the classroom sanitized by adhering to these activities:

- All items used by pets and animals shall be kept out of the reach of infants.
- Before walking on surfaces that infants use specifically for play, adults and children shall remove, replace, or cover with clean foot coverings any shoes/socks they have worn outside of that play area.
- Each caregiver shall wash his/her hands with soap and water before each feeding and after each diaper change.
- Only dispenser soap, such as liquid or powder in an appropriate dispenser shall be used.
- Only disposable paper towels in an appropriate holder or dispenser shall be used for hand drying.
- Washing, cleaning and sanitizing requirements for areas used by staff with infants or for areas that infants have access to, are as follows:
- Floors, except those carpeted, shall be vacuumed or swept and mopped with a disinfecting solution at least daily, or more often if necessary.
- Carpeted floors and large throw rugs that cannot be washed shall be vacuumed at least daily and cleaned quarterly, or more often if necessary.
- Small rugs that can be washed shall be shaken or vacuumed at least daily and washed at least weekly, or more often if necessary.
- Walls and portable partitions shall be washed with a disinfecting solution at least weekly, or more often if necessary.
- The diaper-changing area, where residue is splashed from soiled diapers and items and surfaces are touched by staff during the diaper-changing process, shall be washed and disinfected after each diaper change. Such areas, items and surfaces shall include but not be limited to:
  - Walls and floors surrounding the immediate diaper-changing area.
  - Dispensers for lotion, soap and paper towels.
  - Countertops, sinks, drawers and cabinets.
  - Sinks used to wash infants, or to rinse soiled clothing or diapers shall be disinfected after each use
- Objects used by infants that have been placed in the child’s mouth or that are otherwise

contaminated by body secretion or excretion are either to be (a) washed by hand using water and detergent, then rinsed, sanitized, and air dried, or (b) washed in a mechanical dishwasher before use by another child. A container will be placed in the infant room to collect these objects which shall be washed and disinfected at least daily, or more often if necessary. Such objects shall include, but not be limited to toys and blankets.

- Linens laundered by the center shall be washed and sanitized at least daily, or more often if necessary. Such linens shall include, but not be limited to, bedding, towels and washcloths used on or by infants.
- A disinfecting solution, which shall be used after surfaces and objects have been cleaned with a detergent or other cleaner, shall be freshly prepared each day using 1/4 cup of bleach per gallon of water or other approved disinfectant . Commercial disinfecting solutions, including one-step cleaning/disinfecting solutions, may be used in accordance with label directions.
- All disinfectants, cleaning solutions and other hazardous materials must be approved for use at CSB and shall be placed in a locked storage area.

## W. Kitchen Sanitation

- All kitchen staff will follow Contra Costa County's Environmental Health rules and regulations for Retail Food Facilities.
- Cleaning/sanitizing may be done by correct spraying and wiping, or by using a dish washing machine, or any other type of machine (if demonstrated thoroughly to cleanse/sanitize equipment and utensils). The dishwashing machine must reach a temperature of 165 °F (74 °C) during washing and 180 °F during rinsing.
- All dishes and utensils used for food preparation, eating and drinking must be cleaned and sanitized after each use. If a dishwasher is not used, the manual 3-compartment sink method must be followed.
- Toxic materials must not be stored in food storerooms, kitchen areas, food preparation areas, or areas where kitchen equipment or utensils are stored.
- Soaps, detergents, cleaning compounds or similar substances must be stored in areas separate from food supplies.

## X. Food Safety and Sanitation

### 1. Personal Hygiene for Food Service Staff and Classroom Staff

No person is allowed to work in a food service facility or a food serving area if he/she:

- Is infected with a communicable disease that can be transmitted by food.
- Is a carrier of organisms that can cause disease.
- Has a boil, infected wound, or acute respiratory infection.

Employees must thoroughly wash their hands and exposed portions of their arms with soap and warm water:

- Before starting work
- Before serving food
- During work

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- After diapering
- After smoking
- After eating
- After drinking
- After using the toilet
- As often as otherwise necessary

Employees must take off their apron:

- When exiting building
- When going to use the bathroom
- As often as otherwise necessary

Employees must maintain a high degree of personal cleanliness, and conform to good hygienic practices:

- Minor cuts or scrapes should be thoroughly cleaned, and covered with a clean bandage. If the affected area is on a hand, food service gloves should be worn until the area has healed.
- While engaged in food preparation or service or while in areas used for equipment washing, utensil washing, or food preparation, employees must not use tobacco in any form, eat food, chew gum, or wear earphones. Employees may eat and drink in designated areas only, and shall follow Contra Costa County's tobacco product control ordinance.
- Potentially hazardous food must be kept at an internal temperature below 40°F or above 140°F. Hot foods that fall below 140°F must be reheated to at least 165°F.
- Gloves are to be used when either hand comes into contact with food such as when cutting food. Gloves do not need to be used when serving food with a utensil so there is no hand contact.
- Each serving bowl on the table must have a separate serving utensil.
- Leftovers may not be sent home with children, staff, or adults - due to the hazards of bacterial growth.
- Employees may not have their own food such as sandwiches, (coffee, soda, chips or candy in front of children.
- To help maintain kitchen sanitation, all non-kitchen staff shall not enter the kitchen except as required for work duties.

## **2. Policies for Food Sanitation / Safety**

### **i. Mealtime Sanitation Procedures**

- Before and after each meal time, tables must be cleaned with the registered disinfectant/cleaner approved for food prep surfaces
  - Children should not return to the table with books, toys, etc. until after the table has been cleaned and sanitized.
- Teachers and children must wash hands before setting table or sitting down at table.
- The assigned staff must take temperatures of foods before serving, and food must be warmed up to 165°F if temperature falls below 140°F.
- Serving temperature and the time when temperature was taken must be recorded on transport sheet.

## **ii. Food Utensils, Dishes and Food Containers**

- Each center must ensure that all serving bowls and other tableware items have been properly sanitized before each use.
- All dishes, utensils, and food containers are the property of Contra Costa County Community Services Bureau, and should not be taken off the premises.
- All food and utensils must be kept in their proper storage cabinet.
- Non-perishable food and food-related products must be stored at least six inches off the ground at all times.

## **iii. Refrigerators**

Thermometers inside freezers and refrigerators must be checked daily. It is the Site Supervisor's responsibility to:

- Monitor the daily temperature check and keep the Refrigerator/Freezer Log (CSB455) accessible.
- Order a new thermometer when needed.
- Ensure that refrigerator is cleared of perishable food items and is cleaned and sanitized on the last day of the week.
- Ensure that staff food is stored only in produce drawers labeled "Staff Food" in CACFP refrigerators.
- No open containers are allowed in the produce drawers.
- Stored containers must not have any exposed straw or spout

## **iv. Food storage**

Leftover fruit (except for bananas) and bread shall be stored in the refrigerator for later use and bread in the freezer for later use.

- Leftover milk and cold foods shall be rotated so they do not become outdated.
  - Use FIFO (First In, First Out) method
- Milk that has been poured into small containers should not be poured back into the milk carton.
- All foods shall be marked with their date of delivery.
- Opened food that must be stored shall be labeled with name and date of opening.
- All containers shall be labeled with name of food and date when packed.

## **v. Disposal of Leftover Food**

Serious health problems can be caused by leftovers that are held too long at an improper temperature. Teaching staff is required to dispose of all un-served cooked foods. At the end of each meal they are thrown into the garbage can.

- Food may not be kept after it has been put on the table for children.
- Leftover (un-served) food can never be taken home.
- Leftover fresh fruits, vegetables, cereals, breads and milk should be stored properly and used



for snacks or breakfast. Unsafe perishables shall be disposed of daily.

- The central kitchen will create a sample lunch plate and hold it for seven days. This food will be used for analysis in the event of a food-borne illness outbreak.

## Y. Procedures for Using Transport Units

Food cambros are insulated to help maintain the temperature of hot food or cold food. Cambros and containers shall be washed and sanitized daily.

- Cambros shall not be stacked more than four high.
- Broken cambros shall not be used to transport foods.
- Cambros and containers are opened just before serving food.
- All food containers shall be rinsed before being returned to central kitchen.
- Food shall not be left at room temperature in an open cambro.

## Z. Food for Infants

### 1. General Description

- Infants from birth through 11 months participating in the program will be offered an infant meal. Under the infant meal pattern, infant formula is a required component and, as such, must always be offered unless the infant's mother provides breast milk. CSB encourages breast-feeding. Infants and mothers benefit when infants are breastfed. Facilities are available for mothers to comfortably and discreetly breastfeed infants. Alternatively, staff can feed infants expressed breast milk left by their mothers.
- The decision regarding which infant formula to feed a baby should be made jointly by the infant's doctor and parents. CSB provides one house formula: Enfamil Infant. Any parent who wishes to decline this formula must document this declination using the form "Parent's Form for Declining a Provider's Formula" (See Form CSB404). Such parents will furnish a formula which meets the CACFP requirements for iron fortification and nutritional content, unless the doctor has prescribed a special formula. If the doctor-prescribed formula does not meet the CACFP requirements, parent and MD will need to complete a medical statement in addition to the declination form (CSB404).
- Infants are to be held while being fed, and must never be laid down to sleep with a bottle.
- An infant's developmental readiness is assessed to determine the foods to be provided, the texture of the foods, and the feeding styles to use. For complete guidelines, refer to the training manual Feeding Infants: A Guide for Use in the Child Nutrition Programs.

### 2. Feeding Infants:

- The introduction of solid foods is usually started around six months of age, depending upon each infant's nutritional and developmental needs. The decision to introduce solid foods should always be made in consultation with the parents. New foods are introduced one at a time, up to one week apart to make it easier to identify food allergies or intolerances. Infants will be offered single-ingredient commercial baby food when appropriate.
- As infants grow older, they may prefer to hold their own bottles, and may do so while being held in an adult's arms or lap.

- Dental problems, such as tooth decay, may result from children using bottles as pacifiers. For this reason, children are not allowed to carry bottles.
- Cereal or any other solid food may not be served from a bottle. A spoon is to be used instead. Baby food shall not be served from jars. Before feeding, the approximate amount of food that infant might consume shall be taken from the jar and placed into a small dish. Solid foods must not be put in bottles. Babies fed such food in a bottle can choke and may not learn to eat foods properly.
- Any parent who chooses to decline the center's offered food and instead furnishes one or more food items that meet Child Nutrition Program (CNP) nutritional content requirements, must document this declination using the Parent's Form for Declining a Center's Food For Infants, (Form CSB405) unless the doctor has prescribed special food. Any food items provided by the parent must be in compliance with local health codes, Head Start Performance Standards and CACFP regulations. If the doctor's prescribed food item(s) does not meet the CNP requirements, the doctor will need to complete the Physician's Letter for Declining a Center's Food (CSB405a), return the original to the Nutrition Office, and retain a copy in the child's file.

### **3. Food to Avoid with Infants:**

Infants are at risk of choking on food due to their poor chewing and swallowing abilities. For a complete list of foods to avoid for infants and toddlers, please refer to the training manual, "Feeding Infants: A Guide for Use in Child Nutrition Programs."

#### **AA. Food for Toddlers**

Toddlers will be served food from the regular Child Nutrition Toddler menu. Foods should be served family style and prepared so they are easy to eat (small pieces, or thin slices, no bones).

#### **BB. Potlucks**

Potlucks have historically been an integral part of CSB. They have provided parents with opportunities to share part of their family traditions, culture, personal interests, and strengths with other parents and staff in an economic and enriching manner. As the program has grown, concerns have been raised in relation to sanitation, safety, and nutrition. This is partly due to the common practice in our community of celebrations being built around a shared food experience, often with participants bringing their choice of food.

- Potlucks are discouraged during class hours as the children have their planned menus.
- If a potluck is held during a classroom event, it shall be held in a separate room such as a teacher's lounge or conference room. If a separate room is not available, potlucks shall be held after class hours.
- If a potluck is held during a classroom event, enrolled children will first be served the food provided by Child Nutrition Services.
- Parents may prepare a plate of potluck food for their own children only, and enrolled children may not be served the food in lieu of the food provided by the program.
- If after hours, parents may serve their children alternate food from whatever source they choose at that time.
- Parents who choose to contribute food should be encouraged to bring foods that are

economical, healthy, and prepared in sanitary conditions. See section CC below for restrictions and suggested healthy alternatives.

- The food may be either homemade or purchased.
- Cultural foods are encouraged.

### **CC. Food for Children, Parent, Staff Meetings and Events**

In March 1993, in an effort to reduce chronic disease, the Board of Supervisors adopted the Contra Costa County Food Policy developed by the Contra Costa County Food and Nutrition Policy Consortium, of which CSB is a member. The policy states that food provided at staff meetings, parties and other types of County social events should include choices that meet U.S. Dietary Guidelines. All foods served to people or provided through food assistance programs should reflect current standards of good nutrition.

In 2012, the Board of Supervisors and the Policy Council approved a Healthy Food & Beverage Policy. This policy states that Community Services Bureau recognizes frequent consumption of non-nutritious foods and beverages as a significant risk to the health of the children being served, and is taking a preventive approach. The role of CSB in serving families includes consistently modeling the behavior we wish to encourage. Therefore, at all CSB meetings, events, activities, or celebrations which include children:

- Sugar (or corn syrup) sweetened beverages and 100% fruit juice will not be served
- Caffeinated drinks, including teas, will not be served
- Foods containing large amounts of sugar and/or solid fats (candy, donuts, cakes, cookies, chips, etc.) will not be served

Instead, CSB will provide or require healthy alternatives such as:

- Unsweetened carbonated water (flavored or unflavored)
- Water, perhaps flavored with a slice of lemon or other fresh fruit (and preferably served in non-plastic containers)
- Non-fat or 1% milk (plain)
- Coffee and/or tea (for adults)
- Fresh fruit
- Whole-grain snacks (crackers, etc.)
- Raw vegetables and dipping sauce

At all facilities directly operated by CSB, the CSB Healthy Food and Beverage policy will be implemented for any meal or special event that includes children.

### **DD. Nutrition Services**

- The Nutrition Office works with staff, professionals and parents to meet the nutritional needs of children with disabilities, and to help prevent disabilities that have a nutrition-related basis
- The Comprehensive Services Health, Disabilities and Mental Health Managers work with the

Nutrition Manager to ensure that provisions to meet special needs are incorporated into the nutrition program.

- Appropriate professionals shall be consulted when determining ways to assist Head Start staff and parents with regard to children who have severe disabilities and/or problems with eating. The Nutrition Manager will plan and implement activities to help children with disabilities participate at mealtime, and to help prevent nutrition-related disabilities.

## **EE. Food Defense**

Security measures in the central kitchen area will be followed by limiting access to the food production area and storage area to authorized personnel only.

When not in use:

- Freezers shall be kept locked.
- Walk in refrigerators shall be kept locked.
- Storage room shall be kept locked.
- Access to ice machine shall be controlled.
- Food shipments shall be accepted only if products are secured and sealed.
- Incoming food shipments shall be examined for potential tampering.

## **PART V. FAMILY & COMMUNITY ENGAGEMENT PROGRAM SERVICES**

### **SUBPART I. Strength Building-Family Partnership Agreement**

#### **A. Purpose**

Parent and family engagement in Head Start/Early Head Start (HS/EHS) is about building relationships with families that support family well-being, strong relationships between parents and their children, and ongoing learning and development for both parents and children. The partnership between parents and HS/EHS staff is fundamental to children's current and future success and their readiness to school. At CSB, parents and family engagement activities are grounded in positive, ongoing, and goal-oriented relationships with families. The Strength Building-Family Partnership Agreement process begins at the first point of contact with the families. This may occur through a phone call to the enrollment line, an intake appointment, an enrollment clinic or a walk-in at one of our centers. Upon enrollment staff and families build ongoing, respectful, and goal oriented relationships. As needed, the staff is ready to link families with community resources and referrals to promote progress on family and child development goals.

The Strength Building-Family Partnership Agreement is further strengthened by parents completing the Parent Volunteer Survey, Parent Interest Survey, and engaging in the day to day program activities for families and children.

## B. Building Strength Building-Family Partnership Agreement (SB-FPA)

The SB-FPA aligns with the HS Parent and Community Engagement Framework and family outcomes. Through the SB-FPA, families work with staff to identify and achieve their goals and aspirations. The SB-FPA is a strength-based practice and is completed twice each program year. In both cases, parents and co-parents are encouraged to participate based on their readiness/willingness.

The Strength Building-Family Partnership Agreement has three layers of engagement:

- Strength Building Family assessment
- Family Goal Setting
- Referral and Resources

### 1. Family Assessment

Through the family assessment process, families meet with staff to share their unique strengths, inspirations, goals and challenges. They also discuss various dimensions of the HS/EHS Parent Family Community Engagement (PFCE) Framework:

- Family's well-being (Parent/family Health and safety, financial security, Shelter)
- Positive Parent Relationships (Parents developing warm relationships that nurture their child's learning and development).
- Family as a Lifelong Educator (Parent as the first teacher, participates and support their children learning, partner with school teachers and community).
- Family as Learners (Parents advance their own learning through educations, training, to support parenting, career and life goals).
- Family Engagement in Transitions (Parents support children learning and development as they transition to new learning environments such as EHS to HS or HS to Kinder and Elementary School).
- Family Connections to Peer and Community (Parent is connected with peers to build networks that are supportive and educational to enhance social well-being and community life).
- Family as Advocates and Leaders (Parent participates in leadership development at site level, community or state level to improve advocate for high quality children' learning experiences).

The key points of this conversation are objectively documented in CLOUDS using the Family Partnership Assessment Indicators, Comprehensive Services staff will assign one of the indicators to the dimension (T: thriving, S: stable, or IN: in-crisis).

### 2. Goal Setting

Based on the information gathered through the Strength Building-Family Partnership Agreement-Assessment, and based on what families consider it is important to them, the staff encourages and assists parents in setting personal or family oriented goals. If the family has a pre-existing goal, CSB staff will support the family as requested. Through the goal setting, families are educated on setting SMART goals

and planning the steps and support needed to achieve their aspirations. The family-goals are documented in CLOUDS-Family Goals, using the family's own words. (Family SMART Goal are: Specific, Measurable, Achievable, Realistic/relevant, and Timely)

### **3. Accessing Resources and Services**

Upon identification of the family SMART goal, the family defines achievable short steps, identifies resources/referrals they might need to successfully reach those goals, and commits to its completion. Staff assistance and support, nurture the family as they go through this process, building their knowledge and confidence accessing community resources. Referrals and Services are documented in CLOUDS Referral/Services tab.

### **4. CSB Strength Building-Family Partnership Agreement Process**

The initial SB-FPA is completed within 60 days of family enrollment; the second one is a follow-up of the initial SB-FPA and is completed 30 days prior to the end of their program year. This applies to Part day/Part Year Programs and Full Day/Full Year Programs. The SB-FPA is a fluid process, depending on individual family's circumstances; staff will support their interest and needs regularly.

#### **i. Within 60 days of Enrollment**

Comprehensive Services Clerks are responsible for the following:

- Completing family Assessment:
  - Meet with parents to complete the first SB-FPA as early in enrollment as possible. Document family strengths and areas in need of further information/referral in the CLOUDS system. Use key-words to describe and validate the selected indicator under each of the eight sections.
  - Avoid keeping assessments as new or in progress.
  - Families may decline the completion of the SB-FPA, if this happens, staff documents parent "declined" in CLOUDS SB-FPA Form.
- Completing Goal Setting:
  - Assist family on setting personal or family oriented goals to be completed within the program year, to describe what step will be taken to complete the desired goal, what support will be needed and when the goal will be achieved. Educate family in using the SMART Goal format and encourage to write them in their own words. (Specific, Measurable, Achievable, Relevant and Timely). If a family doesn't identify specific family goals, suggest the family develop a goal that supports their child's educational goal or development. (Staff can refer families to their parent-teacher conference goals if needed).
- Document family goal in CLOUDS by indicating:
  - Goal category based on PFCE frame work.
  - Goal description, enter the family's own words. Include pre-existing goals if

- applicable.
  - Goal steps, what is needed to achieve the goal(s) including a back plan. (The parent's responsibility for the action)
  - Goal support, what will be done by other than the parent to assist in achieving the goal. (Staff/other commitment to the action)
  - Expected completion date. (Within the program year)
  - Goal follow up, provide immediate support/resource and referrals to families that identified themselves as "in need" or requested additional information. All actions, resources, referrals and results of follow-ups are documented in under Goal Follow-up and in the Resources Referral Section in CLOUDS.
- Entering Referral and Services:
    - Families are provided with resources as requested or if staff consider the family will benefit from a community resource. Referral and Services are documented in CLOUDS. As needed families are contacted to determine if resources or referrals were appropriate and adequate for the family.
    - Document contact on Family Referrals and Services-Notifications in CLOUDS (enter dates and CS staff initials) indicating if the resource(s) met the family's needs and if the family was satisfied with the referral/resource. Resources and referral status in CLOUDS need to be marked as "Completed" by the end of the program year. Avoid leaving pending referrals, as in progress or new.

**ii. By January**

- Mid-year Goal follow-up. All family goals must be followed and documented in CLOUDS family goals section.

**iii. 30 days before the end of the Program Year (Part Day Programs and Full Day Programs)**

Comprehensive Services Clerks are responsible for the following:

- Complete the second SB-FPA, by reviewing the initial SB-FPA with parents. Staff communicates with families to discuss and document the second assessment in CLOUDS
- Follow on family goal progress. All family goals need to be closed at this time. Staff document on CLOUDS, the status of goal completion (Accomplished, Not accomplished). If any barriers were impeding the goal completion, staff document the goal status as "Not Achieved" and enter comments explaining the barriers under "End of the Year Comments" section of Goal in CLOUDS. Avoid leaving goals in progress or as new.
- As needed assist families in utilizing provided resources/referrals immediately, especially for families identified as in need.
- As needed contact families to determine if resources or referrals were appropriate and adequate for the family. Document notes in CLOUDS under Referral and Resources and Services-Notifications. At the end of the program year, all referral and resources status in CLOUDS need to be marked as "Complete", avoid leaving pending referrals as "In progress" or as "New".

**iv. On an Ongoing Basis:**

Site Supervisors are responsible for the following:

- Review individual SB-FPA's and Family Goals for their sites.
- Review CLOUDS custom report for Family Performance and Outcome by Measure by selecting your site.
- Maintain communication with CS Staff, especially for families they might consider themselves as in need.
- Should the family situation change and site staff is aware, notify comprehensive services staff to update Strength Building-Family Partnership Agreement assessment if needed, and provide support or resources as needed.
- As applicable, provide Comprehensive Services staff with updates to Referrals and Services as parents inform so that CLOUDS is maintained accurate and support is provided as needed.

Comprehensive Services Assistant Managers are responsible for the following:

- Monitor the completion and accuracy of SB-FPA data entry in CLOUDS.
- Following through CLOUDS reports to ensure family's referral and services are properly followed up and resources, referrals are in place.
- End of year SB-FPA reached closure. All assessments completed, all goals completed (achieve or not achieved or declined), all referral and services (Completed).
- Ensure that adequate follow-up and resources were provided promptly by CS Staff.
- Provide support and assistance to Site Supervisors and CS Clerk in obtaining resources if requested.
- Provide support and assistance to the family when needed.
- Hold Family Meeting for referrals that require multiple steps and planning.
- Hold Family Meeting to comprehensively support families who requested additional assistance or identify themselves as been vulnerable or in need.
- Work with Comprehensive Services Clerks to strategize timely completion of SB-FPAs.

Comprehensive Services Clerks:

- Build positive goal oriented relationships with the families as early in enrollment as possible.
- Complete Family Assessment, Goal setting, Referral and Resources.
  - Complete initial SB-FPA within 60 days of enrollment.
  - Complete end of the program year SB-FPAs 30 days before the end of the program year, review goal achievements, and request family feedback about community resources provided. If the family has not achieved their goal from the previous year and would like to continue working towards the same goal, staff may open a new goal format in CLOUDS and enter the same goal for the following year.
- Maintain open communication with families and follow on their goal process. As needed provides support.
- Partner with families to educate, support and build skills in accessing community resources and referral. If families identify themselves as in need, a week follow up is required to review if families accessed the community resources provided.
- Document all entries and follow up in CLOUDS data system.



## 5. Desired Outcomes of Family Partnership Process

- Families achieve an enhanced quality of life by engaging in a Strength Building-Family Partnership Agreement. Families are provided community resources such as adult education classes, financial literacy assistance programs, employment counseling, school lunch programs, health resources, and other community services. Such efforts are coordinated with the Comprehensive Services staff via the Strength Building-Family Partnership Agreement process and through on-going interactions with site or comprehensive services staff at the parent's discretion and need. By assisting families to identify their own supports and strengths, development of skills, tools, and resources, families can use this process to further develop their goals for their families beyond Head Start.
- Families feel empowered and have gained life skills to be self-reliant by learning about and accessing community resources to support their family.
- Families' attainment of goals will be identified.
- Families attain and accomplish pre-existing goals if identified.

The Comprehensive Services staff provides guidance, support, and resources to the family, moving them toward successful completion of their family goal(s) and aspirations. Documentation of support can be found in CLOUDS, Strength Building-Family Partnership Agreement, Family Goal, Referrals and Services, and the Family Case History.

When the family does not meet the timeline to accomplish their Family Goal, the Comprehensive Services staff will provide additional support and guidance, by reviewing/discussing all obstacles which prevented the family from meeting the time line. Families have a choice to continue moving toward meeting their goal(s) or establishing a new goal. If a family chooses to set a new goal, Comprehensive Services staff will assist the family in identifying an area to set a goal, and follow the goal setting procedures as listed under Goal Setting. Comprehensive Services staff will provide support and resources for the family to work towards achieving the newly identified goal.

Families may refuse to participate in the assessment, goal development or resources/referrals services. Staff document their attempts at explaining the benefits of the process, and note on CLOUDS that parent refused.

## 6. Parent Volunteer Survey

During the enrollment appointment, Comprehensive Services staff asks parents to complete a Volunteer Survey (See Form CSB300). This survey includes ways for parents to be engaged at the site level such as: helping in the classroom, preparing materials, and sharing their talents. It also offers opportunities to volunteer on a larger scale such as the Policy Council, Health & Nutrition Services Advisory Committee, , and Interview Panels.

The following is the protocol for implementation and completion of the Volunteer Surveys:

### i. Upon Enrollment

CS Clerks are responsible for:

- Educating parent about CSB volunteer opportunities and encouraging parents to complete the

CSB300 Volunteer Survey Form.

- Collecting completed forms and tallying a list of volunteers by site.
- Inputting names of parents indicating interest in an Advisory Committee (Policy Council, Health & Nutrition Services, Interview Panel, etc.) into the Volunteers for Advisory Committees folder on the Shared drive.

## **ii. By September 30<sup>th</sup>**

Site Supervisors are responsible for:

- Compiling a list of site volunteers from Volunteer Survey results.
- Utilizing the list of volunteers when needed for parent meetings.

Comprehensive Services Assistant Managers are responsible for:

- Working with Comprehensive Services Clerks to ensure Parent Interest Survey and Volunteer Survey are completed within the timeline with the parents.

## **iii. Ongoing**

- Should parents indicate interest in volunteering at a later date, they can inform site staff or CS staff about volunteer opportunities. (Volunteer Interest Survey is used upon enrollment as a means to discuss various engagement opportunities; however, families can participate in a volunteer activity at any point of enrollment).

## **7. Parent Interest Survey**

The Parent Interest Survey is aligned with the Head Start Program Performance Standard (HSPPS) and the Parent Family and Community Engagement Family Outcomes. Parents complete this survey upon enrollment; results from the survey allow staff to identify the top topics of parents' interests to provide training at parent meetings or to provide family resources. The list of the top ten results is kept in the Parent Committee Meeting and Policy Council binder. Family resources are shared via written materials, newsletter articles, speakers, and other forms of media. The categories for topics include:

- Health/safety
- Nutrition
- Mental health
- Child development/transitions/
- Parenting/child-parent relationships
- Literacy /adult education
- Employment /job training/asset building
- Connecting to community resources, leadership/advocacy

The following is the protocol for implementation, timeline, distribution, and follow up for the Parent Interest Survey (See Form CSB300):

- Upon enrollment Comprehensive Services Clerks are responsible for the following:

- Completing the surveys with Parent after introducing the purpose of its completion.
  - Entering data in the Survey Monkey for a tally of completed surveys.
  - Collecting Survey Monkey tallies from PFCE staff and providing sites with completed CSB304 Forms Parent Meeting Training Schedule top ten interests.
- By October/November of each year Site Supervisors are responsible for the following:
    - Present the top ten parent interest results at next scheduled parent meeting.
    - Work with parents to develop a calendar/schedule for topic presentations.
    - Request support from Comprehensive Services as needed in obtaining or identifying speakers.

Based on the results of the Survey and Performance Standard requirements, parent education workshops are planned by Site Supervisors/Head Teachers, and Comprehensive Services team members throughout the school year.

### C. Accessing Community Services and Resources

In order to best support and provide needed resources and referrals to registered families, CSB collaborates with members of the community agencies that are a part of our Health-Nutrition Advisory Committee. Community agencies support our work in the areas of health, behavioral health, nutrition support, education programs, disabilities/services agencies, social services, local Food Banks, financial literacy education, asset development programs, and domestic violence prevention programs and substance abuse prevention/intervention.

### D. Supporting Families in Crisis-(Emergency and Crisis assistance)

When a family experiences a crisis, the stress disrupts the family's usual pattern of functioning and family well-being. Families sometimes find that their usual ways of coping or problem solving do not work; as a result, they feel vulnerable, anxious, and overwhelmed. Sensitivity, empathy, and care are taken to assess the nature and scope of the crisis in order to work with the family to discuss the level of support that is adequate yet comfortable for the family. The role of Head Start staff is to recognize and assess the crisis situation, listen mindfully, provide assurance, and help the family use specialized resources in the broader community. Whether staff provide the needed assistance or intervention or refer families to community resources, they are key sources of support to the family.

- In an event of a crisis, the Site Supervisors and Comprehensive Services staff assigned to each site should always be the first contact.
- Comprehensive Services and site staff will conduct a comprehensive review of the immediate crisis that the family has.
- Consult the Service Area Manager(s) most connected to the crisis as needed for case review assessment and ensure comprehensive services support has been considered, and track crisis until stabilized.
- As needed, contact the Mental Health unit for support. Report the situation and advise of the potential need for crisis intervention or consultation.
- The Parent, Family and Community Engagement Manager should also be notified regardless of

the crisis area.

- Comprehensive Services Assistant Manager supporting the site creates, reviews and updates documentation of events in CLOUDS.

## E. Accessing Mental Health Services: Prevention Identification, Intervention, Program for Families

CSB supports the social-emotional health and well-being of both the child and the family. Opportunities for parents are provided to discuss concerns regarding their child or family and seek/assess support/treatment options with CSB mental health unit clinicians. Goals of the mental health prevention program are to:

- Improve self-concept
- Build positive goal-oriented relationships
- Develop coping skills for problem-solving
- Manage stress effectively

Family Meetings are offered to families as needed to identify and address child or family issues so that Comprehensive Services staff can provide information or additional resources to the family. Staff can assist families in obtaining appropriate referrals to address individualized family needs or concerns.

Child Abuse Prevention training for parents is scheduled annually at the site level during parent meetings. Additional resources are available to site and parents upon request.

## F. Family Resources

### 1. Resource Guides:

Several community resource guides are used by Comprehensive Services staff, and many are posted on Parent Boards including:

- “Surviving Parenthood,” published by the Child Abuse Prevention Council 925-798-0546 or access the link: <https://www.capc-coco.org/>
- “Resources Guides” published by Contra Costa Crisis Center (Toll-Free 800-830-5380 or 925-939-1916, and Crisis line 800-833-2900 or [http://cccc.bowmansystems.com./](http://cccc.bowmansystems.com/)) and the guide provides an at a glance perspective of what resources are available to assist with families' basic needs. It is easy to reproduce, is available in English and Spanish, and is published for East, Central, and West Contra Costa County.
- CSB Friday Flyer: A source of county wide community resources/events, that are distributed twice a month to all CSB staff, in an effort to support their work linking families with valuable community resources. The Friday Flyer is distributed in English/Spanish and contains up to date information regarding county wide training and job opportunities, community events such family recreational activities, as well a variety of community learning opportunities.

Other community resources list that are frequently distributed to CSB staff and parents include:

- One Stop Career Center monthly calendars

- First 5 Center monthly calendars
- Local Library calendars
- Latina Center calendars
- Spark Point calendars
- Family Law workshops

## **2. Internet Database**

For individualized resources customized to fit particular needs, Comprehensive Services staff and other staff can access 211 Online Database via the Internet at [www.crisis-center.org](http://www.crisis-center.org). This up-to-date system allows staff to search for resources by name, need, and geographical area. It has the capability of translating the resource information into 12 different languages and has a map feature allowing the user to create a map to and from the resource location. Parents are encouraged to use this resource from CSB computers, or if available, from their personal computer.

## **3. Other Methods of Access**

Parents are also given access to information about community services by posting information on parent bulletin boards at sites and Wellness Center Displays in the classrooms. Additionally parents receive, educational booklets, pamphlets, CSB Family newsletters, flyers of program events during parent orientation and/or other parent meetings/trainings.

## **4. Site Based Resources and Referrals**

Each Site Supervisor must make available the Resource Guides for the appropriate region of the county to assist families in accessing frequently used or needed resources. Copies of these Resource Guides should be posted on the Site Parent Board and also be distributed to each family so that it is easily accessible should they need it at a later time. Additional copies for photocopying and updated versions can be found at **211 Contra Costa**: <http://ccc.bowmansystems.com/> Resource boxes are also available at each site with additional resources and handouts that relate to topics from the Parent Interest Surveys. Each site has a Wellness Center (self-help) that will assist those families that don't ask for resources directly. The Wellness Centers contain information in the areas of: CSB's health, disabilities, nutrition, mental health, parent/family involvement, among other flyers. The Site Supervisors update the wellness centers quarterly basis.

## **G. Services to Pregnant Women Enrolled in the Program**

Staff engages enrolled pregnant women and other relevant family members such as fathers, in family partnership services focused on factors that influence prenatal and postpartum maternal and infant health. Staff provides support throughout the transition process with program options and transition to program enrollment, as appropriate.

The Strength Building-Family Partnership Agreements will address:

- Early and continuing risk assessments, which include assessment for nutritional status as well as nutrition counseling and food assistance, if necessary.
- Health/oral promotion and treatment, including medical and dental exams, on a schedule

- deemed appropriate by attending health care providers as early in the pregnancy as possible.
- Mental health interventions and follow-up, including substance abuse prevention and treatment services as needed.
  - Pre-natal education on fetal development, labor and delivery, and postpartum recovery
  - Benefits of breastfeeding and accommodation of breastfeeding in the program.
  - Health staff will visit the newborn within two weeks after birth to ensure the well-being of both mother and child.

## **SUBPART II. Parent Engagement**

### **A. General Description**

Parents are the first and most important educators of their child. Parent Engagement in CSB is integrated into the classroom and in the administration, by then, it is imperative that the parents become engaged in their children educational program, and in all aspects of the program. Parents are encouraged to participate in policy-making groups at the center, agency, and grantee levels. Participation of parents is voluntary and is not required as a condition of the child's enrollment. Four ways have been designed to provide the parents and/or families of the program to actively participate in the following:

- Engage in the decision-making process
- Engage as paid employees
- Engage as volunteers
- Engage as observers in their child's classroom

Families can also expect to be offered the opportunity to be engaged in the program as equal partners in their child's education, learning, and development in these ways and more:

- Participates in the Home Visit
- Attend an orientation to the program and the classroom
- Attend two Parent/Teacher conferences per year
- Attend Parent Meetings and parent trainings
- Participate as a volunteer, staff, or observer
- Participate in the Male Involvement and Engagement Program
- Participate in Policy Council and other advisory bodies
- Participate in the Strength Building-Family Partnership Agreement

### **B. Engagement in the Decision-Making Process**

Participation in the process of making decisions about the nature and operation of the programs (as well as decision-making in the Contra Costa County Community Services Bureau Grantee-Operated Program and the Policy Council) occurs on two levels, Site Parent Committee and Policy Council:

- 1. Site Parent Committee Meetings:** comprised exclusively of the parents of children currently enrolled at each center or within a program option such as the Home-based option.

The Site Parent Committee carries out at a minimum, the following responsibilities:

- Collaborates with staff in developing and implementing local program policies, events, and services (including but not limited to classroom curriculum and activities, and center-wide activities).
- Plan, conduct, and participate in informal as well as formal programs and activities for parents and staff (including but not limited to parent training, special events, and parent/child activities).
- Within the guidelines established by the governing body, Policy Council, or Policy Committee, participate in the recruitment and screening of Early Head Start and Head Start employees.

The following is the staff protocol for implementation of parent meetings as family engagement:

- In September Comprehensive Services Clerks, Comprehensive Services Assistant Managers and CS Managers provide support at 1st parent meeting to establish Policy Council representative and Parent Committee officers.
- As needed Comprehensive Services staff assists in providing resources for speakers at Parent Meeting upon request by Site Supervisor.
- Monthly one week before meeting, Site Parent Meeting Chair:
  - Announces upcoming meeting
  - Prepares agenda, make copies, prepare minutes
  - Copies minutes from prior month
  - Copies PC minutes to share with parents
  - Posts agenda on Parent Board
  - Secures training/guest speakers (with Site Supervisor assistance)
- Monthly Site Supervisor (with the support of Comprehensive Services staff as needed):
  - Supports Site Parent Committee Meeting Chair with monthly duties assigned.
  - Provides support for translation of minutes/agendas if needed.
  - Provides staff report for meeting.
  - Ensures parent committee meeting binder is current for the school year with training tally, training evaluations, meeting agendas, meeting minutes, sign-in sheets and copies of handouts given to parents.
  - Attends Parent Meeting or provide staff support to parent officers.
- Within school year Site Supervisor (with the support of Comprehensive Services staff as needed) ensures that required trainings are provided at the site, including:
  - Pedestrian Safety (By September 30th)
  - Child Abuse Prevention (By April 30th)
  - Kindergarten Transition (January to May depending on school district)

## **2. Policy Council**

The Policy Council operates in under Internal Operational Procedures of the County Board of Supervisors,

the Brown Act, Simplified Roberts Rules of Order, Head Start Program Performance Standards (HSPPS), and Better Governance Ordinance. The Policy Council By-Laws, which are reviewed and approved annually by the PC, contains detailed information including but not limited to the following:

- Purpose of the Policy Council and composition information
- Procedures for handling business
- Duties and Responsibilities of members
- Membership and Meeting information
- Standards of Conduct requirements

For more information regarding the roles and responsibilities of the Policy Council, refer to the Program Governance under Section 1 of the Policies and Procedures.

The following is the staff protocol for implementation of the Policy Council as an opportunity for Parent Engagement:

**i. Site Supervisors with the support of designated Comprehensive Services staff is responsible for the following:**

- September:
  - Attend 1st Parent Meeting at each site where there is Head Start or Early Head Start enrolled families as assigned.
  - Assist in establishing site officers and Policy Council Rep(s). Refer to Initial Parent Meeting-Election Packet that outline general duties of policy council representatives:
    - Initial Parent Meeting-Election CSB 330
    - Initial Parent Meeting-Election Agenda CSB 330A
    - Initial Parent Meeting-Election Minutes CSB 330B
    - Parent Committee HS Requirements CSB 330C
    - Functions of the Parent Committee Officer CSB 330D
    - Policy Council Representative Overview CSB 330E
    - Policy Council Representative Information CSB330F
    - Roster of Parent Committee -Policy Council Officers CSB 330G
    - Provide new Policy Council representative with Policy Council Representative Changes (CSB-330F) form to complete and forward to Policy Council Staff and CC PC Manager

**ii. Site Policy Council Representative with the support of site staff:**

- Monthly:
  - Ensures posting of upcoming Policy Council Agenda on Parent Board before the Policy Council meeting.
  - File Policy Council Agendas in site Parent Meeting Binder.
  - Prepare monthly Site Report to present to the Policy Council.
  - Share and distribute flyers and information received at the Policy Council Meeting to parents at the monthly site committee meeting.
  - Attend Policy Council meeting and take back information and resources to the next Parent meeting at their site.



**iii. Site Supervisor:**

- Monthly-week of PC:
  - Confirm representation for the site. If rep(s) cannot attend, secure an alternate.
  - West Co. sites only: Confirm if Policy Council rep(s) needs transportation and inform PFCE staff to arrange transportation for the respective month.
  - Facilitate election of new Policy Council representative if replacement is needed.
- As needed:
  - If the elected Policy Council Representative is unable to fulfill his/her duties, he or she submits a letter of resignation to site or comprehensive services staff to be forwarded to the clerk or manager of PC.
  - Site conducts an election for replacement Policy Council representative at the next Parent Committee meeting.
  - Provide new Policy Council representative with Policy Council Representative Information (CSB-330F) form to complete and forward to the clerk of the Policy Council.

**iv. Comprehensive Services Manager Assigned to Policy Council:**

- Monthly-after PC:
  - Provide Policy Council meeting minutes to sites for Policy Council representative to report at next parent committee meeting.
  - Post minutes and agenda on EHSD, CSB and Contra Costa County public websites, in both English and Spanish.

**C. Parent Engagement in the Classroom as Paid Employees, Volunteers, or Observers**

**1. As Paid Employees:**

Contra Costa County CSB defines “paid employees” as currently-enrolled parents who have qualified for an employee position. Preference will be given to parents of children formerly or currently enrolled in CSB’s programs. Parents who become paid employees of Contra Costa County may not participate on the Policy Council.

**2. As Volunteers:**

To be considered for volunteering, a currently enrolled parent must comply with CSB and Licensing requirements, take part in an orientation about the program and the specific aspects of being a volunteer. Parents and family members are encouraged to participate in the classroom as frequently as their schedule permits. Please refer to the Volunteer Policy under Human Resources of the Policies and Procedures for more information on CSB Volunteer Policy.

If parents are unable to volunteer at the center, the following home activities are suggested:

- Assisting the children extend their experience in the classroom
- Assisting the children to use materials in different ways, providing children with appropriate work and strategies to help them solve problems

- Encouraging children to communicate with one another so that they can help themselves work out problems and explore alternatives
- Organizing, fixing, making toys or sewing/repair of dramatic play clothes
- Participating in story-telling activities with children
- Making observations of their child
- Making flannel board stories
- Going to the library to check out books for the classroom
- Translating written materials

### **3. As Observers:**

Parents of currently enrolled children may observe in their child's classroom or during the Home-based socialization time at any point during program operations.

Depending on circumstances, other observers and professionals will need to obtain permission from the Site Supervisor/Early Childhood Home Educator and or parental consent release for observations by indicating the purpose of the visit, and how long they plan to visit.

Parents and other family members have a responsibility to treat staff and other program participants with courtesy. Aggressive or abusive actions towards any staff members, parent, or another child by a parent is unacceptable and may result in the parent being barred from the center grounds and or a child/family being withdrawn from the program. If this should occur, CSB will work with the parent to provide resources for alternative placement.

### **4. Male Involvement Program:**

CSB supports the engagement of both parents in their children's educational experience that will ultimately help the children to reach better outcomes. Regardless of living arrangements, it is our goal to include both parents, (co-parents) to the maximum extent possible in the family partnership process and have ongoing communication with the child's teacher as co-partners in their child's education, learning and development.

CSB makes fathers feel welcome and supported at our sites and offer activities that will be meaningful to both father and mother. The goal of male involvement is to provide fathers and other significant males with opportunities to build parent to parent network that is supportive and/or educational, to enhance social well-being and community life. Activities and support for fathers and engaged men are determined locally through a variety of ways such as ongoing communication as a result of a parent-teacher conference, home visit, other means with a teacher or site supervisor, and fatherhood support groups (24/7 Dad).

## **D. Family Engagement in the Program**

Staff members have a significant role in providing opportunities for parents/families to become engaged. Site staff and Comprehensive Services staff have the responsibility of ensuring that parents of children currently enrolled and/or family members have the opportunity to be engaged in all aspects of the program. CSB defines opportunity as the staff's willingness to assist families in removing barriers to their involvement.

### **1. Parent Orientation:**

CSB staff ensures that parents have the opportunity to be engaged in the program by providing a Parent orientation at the time of placement. Once a child is ready to be placed at a site, comprehensive services, or site staff meets with the family to complete the placement process. This includes the Parent Interest Survey and a review of the Family Handbook which provides an overview of our CSB program, family parent engagement opportunities, and its service models & areas. The Family Handbook is updated annually in conjunction with the annual review of CSB Policies and Procedures. Contents of the Handbook are limited to appropriate content regarding program information, school readiness, staff professional development, parent, family, and community engagement, health and safety requirements, nutrition information, social services and more.

Please refer to the current Family Handbook for more details.

Site staff and Early Childhood Home Educators work with parents to plan classroom activities, field trips, socializations and home-based activities. Planning with parents at the site level occurs at parent meetings and individually through parent conferences twice a year. Child care and transportation are scheduled and provided when needed to allow for maximum family engagement.

### **2. Family Information Sharing:**

All centers are required to have a Parent Information Board, located in a visible and accessible place all parents visiting the facility. For centers with several buildings, a Parent Information Board should be included at each building. These boards are used to communicate with families and should contain Center Licensing regulations, CSB and Community current events, parent committee meeting agendas and minutes, Policy Council agendas and minutes, job announcements, site special events, and parent engagement opportunities such as Male Involvement, parenting classes, financial literacy classes and other CSB and community learning opportunities. Materials should be posted in English and Spanish whenever possible.

CSB monitors both Delegate Agencies and subcontractors, and the directly operated program to determine the extent of parent engagement, giving technical assistance to programs as needed.

### **E. Development of Activities for All Parents**

To gain an understanding about families are encouraged to fill the CSB300 "Parent Interest-Volunteer Survey Form".

Parent Interest surveys are distributed to enrolled families at enrollment and are tallied by Comprehensive Services staff by September 30th. to determine interests and needs of parents at each site. Information from these surveys is analyzed by staff, and form the basis for the development of activities and parent trainings that reflect the interests of the site. Parent Engagement requests found consistently across the program will be considered for agency-wide opportunities.

Currently enrolled parents, are encouraged to co-partnership with classroom staff, or with their Early Childhood Home Educators to design child development activities and special events.

Staff should assist parents to define their feelings about child rearing, as well as building partnerships with parents (to develop confidence and knowledge about their children's education). In turn, parents contribute their experiences and values to the program in a way that is comfortable for each parent.

Various opportunities are made available throughout the year, and support is provided both site and comprehensive services staff to assist each family to participate to the extent of their comfort, ability, and availability.

#### **F. Parent Education / Home Activities**

Teachers provide parents with individualized home activities to reinforce their child's learning objectives. Home activities focus on the use of household items and emphasize a developmentally appropriate approach to working with preschoolers.

Home activities are introduced to parents at site parent meetings, home visits/parent conferences, and daily conversations with parents.

Each center has a Parent Lending Library/Wellness Center available to parents on a checkout basis. Books and pamphlets about Parenting, Child Developmental Milestones, Health, Mental Health, Dental Care, Nutrition, Child Development, and Home Activities are all part of the library. For more information on Home Activities, refer to the Education section of the Policies and Procedures.

#### **G. Parent Notification of Community Services Bureau Changes**

Following is CSB's procedure for notification of parents of staff changes, new hires, substitutes, staff departures, and other applicable CSB staff movement:

- Classroom Substitute – the Site Supervisor will notify impacted families about changes in staffing at the classroom.
- Hiring/Assignment/Departure of Staff –the Site Supervisor or Head Teacher will inform parents in writing and verbally about changes in staffing on-site.

#### **H. Family Literacy**

Family Literacy will be promoted on a group and individual family basis through information obtained in the Strength Building-Family Partnership Agreements, Parent Interest Surveys, parent/teacher home visits, parent conferences, center parent meetings, and from other parent contacts. Family Literacy is approached as a collaborative venture; wherein interagency agreements are established to streamline access to the services of a variety of community agencies. Examples of Family Literacy opportunities include:

- Tandem Reading Program
- Raising a Reader book bags
- Reading Advantage
- Home activities

Comprehensive Services and site staff work consistently through the year to maintain effective working relationships with community agencies providing literacy support services. These may include, but are not limited to, United Way, Literacy Alliance, Libraries, ROP, RIF, Project Second Chance, CalWORKs, and Diablo Valley Literacy Council, or provide parents with resources for literacy services at their local library and more depending on the need and interest of families.

## I. Parent and Family Engagement in Health, Nutrition, and Mental Health Education

The Family Strength Building Partnership Agreement utilizes the PFCE Family Framework outcomes. This matrix specifically addresses the family wellbeing that includes health, nutrition and mental health education. By completing this tool staff gains the information they need to:

- Assist parents in establishing and utilizing a medical and dental home
- Encourage parents to be active participants in their child's health care
- Provide parents with the opportunity to learn the principles of preventive medical and dental health, health and safety education, and individualized health training specific to the child and/or family needs

In addition to addressing education via the Strength Building-Family Partnership Agreement, there is a joint advisory group that allows appropriate time/opportunity for maximum engagement in Health and Nutrition.

Health Services and Nutrition Advisory Committee: This committee is composed of staff, parents, and community representatives from the fields of health, nutrition, disabilities, and mental health and their related services for pregnant women, children 0-5 years old, and their families. Members inform staff of current issues and practices in the community so that the program can address them. Parents also have an opportunity to express their concerns regarding health-related issues affecting their family or their community by providing input to local community agencies regarding current health-related events, trends, service gaps. Members of this committee also exchange information regarding the food service program and discuss and explore nutrition issues such as obesity, anemia, cancer, breastfeeding, and other topics of interest to the parent participants. This group meets twice a year. Parents indicate interest on the Volunteer Survey that is completed at placement (See form CSB300).

## J. Parent and Family Engagement in Community Advocacy

Through the encouragement of parent and family engagement at all levels, the program provides parents with valuable information that will empower them and serve as a practical resource to help them in their day-to-day lives.

One of the goals of parent and family engagement is to support and engage parents in their child's education, learning, and development. Information exchanged during the first and second parent-teacher conferences, through Family Meetings, sharing of health screening results, and on-going communication with parents, staff are educating parents on the importance of seeking out support for the interest and well-being of their child.

Through the Strength Building-Family Partnership Agreement staff support and encourages families to develop goals or support existing goals in order to support the growth and well-being of their family.

Through the Policy Council and Policy Council Subcommittees parents are provided an opportunity to extend their advocacy into the community as they are involved in the decision making process for their Head Start and Early Head Start Programs. They gain experience in a public meeting setting and will have knowledge of public meeting rules should they wish to advocate in their local public meetings. They are

exposed to community resources and in turn become vital resources to other parents at their respective centers. The Policy Council Executive Committee and Advocacy Subcommittee, shares information about grass roots advocacy for the Head Start program and encourages parents to write letters to their elected officials supporting their Head Start program. This advocacy extends beyond supporting their own child which is what brought them to Head Start initially. It is vital that parents remain concerned and informed about issues that affect their lives and the lives of their children. Parents are encouraged to form their own opinions regarding issues and are provided with information on advocacy skills so that they can have a voice as well as leadership skills.

#### **K. Parent and Family Engagement in Transition Activities**

Helping each parent become an effective advocate for their children is an essential transitional strategy:

- Transitions start well in advance to allow time for the parent and the child to prepare for the upcoming change.

Parents are involved in transitions throughout the program such as transition from home to school, infant to toddler; toddler to preschool, preschool to kindergarten; routine transitions during class time; and transitions from the parking lot to the center. For more information on transitions, refer to the Education and Disabilities sections of the Policies and Procedures and the CSB Family Handbook.

#### **L. Parent and Family Engagement in Home Visits**

Head Start enrolled parents are encouraged to participate in two home visits during the program year. The first visit may occur at the time of placement and is intended to be an opportunity for the teacher to meet the child and family, and ensure that the child's entry into the program is successful. Comprehensive Services staff may accompany the teacher if necessary. This provides an opportunity for parents to share information about their child to the teacher.

Individual needs are also addressed at this time as well as completion of some required program documentation. The second visit occurs near the end of the program year and is intended to exchange information regarding progress the child has made and to address any areas of concern before the child leaves the program or begins another year with the program.

Parents may decline the opportunity for a home visit at any time. While home visits are not required as a condition of the child's enrollment or participation in these program options, every effort must be made by program staff to explain the advantages of home visits. Home visits are, however, required for the Home-based option and in the Early Head Start program where staff must visit the newborn within two weeks of birth. For more information regarding these programs, refer to the Education section of the Policies and Procedures.

#### **M. Parent Engagement in Recruiting Head Start and Early Head Start Employees**

All parents are invited to participate in the recruiting EHS and HS employees. Parents are included as part of the interview panel for consideration of employment. Parents can be engaged by showing interest as a Policy Council member or by way of the Volunteer Survey that is done upon enrollment. A list of parents who are interested in being on interview panels is created at the beginning of each year.

Training and orientation of the interview process is provided for all parents who wish to participate. For more information on staffing procedures, refer to the Human Resources section of the Policies and Procedures.

### **SUBPART III. Community Partnerships**

#### **A. Description**

CSB takes an active role in community partnership building and advocacy to enhance the delivery of services to children and families. Based on a variety of information sources, such as the Community Assessment, Strength Building-Family Partnership Agreements, regulatory requirements and current legislation, program staff actively seeks out and enters into partnerships with various community entities and individuals to coordinate the access to resources and services to children, families, and staff. These partnerships and the manner in which they are conducted are documented by virtue of interagency agreements and memoranda of understanding, which clearly delineate the responsibilities of both parties, are updated regularly, and are responsive to the needs of children and families.

#### **B. Child Care Partnerships**

CSB engages several Community-Based Organizations on a contractual basis to provide child-care and development services to eligible families. Comprehensive Services staff and a CSB Senior Manager are assigned to these programs operated by our child care partners to provide support and technical assistance and to ensure compliance with federal and state regulations. Collaborative partnerships with child care agencies enhance the educational, health care, and social services to children and families throughout the county.

Providers of child care services include: First Baptist Church, We Care Services for Children, YMCA of the East Bay, Martinez Early Childhood Center, Richmond College Prep, Crossroads High School, Little angels Country Day School, Aspiranet, Sunshine Valley, San Ramon Unified School district, Healthy Families America, Child Care Counsel.

#### **C. Partnerships with Agencies, Entities, and Individuals.**

CSB partners with over a hundred community-based organizations including but not limited to:

- Health Services: Family, Maternal, Child Health Program (FMCH), Child Health and Disability Prevention Program (CHDP), , CAIR, Integrated Pest Management Bed Bug Task Force, John Muir Child Safety Coalition, Give Kids a Smile Day, Children’s Oral Health Program, Lead Prevention program, Communicable Disease program, Community Wellness & Prevention program.
- Child Welfare: County Child & Family Services (CCC EHSD-CFS).
- Mental Health: County Mental Health Program/MediCal Reimbursement, C.O.P.E. Family Services program (Triple-P program).
- Nutrition: Women, Infants and Children Nutrition Program (WIC), CCFP Roundtable, Solano

- & Contra Costa Food Bank, Families CAN, CCC Health Services CalFresh, BANPAC, UC Cooperative Extension (EFNEP), Healthy and Active Before 5.
- Disabilities: Regional Center of the East Bay, California Children’s Services, California Community Care Coordination Collaboration Five Cs, Contra Costa SELPA, Parent Care Network, Child Health and Disability Prevention.
  - Family Support: Department of Child Support Services (DCCS), SparkPoint Center, County Probation Family Justice Centers, Contra Costa First 5.
  - Child Abuse Prevention: Family Stress Center’s Child Assault Prevention Program and Families Thrive.
  - Professional Associations: California Child Development Administrator’s Association (CCDAA), National Association for the Education of Young Children (NAEYC), California AEYC, Contra Costa AEYC, Local Planning Council (LPC), National Head Start Association (NHSA), California Head Start Association (CHSA), and Region IX Head Start Association (RHSA).
  - Educational Institutions: Contra Costa College District, UC Davis, UC Berkeley, and Cal State University East Bay.
  - Other Supportive Services: Reading Is Fundamental, Supporting Father Involvement, Zero Tolerance for Domestic Violence, Raising A Reader and First 5 Commission.

In addition to partnering with agencies and entities to provide services to our children, families, and staff, CSB also conducts outreach to organizations for the purpose of securing volunteers to participate in program activities. Examples of this type of outreach include our work with the Volunteer Center, CalWORKs (work experience clients), Teens Link with the Community (teens fulfilling community services requirements in High School), and the Telephone Pioneers (retired Pacific Bell employees). Visiting experts are also recruited from the community to enhance training for children, staff, and families.

Groups of parents and professionals recruited to participate on Advisory Committees (Health & Nutrition Services Advisory, Community Colleges, Budget, Bylaws, Education and Family Services, Nutrition, and Personnel Committees) ensure quality planning for needs/interests of children and families. These committees contribute parent and professional input to the planning and program implementation process and are recognized for the important role they play in community partnership building.

## **PART VI. ADDITIONAL SERVICES FOR CHILDREN WITH DISABILITIES**

### **A.Purpose**

The Contra Costa County Community Services Bureau complies with the IDEA (Individuals and Disability Act IDEA) and is consistent with both Federal and Center regulations governing the rights of the disabled. Children enrolled in Head Start programs with disabilities receive all the services to which they are entitled to under the Head Start Program Performance Standards (45 CFR 1302).

Contra Costa County Community Services Bureau enrollment efforts include recruiting children with disabilities.

Enrollment may not be denied on the basis of a disability as long as:



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- The parent wants to enroll the child,
- The child meets the Head Start age and income eligibility criteria,
- Head Start is an appropriate placement according to the child's IEP/IFSP, and
- The program has vacancy to enroll

When a Head Start program has been determined an appropriate placement for a child with a disability and documented on the child's IEP/IFSP, Contra Costa Community Services Bureau will access resources, recommend placement options, and provide staff training as needed.

Children with disabilities may not be denied enrollment due to the following:

- Staff apprehension and/or unfamiliarity with the child's individual disability or special equipment required to accommodate the disability
- Inaccessibility of facilities,
- The need to access additional resources to serve a specific child to the extent possible,
- Unfamiliarity with a disabling condition or special equipment or devices needed to support the child
- The need for personalized special services

The policies governing Head Start program eligibility are the same for children with or without disabilities.

The Contra Costa Community Services bureau has instituted a variety of placement options for enrollment, including:

- Joint/shared placement with other agencies
- Shared provision of services
- Collaboration with the school district personnel to supervise special education services
- Shared enrollment slots
- Accepting kindergarten-aged eligible children in collaboration with school districts when IEP states the need

Children with disabilities identified for services are as follows:

- Children who have been diagnosed by a certified and/or licensed professional as "having a developmental delay or a disabling condition and have an IEP or IFSP."
- Children who may require special attention due to specific high risk factors who do not have a diagnosis. These children may not have an IEP or IFSP.

## B. Definitions

- 1. ACYF** - Administration on Children, Youth and Families, Administration for Children and Families, U.S. Department of Health and Human Services, and includes appropriate Regional Office staff.
- 2. Children with disabilities** - Children with intellectual disabilities, hearing impairments including deafness, speech or language impairments, visual impairments including blindness, serious emotional disturbance, orthopedic impairments, autism, traumatic brain injury, other health

impairments or specific learning disabilities; and who, by reason thereof, need special education and related services. The term children with disabilities for children aged 3 to 5, inclusive, may, at a State's discretion, include children experiencing developmental delays, as defined by the State and as measured by appropriate diagnostic instruments and procedures, in one or more of the following areas: physical development, cognitive development, communication development, social or emotional development, or adaptive development; and who, by reason thereof, need special education and related services.

3. **Commissioner** - Commissioner of the Administration on Children, Youth and Families.
4. **Day** - Calendar day.
5. **Delegate agency** - A public or private non-profit agency that a grantee has delegated the responsibility for operating all or part of its Head Start program.
6. **Disabilities coordinator** - Person on the Head Start staff designated to manage on a full or part-time basis the services for children with disabilities described in part 1308.
7. **Eligibility criteria** - Criteria for determining that a child enrolled in Head Start requires special education and related services because of a disability.
8. **Grantee** - A public or private non-profit agency that has been granted financial assistance by ACYF to administer a Head Start program.
9. **IFSP** - Individualized Family Service Plan for (ages 0-3) and **IEP** - **Individualized Education Program** for (ages 3-5) - A written statement for a child with disabilities, developed by the public agency responsible for providing free appropriate public education to a child, and contains the special education and related services to be provided to an individual child.
10. **Least Restrictive Environment** - An environment in which services to children with disabilities are provided:
  - To the maximum extent appropriate, with children who are not disabled and in which;
  - Special classes or other removal of children with disabilities from the regular educational environment occurs only when the nature or severity of the disability is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.
11. **Performance Standards** - Head Start program functions, activities and facilities required and necessary to meet the objectives and goals of the Head Start program as they relate directly to children and their families.
12. **Related services** - Transportation and such developmental, corrective, and other supportive services as are required to assist a child with a disability to benefit from special education, and includes speech pathology and audiology, psychological services, physical and occupational therapy, recreation, including therapeutic recreation, early identification and assessment of disabilities in children, counseling services, including rehabilitation counseling, and medical services for diagnostic or evaluation purposes. The term also includes school health services, social work services, and parent counseling and training. It includes other developmental, corrective or

supportive services if they are required to assist a child with a disability to benefit from special education, including assistive technology services and devices.

- Assistive technology - Any item, piece of equipment, or product system, whether acquired commercially off the shelf, modified, or customized, that is used to increase, maintain, or improve functional capabilities of individuals with disabilities.
- Assistive technology service - Any service that directly assists an individual with a disability in the selection, acquisition, or use of an assistive technology device. The term includes: The evaluation of the needs of an individual with a disability; purchasing, leasing, or otherwise providing for the acquisition of assistive technology devices by individuals with disabilities; selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing, or replacing of assistive technology devices; coordinating and using other therapies, interventions, or services with assistive technology devices, such as those associated with existing education and rehabilitation plans and programs; training or technical assistance for an individual with disabilities, or, where appropriate, the family of an individual with disabilities; and training or technical assistance to professionals who employ or provide services involved in the major life functions of individuals with disabilities.

**13. Responsible HHS (Human Health Services) official** - The official who is authorized to make the grant of assistance in question or his or her designee.

**14. Special education** - Specially designed instruction, at no cost to parents or guardians, to meet the unique needs of a child with a disability. These services include classroom or home-based instruction, instruction in hospitals and institutions, and specially designed physical education if necessary.

### C. List of Disabling Conditions

The classification of a child as “having a disabling condition” requires diagnosis by a qualified professional. Children with disabling conditions require special education and related services, due to one or more conditions including, but not limited to:

- Autism
- Emotional /Behavior Disorder
- Developmental Delay
- Health Impairment
- Hearing Impairment and Deafness
- Intellectual Disability as of Oct. 2010 instead of Mental Retardation
- Learning Disabilities
- Orthopedic Impairment
- Speech/Language Impairment
- Traumatic Brain Injury
- Visual Impairment and Blindness
- Other impairments

No child will be identified as having a disability because of speaking a language other than English, economic circumstances, ethnic or cultural factors, or normal developmental delays.

#### D. Responsibilities of CSB Full Inclusion Teacher

- Work collaboratively with the Site Supervisor, Comprehensive Services team and school district full inclusion staff.
- Share joint responsibility for all students in the class with regard to the implementation of indoor and outdoor activities with the School District full inclusion teacher (Special Education Teacher)
- Obtain appropriate documentation (copy of IEP or IFSP) that identifies the child as having a disability and be aware of other services provided to the child.
- Complete child observations in the classroom.
- Ensure each child's safety and assist identified children with self-help skills while they are receiving services.
- Assist school district full inclusion staff with bathroom procedures including diapering and toileting.
- Participate in family meetings and IEP/IFS meetings regarding children in the class.

#### E. Responsibilities of School District Special Day Classroom (SDC), Response to Intervention (RTI) and Full Inclusion Teachers

School District and CSB Staff work in collaboration to ensure the children and families receive needed services while ensuring the education and safety of the children under their supervision.

##### 1. Full Inclusion Staff:

- Follow all Community Services Bureau policies and procedures.
- School District Inclusion Teacher (Special Education Teacher) and CSB inclusion teacher share joint responsibility for all students' supervision during small and large, indoor and outdoor activities. This includes assisting full inclusion children in bathroom procedures (including diapering and toileting).
- Provide special education services to identified children by ensuring the children's IEP goals are addressed, maintaining accurate records of evaluations documenting progress, and meeting with families.
- Follow CSB transition protocols
- Participate in team planning for classroom inclusion strategies, family meeting team meetings and IEP meetings.
- Participate in program collaboration meetings.
- Collaborates completing children's assessments

##### 2. Special Day Class Staff:

- Ensure the safety of the children under their direct supervision (SDC).
- Collaborate directly with the Comprehensive Services Team to ensure the family and children comply with CSB mandates.
- While in the playground, SDC teaching staff and CSB Teacher share joint responsibility for supervision of all students during small and large outdoor activities.
- SDC teachers are responsible for providing special education to identified children, ensuring the

children's IEP goals are addressed, maintaining accurate records of evaluations, documenting progress, and meeting with families.

- Follow CSB transition protocols
- Participate in family meetings, SDC program collaboration meetings and children IEP meetings.
- Participate in program collaboration meetings.

## **F. Responsibilities of the Comprehensive Services Team**

### **1. Comprehensive Services Clerks**

- Complete CSB temp files at intake.
- Flag files using the red/yellow flag system to alert the staff and assistant manager as to the child's health, nutrition, social-emotional and developmental needs to also include parental concerns and/or family needs.
- Communicate to comprehensive services assistant manager if child's physical exam/baby well check or sensory/developmental screening results indicate concerns.
- Keep accurate records of child health, nutrition and families services information.

### **2. Comprehensive Services Assistant Managers**

- Review all records relating to the child's health history, medical records and screening results to ensure children with suspected or identified concerns receive further evaluations and services.
- Carefully review and follow up on intake files flagged with the red/yellow system
- Facilitates family meetings as needed to provide early interventions to children with identified concerns based on health, nutrition, social-emotional and developmental screenings.
- Facilitates pre-enrollment family meeting for new children entering our program with identified health, nutritional, social-emotional and developmental needs.
- Maintain close communication with parents and staffs to ensure the delivery of services and resources/referrals are in place and in accordance with the individual needs of the child and the family.
- With parental consent participate in IEP/IFSP meetings and any other meetings related to the services the child/family are receiving.
- Reviews and discusses Parent's Rights and Responsibilities under the Individual with Disabilities Education Act IDEA
- Supports and provides Advocacy resources to parents.
- Maintain accurate and up-to-date documentation regarding current IEP/IFSP and other services provided to the child and family in the children's file and in CLOUDS.
- Coordinate, schedule and participate with the site supervisor in transition planning for children moving from Early Head Start to Head Start and from Head Start to kindergarten; especially for those children with IEP and IFSP.
- Coordinate and schedule transportation to facilitate the child/family participation in evaluations/assessments or the IEP/IFSP meeting. Assist families, as needed in finding public transportation so they are able to participate in meetings.

- Consult and maintain open communication with the disability services manager and other content area managers as needed.

### **3. Responsibilities of the Comprehensive Services Disabilities Manager**

- Coordinate and Monitor the delivery of services provided by Community Services Bureau in collaboration with outside agencies to children with suspected and diagnosed disabilities and their families.
- Review, update and implement the Community Services Bureau Disability Services Plan.
- Review, update and train Community Services Bureau staff on following disability protocols to ensure that policies and procedures are implemented consistently.
- Create, review, and update interagency agreements with community agencies serving children with disabilities in an effort to:
  - Participate in the public agency's Child Find plan under Part B of IDEA
  - Participate in or lead joint trainings for staff and parents
  - Create procedures for mutual referrals and placements
  - Plan for transitions to provide support for children and families
  - Share resources
- Coordinate delivery of services and provision to children with a suspected or diagnosed disability.
  - Coordinate with other content area managers the timely completion of health/cognitive screenings.
  - Monitor site data reports to ensure that children received early intervention as a result of their screening and assessments results.
  - Participate in family meetings, and IEP/IFSP meetings as needed.
  - Assist teaching staff with trainings based on a specific disability or as requested.
  - Monitor the implementation of services provided to children with disabilities based on their IEP or IFSP goals and objectives.
  - Monitor the disability referrals tracking system to ensure child referrals are followed up accordingly.
  - Coordinate and monitor classrooms adaptations, accommodations and modification based on the individual needs of the child.
  - Assist identified parents with resources and advocacy information to prepare for meetings with the Regional Center or School District to develop an Individual Family Services Plan (IFSP) or an Individual Education Program (IEP).
  - Regularly visit classrooms to ensure that children with suspected and identified disabilities receive the individualization and accommodation they need based on their IEP and their individual needs. Monitor the delivery of services from both Community Services Bureau and the collaborative agencies.
  - Monitor delivery of services to children with disabilities and their families when transitioning from home to center based program, from infant/toddler program (EHS) to Preschool Program (HS) and from Preschool Program (HS) to Kindergarten. Participate in transition plans and meetings as needed.
- Provide disability content area assistance, and support to upper management, teaching staff including home based and comprehensive services team.
- Monitor disability reports for accuracy and timely completion of delivery of services to comply with PIR (Program Information Report) requirements.
- Review Program Self-Assessment reports and create follow up action plans when needed.

- Manage allocated funds to purchase or lease of special equipment and materials for use in the program and home to assist the child to move, communicate, improve functioning or address objectives listed in the child's IEP/IFSP.
- Track and provide a detailed report to the Assistant Directors of the number of children enrolled in HS and EHS with disabilities, including the types of disabilities.

### **G. Documentation of Disabilities Services**

CSB must maintain a record of all services provided to children with disabilities and their families. Children's records are confidential and are maintained in locked files and password-protected in the CLOUDS data system. Data from these records are used to prepare the annual Program Information Report (PIR).

### **H. Postural Supports / Protective Devices**

Children needing protective, postural or medical devices due to a disability must have a written request from a physician or an IEP/IFSP Team indicating such need. The Comprehensive Services Disabilities Manager works with educational and health staff to ensure that children with disabilities use approved medical devices including, postural or supportive restraints that are in accordance with state requirements and have CSB approval.

The use of any medical appliances, devices or supportive restraints must be secure and able to be released in a way that is in compliance with fire clearance and earthquake safety.

CSB Teachers and Site Supervisors directly working with the children should be trained in the use and care of such devices prior to the child starting the program. The training should be documented in the family meeting notes with attached signatures of the trainer and trainees.

### **I. Disabilities Resources**

The Comprehensive Services Disabilities Manager works with the Special Education Local Plan Area (SELPA) and other collaborative agencies to utilize all available resources to ensure involvement of the child and family in the program. The Comprehensive Services Disabilities Manager is responsible for developing a coordinated plan with all agencies working with the child and family.

### **J. Additional Services**

Community Services Bureau must ensure that services for children with disabilities will be planned and delivered as required by their IEP/IFSP, that the IFSPs and IEPs are being reviewed and revised as required by IDEA and that the children are working towards their goals.

- CSB plans and implements the transition services for children with IEP/IFSP to ensure steps are undertaken in a timely and appropriate manner to support the child and family as they transition into a new setting.
- All components of the Community Services Bureau program are appropriately involved in the integration of children with disabilities and their parents.

The Community Services Bureau Disability Manager coordinates with other service managers the provisions for children with disabilities to be included in the full range of activities and services normally provided to all Head Start children and ensures provisions for any modifications necessary to meet the special needs of the children with disabilities.

#### **K. Disabilities Budget Coordination**

The Comprehensive Services Disabilities Manager is the designated liaison for special education services. Disabilities services outlined in the budget follow the regular budget procedure of parent and staff input with final approval.

#### **L. Special Education Budget Allocation**

The CSB program works within its budget to assist in providing needed services to children with disabilities. The program accesses all available sources to insure that all needs identified in the IEP or IFSP are met. This includes the local and state LEAs, SSI funding, other agency support, and local educational institutions. Every effort is made to utilize community resources to meet the needs of each child with disabilities enrolled in the program.

#### **M. Disabilities Screenings**

Parents complete a comprehensive health screening while completing the child's health history at the intake process. There after all preschool and infants and toddlers children including children with IEP/IFSP are screened within 45 days by the teaching staff in the areas of social and emotional development using ASQ-SE and cognitive development using ASQ-3 within 45 days.

The Comprehensive Services Team screens preschool children in hearing, vision, and nutrition, within 45 days of initial enrollment and for infant and toddler follow the vision and hearing assessments based on the EPSDT schedule. Comprehensive services staff completes the screening results form within 75 days and communicates results to parents. The screening results are used for beginning the individualization process for each child.

The Site Supervisors are responsible for working with the Teachers and Comprehensive Services Team to ensure that the ASQ-3 and ASQ-SE screening are completed within 45 days of child's entry. Teachers will give each child time to adjust to the new environment before completing the screenings. Lead teachers review and initial all education screenings to ensure they are accurately completed and meet required timelines.

Designated site staff enters the screening data in CLOUDS. The Teacher places original documents for Ages and Stages Questionire-3 (ASQ-3) and Ages and Stages Social Emotional (ASQSE) behavioral screening in the Education section of the family file. Children with screenings that show concerns will be rescreened within thirty days to ensure the validity of the original screening.

If concerns arise after developmental and social-emotional re-screening, the teacher will communicate with the Site Supervisor and Comprehensive Services Assistant Manager to discuss options for referring the child for further evaluation/s. If concerns arise after sensory re-screenings the Comprehensive Services staff will follow the same process.



## N. Evaluations

Children are recommended for further evaluation based on screening results, parent's concerns, based on staff observations and other professional recommendations. Referrals for further evaluations are discussed with the parent at a family meeting.

## O. Accessibility of Facilities

All Community Services Bureau facilities are ADA (American Disabilities Act) compliant. Additionally, CSB in conjunction with other agencies provides special furniture, equipment and materials in order to meet the individual needs of children with disabilities.

## P. Transitioning Children with Disabilities

### 1. IFSP Transition

- All infant toddler transition plans start when the child turns 30 months old. The Parent, Site Supervisor, Teacher and Comprehensive Service Assistant Manager meet together to plan the transition and complete the Infant Toddler Transition Plan Form (CSB 161). A plan is completed for all children transitioning out of EHS including children with a current IFSP.
- When a child with IFSP turns 30 months and no later than 90 days prior to their 3<sup>rd</sup> birthday the family and child will go through the IFSP Transition Process. This transitions initiated by the IFSP team and both parties the Early Intervention Program (Part C Services of IDEA) School District (Part B of IDEA) participate in this process. The IFSP transition meeting includes but is not limited to the Parent and any family member for support, the Early Intervention Provider, the School District Coordinator, the Special Education teacher, the Comprehensive Services Assistant Manager or Comprehensive Services Disabilities Manager, and the CSB Teacher or Home Educator. The team will create a transition plan; evaluate the child's strengths and areas of concerns, schedule further evaluation by the School District and a diagnosis meeting. Following the evaluations the child may or may not qualify for an IEP services under the School District and exit the Early Intervention Program (IFSP) the day before the child turns 3 yrs. old.

### 2. IEP Transition into a HS program

Another opportunity for transition begins when the child qualifies for an IEP and placement is available at a CSB site. When this occurs a family meeting conference is held to evaluate and plan how to best serve the child and how to support his/her learning based on the child's IEP goals. Evaluation of the classroom and outdoor environment will take place in an effort to identify needed accommodation including adaptive furniture or materials, modification of classroom schedules and routines to meet the individual needs of the child. This Transition Plan may include a gradual transition that involves both programs over a period of time. Any needed staff training will be provided as part of the plan.

### 3. IEP Transition out of HS program

For children transitioning out of the program into another program, the Teacher, Home Educator or Comprehensive Services Assistant Manager coordinates with parent and School District as to how to support the child's transition. The meeting is to explore possible placements for the child. Included in the meeting are the child's parent, School District Coordinator, Teacher or Home Educator, and other professionals providing services for the child and family. When the most appropriate placement for the child has been decided, the teacher and the family will initiate a meeting with the child's new Teacher. At that time, a plan for a gradual transition including visits to the new program and sharing information about the child and their individual plan takes place.

### Q. Transition Policy for Early Head Start Children Receiving Mental Health or Special Education Services

- For EHS children receiving mental health services, CSB must consider the children's disabilities in transitioning from the EHS program to the HS program. If an EHS child who is receiving mental health or special education services turns 3, the child must not automatically be terminated from the program. Transition planning must consider the child's individual developmental and emotional needs as well as age.

The following steps will be followed to support the child's transition:

- If a child is receiving mental health services from Community Services Bureau's Mental Health unit, a transition-planning meeting will take place approximately 6 months before the child's 3rd birthday to address the child's individual circumstances. The family, teachers, site supervisor, comprehensive services assistant manager and mental health clinician will participate in a family meeting.
- If it is determined that the child is developmentally and/or emotionally not ready to move into the HS program, the child can remain in the EHS program until such time when it is determined that the child is ready to transition to the HS classroom (Site Supervisor to Check on Center Based License Regulation to see if this is feasible.)
- If there is a time gap between the child's 3rd birthday and the beginning of the HS program, so as to ensure continuity in educational and mental health services, the child may remain in the EHS program until he/she can transition into the a HS classroom. (Site Supervisor to Check on Center Based License Regulation to see if this is feasible.)

### R. Special Education and Related Services

All infants/toddlers and preschool age children entering Community Services Bureau must have a well-child exam within 30 days of enrollment. Those preschool children who did not receive a hearing and vision screening as part of their well-child exam will be screened by in-house certified trainers within 45 days of enrollment.

Children identified with concerns are referred back to their physician for further evaluation or referred to a community agency for assessment. Children who qualify after assessment receive services from the

Special Education Local Plan Area (SELPA) or the Regional Center under an IEP or IFSP plan in accordance with our interagency agreement.

A mental health consultant is available to discuss behavioral/mental health concerns that the family, teacher or home visitor may have about a child. The consultant will share non-confidential information with the teacher/home educator and families, and work with them to develop a plan for the child.

When no other alternative is available, the comprehensive services team provides transportation for the guardians and child to obtain evaluations. When services are not provided on site, parents are assisted in finding public transportation to clinics or service providers.

Community Services Bureau works collaboratively with all other agencies involved with the child and the family to meet the objectives in the IEP or IFSP.

Community Services Bureau, subject to budgetary allowances, will purchase any assistive devices identified in the IEP or IFSP that cannot be funded through outside agencies.

Comprehensive Services staff forms collaborative partnerships with individual families to develop a Strength Building-Family Partnership Agreement (SB-FPA) twice a year. Comprehensive Services staff provides families with community resources such as, parent support groups, parent trainings, advocacy and child development among others to assist families to reach their SB-FPA goals.

### **S. Special Education Services with Other Agencies**

CSB refers children to the Local Education Agency (LEA) for further evaluation/s when there is strong documentation that early intervention is necessary now and we cannot prolong waiting for screening results. Such documentation may be based on parents, teachers and other professional's observations and recommendations.

Following the preschool age child assessment administered by the LEA an IEP meeting is held that includes the child's family, teacher or home educator and comprehensive services assistant manager, and the LEA representative. At this time, appropriate placement is determined and a service plan is developed for the child. For children who do not qualify for placement with the LEA, Community Services Bureau addresses the child's individual needs within the classroom or during a home based visit and seek guidance from Mental Health, other professional, including outside services, to determine if concerns will affect child's development and school readiness.

An IEP meeting is held to develop a plan and establish goals for children with disabilities transitioning in or out of the program. CSB and the LEA share resources as appropriate at this time. This resource sharing includes use of the classroom for any individual, family or group work that is necessary for the child's success. The LEA staff member also shares ideas and materials with the CSB teaching staff as applicable to foster attainment of IEP goals.

Children enrolled with a diagnosed disability and have a current IEP or IFSP, receive individualized education based on their unique needs. For center based care, if a child's IEP or IFSP indicates a part-time schedule, he/she may share an enrollment slot with another child. Children with shared placement in Community Services Bureau and outside agencies receive careful monitoring to ensure that the

program developed for them in each placement is meeting the needs of the children. Frequent communication among the service providers is necessary to ensure this. The family also plays a key role in assessing the success of the shared placement.

#### **T. Volunteers**

CSB welcomes community volunteers and student interns from colleges. Whether paid or volunteer, all staff working with children with disabilities, are provided training that includes specific identified topics relating to the unique needs of each child. General training topics also include working with children in group situations and respecting child/family confidentiality (Health Insurance Portability and Accountability Act - HIPAA regulations).

#### **U. Special Education Staff**

Community Services Bureau ensures that the Disabilities Services Plan addresses program efforts to meet state standards for personnel when serving children with disabilities. Special education and related services are provided by or under the supervision of personnel meeting state qualifications. All staff working with children with disabilities meets required state special education standards for personnel serving children with disabilities. Training and supervision that meet special education standards are developed in collaboration with Local Education Agencies.

#### **V. Interagency Agreements**

CSB maintains an interagency agreement with the Contra Costa County Special Education Local Plan Area (SELPA) and the Regional Center of the East Bay (RCEB) to establish shared guidelines for providing services to identify children with disabilities within the CSB program.

CSB participates in the Local Education Area (LEA) Child Find plan (Child Find is a component of the IDEA) by providing information on application and enrollment guidelines to the LEA and supporting them with the enrollment of eligible children.

#### **W. Recruitment and Enrollment**

All personnel responsible for the recruitment and enrollment of children are knowledgeable of all laws (Nondiscrimination on the Basis of Handicap in Programs and Activities Receiving or Benefiting from Federal Financial Assistance and of the American with Disabilities Acts) and Head Start mandates regarding children with disabilities.

Interagency agreements between Community Services Bureau, Local Education Agencies and Regional Centers are developed, maintained and updated annually to aid in the recruitment, enrollment and mainstreaming of children with disabilities. Referral sources are maintained, utilized and updated to provide needed services for children with disabilities. Special efforts are made to recruit children with severe disabilities.

All staff involved with the recruitment and enrollment of children with disabilities receives training on children's records as they apply to each child file.

Obstacles (including staff apprehensions, inaccessibility of facilities, provision of additional resources necessary for child's specific needs, unfamiliarity with a disabling condition or special equipment, and the need for personalized special services) are addressed through needed program adaptations and trainings and do not affect a child's enrollment.

Enrollment placement takes into account the number of children receiving services under the disabilities area, including types of disabilities, severity of the disability, and services and resources provided by other agencies. Resources and placement options are utilized according to a child's IEP or IFSP. Children with disabilities enrolled in Community Services Bureau programs follow the same eligibility enrollment procedures stated in the Community Services Bureau Policies and Procedures and comply with all licensing regulations for center based programs. Children with a current certified IEP or IFSP may have an over income waiver to qualify them for the HS/EHS program.

Families with children who have a current certified IEP or IFSP may qualify for an over income waiver to enroll in a HS or EHS program. At the same time families enrolled in double funded programs (State/Federal) may have a fee, based on the state portion of the program.

Children with a current certified IEP or IFSP, sharing blended state-federal funding, must comply with state requirements and provide CSB with a copy of the child's IEP or IFSP and the Exceptional Needs Verification Form (CSB625) completed in full.

The Comprehensive Services Disabilities Manager monitors the recruitment and enrollment of children with suspected disabilities and certified IEPs or IFSPs.

#### **X. American with Disabilities Act (ADA) Policy – Recruitment and Enrollment of Children with Disabilities**

The Americans with Disabilities Act (ADA) is a federal law, enacted in 1990, that provides child care professionals with an exciting opportunity to serve children with special needs or disabilities. The law guarantees that children with disabilities cannot be excluded from "public accommodations" simply because of a disability. CSB takes steps to ensure full ADA compliance; to identify the unique needs of each child and family; to facilitate the individualization process in collaboration with the family; and to make needed modifications in policies, practices and/or procedures as deemed reasonable.

During intake, the individual needs of each child and family are reviewed. Based on information presented at this time a child may or may not have a suspected or diagnosed disability. However, if determined that the child has a diagnosed disability (IEP/IFSP), the parents are required to provide such documentation for review.

The site team, with the appropriate comprehensive services manager will review the intake file to include if available IEP/IFSP documentation. After reviewing all documentation and as applicable a family meeting will be scheduled with the family and other related professionals to:

- Further identify child/family strengths and needs
- Define needed accommodations/adaptations
- Identify staff training needs and support
- Identify any additional action that may be needed

Following the family meeting in collaboration with the comprehensive services manager the site team will:

- Initiate an individualized assessment of the child's needs as applicable. The process for an individualized assessment will be determined on a case by case basis:
- The process for an individualized assessment will be defined on a case by case basis and may include:
  - Reviewing additional medical or special services, records/information.
  - Gathering the most current medical knowledge and/or best objective evidence regarding the disability.
  - Observation of the child in a natural environment or through parent/child site visitations.
  - Medical guidance obtained from Public Health Agencies, Center for Disease Control, National Institute of Health, including the National Institute of Mental Health, and other such agencies.

Based on the findings of the previous actions, a proposal of accommodations/modifications to allow for the child to participate in the program will be presented to a management team (Including the Assistant Director). The team will determine if identified modifications constitute reasonable accommodations or if CSB can demonstrate that making such modifications would:

- Create undue financial burden/hardship (all resources available for use in funding and program operation will be considered)
- Fundamentally alter the nature of the program (essential elements of program as well as essential elements necessary for participant will be considered)

The management team must also determine if the child's presence would pose a direct threat to the health and safety of the individual child or others (factors to consider include: nature, duration, and severity of risk; probability of occurrence of injury; whether reasonable modifications of policies, practices, or procedures will mitigate or eliminate risk).

The team will:

- Recommend enrolling the child in appropriate placement
- Or provide a written statement of the reasons for reaching the conclusion not to enroll the child based on criteria stated above.

### **Y. Assessment Process of Children with Disabilities**

The Comprehensive Services Disabilities Manager in collaboration with Health and Education Managers coordinate the completion of sensory and cognitive screening of all children within 45 days of enrollment.

The Comprehensive Services Assistant Managers evaluate the need for further specialized assessment after all standard screenings have been completed.

In a family meeting families are informed of screening results and are encouraged to sign a written consent for requesting further evaluations with an outside agency when appropriate.

The Comprehensive Services Assistant Managers refers children for further formal evaluations to the LEA (3 years to 5 years) or RECEB (new-born to 2.9 years) according to the established referral procedure. LEA agencies have 60 days to process referrals and develop an IEP upon receipt of the family intake file. RCEB has 45 days to process the referrals upon receipt of the family intake file.

The evaluation procedure is conducted with the following provisions:

- Parental consent prior to evaluations
- Parents informed of their rights and responsibilities under IDEA
- An evaluation conducted in a culturally sensitive manner by trained certified/licensed personnel that speak the child's home language.
- More than one criterion will be considered in determining an appropriate program placement.

A multi-disciplinary team including the child's teacher will conduct an evaluation utilizing assessment materials validated for the purpose.

### **Z. Eligibility Criteria: Health Impairment**

Children will not be discriminated against if they present any health impairments such as, cancer, severe asthma, uncontrolled seizures, neurological disorders, rheumatic fever, heart conditions, lead poisoning, diabetes, blood disorders, cystic fibrosis, heart diseases, ADD, AIDS and other medically fragile conditions.

CSB must ensure all individuals with disabilities are protected from discrimination under and provided with all services and program modifications required by section 504 of the Rehabilitation Act (29 U.S.C. 794), the Americans with Disabilities Act (42 U.S.C. 12101 et seq.), and their implementing regulations.

Children who meet specific criteria including level of functioning, age, onset of indicators and documented reports may be classified as having Health Impairment.

Children with suspected health impairments are referred for further evaluation. With the parent's consent, CSB teaching staff will provide documentation of behavior observations relevant to the impairment, to the appropriate professional for assessment. Upon receipt of a physician evaluation, a family meeting will take place to ensure that CSB can accommodate the individual needs of the child.

### **AA. Eligibility Criteria: Emotional / Behavioral Disorders**

The identification of children with emotional/behavioral disorders involves specific characteristics, the use of multiple sources of data such as child's health history, behavior screening results, teachers/parents observation notes, and the child's Head Start physical exam.

Children suspected of having an emotional/behavioral disorder are referred for further evaluation to appropriate community agencies to determine whether IEP services are appropriate. Upon receipt of a diagnosis, a family meeting will take place to ensure that CSB can accommodate the individual needs of the child in the classroom.

### **BB. Eligibility Criteria: Speech or Language Impairments**

All HS children are screened for speech and language delays, within 45 days of enrollment using ASQ-3. Infant/toddlers and preschool children with suspected speech/language delays are referred for further evaluation to RCEB or SELPA. If a determination is made for intervention or special education, an IEP or IFSP will be implemented through the outside agency (Regional Center or SELPAs). When referring children for assessments, careful consideration is given to cultural, ethnic and bilingual differences as well as temporary disorders and delays that fall within the normal range for the child's age. Upon receipt of evaluation and diagnosis, a family meeting will take place to ensure that CSB can accommodate the individual needs of the child in the classroom.

#### **CC. Eligibility Criteria: Intellectual Disability**

"Intellectual Disability" is the term in IDEA replacing Mental Retardation (Rosa's Law, 2010). After screening is completed children suspected of having any delays/deficits in adaptive behavior are referred for further evaluation to the LEA and/or physician and/or MH services. A family meeting will be scheduled upon receipt of the diagnosis to ensure proper placement and support is provided for the child.

#### **DD. Eligibility Criteria: Hearing Impairment**

All children are screened for hearing loss through the program or by their physician. Children needing further evaluation are referred back to their private physician and to the SELPA or to the Regional Center. Upon receipt of evaluation and diagnosis, a family meeting will take place to ensure the CSB can accommodate the individual needs of the child in the classroom.

#### **EE. Eligibility Criteria: Orthopedic Impairment, Visual Impairment / Blindness**

Children suspected of having an orthopedic impairment including but not limited to spinal bifida, cerebral palsy, loss of or deformed limbs, arthritis, or muscular dystrophy are referred to their pediatrician for further evaluation. Children requiring special services are referred to the SELPA or Regional Center and the California Children Services.

All children have vision screenings through the program or their physician. Children needing further evaluation are referred to their physician, an ophthalmologist and/or optometrist to determine whether the child is visually impaired.

Upon receipt of evaluation and diagnosis, a family meeting will take place to ensure that CSB can accommodate the individual needs of the child in the classroom.

#### **FF. Eligibility Criteria: Learning Disabilities**

All Head Start children are screened for possible learning disabilities. Children with suspected disabilities are referred to their physician and RCEB or SELPA as needed. Site Supervisors with the assistance of teaching staff provide classroom observations and child's work samples as needed to document the child's needs. Upon receipt of evaluation and diagnosis, a family meeting will take place to ensure that CSB can accommodate the individual needs of the child in the classroom.



### **GG. Eligibility Criteria: Autism, Traumatic Brain Injury, Other Impairments**

Children that present behaviors such as autism, traumatic brain injuries or other developmental impairments may qualify for services under the Regional Center of East Bay or Local Education Agency (LEA). CSB supports the early identification and intervention of children and following parental consent children are referred for further evaluation to outside agencies. Upon receipt of evaluation/diagnosis, a family meeting takes place to review the IEP/IFSP diagnosis. Based on IEP/IFSP goals and objectives, the best placement will be offered to support the child's enrollment in the HS program.

CSB must ensure all enrolled children are screened for autism at the ages 18 months and 24 months by their physicians based on EPSDT.

### **HH. Disabilities/Health Services Coordination**

The Comprehensive Services Disabilities Manager works closely with the Health Manager, CS Team and other staff in the screening, assessment process and follow-up to meet the needs of children with disabilities.

The Health and Disabilities Managers work together to ensure children's special needs are met and supervision of the administration of all prescriptions and over the counter medications occurs in accordance with state requirements. Children requiring medication must have the doctor's instructions and parental consent before the medication is administered. Individual records of all medications dispensed and a regular review with the child's parents occurs.

All medications are adequately labeled, locked and stored out of reach of children. Epi Pens labeled and accessible but out of children's reach. Individual medical plans are shared with the teaching staff and closely monitored for compliance. Any changes in a child's behavior related to a drug are shared with staff, parents and the physician. Pre-enrollment case management is encouraged to ensure CSB staff is aware of the individual needs of the child and accommodations can be made.

## **II. Developing Individualized Education Programs (IEPs)**

The School Districts provide families with advance written notification of IEP meetings. Family's participation in the IEP meeting are documented. Opportunities are provided for reviewing assessment results of the meetings and to request parent's input. Efforts are made to assure that families are knowledgeable about their parent's rights and responsibilities under IDEA and understand the purpose and proceedings of the child's program.

Head Start evaluates all pertinent information when determining eligibility and placement options of children with current s IEPs such as:

- Child's strengths and present level of functioning in all areas of development, strengths.
- Identification of challenges and needs in areas requiring specific services.
- Short and long term goals and objectives.
- Specific related services necessary for the child to participate in Head Start including those services provided by other LEAs and professionals.
- Personnel responsible for services provided, projected dates for initiation/duration of services and location of services.
- Evaluation procedures to determine the achievement of goals including family

- goals and objectives.
- Transition Plans
- Transportation if applicable

## JJ. Disability Referral Procedures

### 1. Description

The first five years of the children's life are times of rapid growth and learning. CSB provides rich learning and nurturing environment for them to grow and develop. Children develop at different rates and some may need extra support to reach their age appropriate milestones. The Community Services Bureau is committed to early identification of children at risk of developmental delays in order to provide the necessary early intervention that will lead to positive outcomes for the child.

### 2. Screening for suspected concerns

- i. Prior to enrollment and during the application period the child's file may be flagged using the Red and Yellow Flag System to alert the staff of known or suspected concerns based on the completed health history shared by the parent. The health history briefly screens children for possible health, nutrition, and socio-emotional and developmental risks.
- ii. Child's Physical Exams/Baby Well Checkups provide a great source of information and parents are responsible for submitting them to us within 30 days of enrollment thereafter as required by CHDP (Child Health and Disability Prevention.)
- iii. Sensory and developmental screenings and assessments are provided to all enrolled children within 45 days of enrollment.

Children determined to be in need of further evaluation/assessment based on screening results, staff observations, and/or parent observation are referred to the appropriate agency with parental consent.

### 3. Referral

The referral process is explained in detail to the parent during a family meeting. This meeting will take place in the parent's home language whenever possible. The CSAM will review agency referral protocols with the family including referral time lines, and requirements to complete the referral. CSAM will review with the family and provided copies of their Parent's Rights and Responsibilities under IDEA and advocacy resources.

Depending on the child's age Referrals could be sent to one of the agencies below:

- Regional Center/Early Intervention Agency (Children zero to two years "2.9 years")  
The process takes approximately 45 days from the date of referral.
- Local Education Agencies/Family Home School District (Children 3 to 5 years)  
The process takes approximately 60 days from the date of referral.

As part of a Family Meeting the parent is encouraged to sign the Child Referral and Parent Consent Form (CSB501); only after understanding the referral process and his/her parent rights under IDEA.

For Mental Health referrals, the medical provider information is completed on the referral form and a copy of the child's Medical card (if insured) is attached. When a child is on "Positive Guidance Policy Steps" and has a "Positive Guidance Plan", a copy of those documents (CSB521 & CSB134B), along with the child's Social-Emotional (ASQ-SE) and Developmental Screenings (ASQ-3) are included with the referral.

The Child Referral and Parent Consents Form (CSB 501), is reviewed to ensure the document is correctly filled out after acquiring parent signature. Additional signatures are obtained from the Site Supervisor and the Comprehensive Services Assistant Manager. A copy of this form (CSB501), is given to the parent, one to the assistant manager to process the referral and the original is placed in the file.

The Assistant Manager reviews the signed CSB501 form and processes it immediately. Once receipt of the referral is verified with the appropriate School District, Early Intervention Agency, or Mental Health Unit, the Assistant Manager completes the Response to Referral Form (CSB502).

The referral must be including:

- Child's Last and First name
- Child's birth date
- Gender
- Child's CLOUDS ID
- Child's center and Classroom #
- Current home address
- Family phone number#
- Parent's name
- Parent's language of preference
- Child's language of preference
- Medi-Cal or SSN # for Mental Health referral (No need of SSN or Medi-Cal for Disability referrals)
- Positive Guidance Plan and Positive Guidance Policy Step Letter if applicable
- Referral contact: CSAM's name and phone number
- Consents for exchange of information and assessment should be initialed by parent.
- Parent's signature
- Site Supervisor, CSAM or Home Based Teacher's signatures
- Parental check and initials for consent-referral and assessment
- Name/address of the agency referring to and providing consent for exchange of information
- If foster parent is requesting evaluations, CSAM must obtain the biological's parent consent. Or, request Social Worker consent signature

Agency to refer information:

- Determine Home School District for children 3 to 5 years old. Identify individual school referral requirements such as: Child's birth certificate, child's immunizations, copy of parent's ID, a copy of a utility bill and any other home addressed mail other than cell phone bill.
- Access RCEB or other intervention programs if the child is under 2 ½ years old.
- Fax signed form (CSB501) to outside agency and follow up with a confirmation phone call to ensure they have received the referral.

- Complete Response to Referral Form (CSB502)

The original Response to Referral form (CSB502) is placed in the child's file and a copy is given to the parent attached to any requested or additional relevant informational resources such as CARE Parent Network, IEP/IFSP program descriptions, advocacy resources, etc.

The CSAM enters the family meeting notes and intervention/referral information under the disability tab in CLOUDS (Intervention/Referral). A copy of the family meeting (CSB514) is placed in the child's file.

The CSAM will contact the family for a follow-up between 30 and 60 days after submitting the referral to ensure proper evaluation meetings are in place, proper support is given to the parent in preparation of the diagnosis meeting, and ensure participation in the IEP/IFSP meeting. Additional family meetings will follow as applicable.

#### **KK. Nutrition Services for Children with Disabilities**

The Comprehensive Services Disabilities Manager works with the Health Services Manager and the Nutritionist to ensure that provisions to meet the needs of each child are incorporated into the nutrition program.

Appropriate professionals are consulted to provide support for Head Start staff and families for children having severe disabilities and problems with eating.

Activities to help children with disabilities participate at mealtimes are implemented in the classroom after discussion in a family meeting.

Family meetings with CSB staff, other professionals and families are held to meet the nutritional needs of children with disabilities including the prevention of disabilities with a nutrition basis.

#### **LL. Parent Involvement in Transition Services for Children with Disabilities**

In an effort to support the transition of children with disabilities into CSB programs, or children transferring from one Community Services Bureau program to another, the parent will be asked to attend a family meeting (transition planning meeting) prior to enrollment or transfer. The focus of the meeting will be to:

- Review the IEP/IFSP goals and objectives as well as identify parent goals for child
- Determine the needs of the child
- Insure appropriate placement
- Plan program adaptations (if needed)
- Support family and foster team approach for service delivery
- Provide activities and information to the family to foster the child's development.
- Provide activities to the family to reinforce program activities at home.
- Provide family with resources such as Social Security (SSI), Early Periodic Screening Diagnosis and Treatment (EPSDT) programs and other community resources and assist them in accessing these resources.
- Provide family with information to prevent disabilities among younger siblings.

- Provide parent with information about their rights under the Individuals with Disabilities Act. (IDEA)
- Provide resources to family groups for children with similar disabilities who can provide peer and family support.

Comprehensive Services Team will support family through the children's transition from Early Head Start to Head Start or from Head Start to Kindergarten or to other agencies.

## **PART VII. Services to Pregnant Women Enrolled in the Program**

### **Enrolled Pregnant Women**

Staff addresses the needs for appropriate supports for emotional well-being, nurturing and responsive caregiving and father engagement during pregnancy and early childhood.

- 1. Health Care and Insurance** - Within 30 days of enrollment Comprehensive Services Staff determines the status of an ongoing source of continuous, accessible health care provided by a health professional that maintains ongoing health records and is not primarily a source of emergency or urgent care and health insurance for each enrolled pregnant woman. For those pregnant enrolled women, support is provided to gain access to health care and insurance as quickly as possible.
- 2. Family Partnership Services** - Comprehensive Services Staff engages enrolled pregnant women and other relevant family members such as fathers, in family partnership services focused on factors that influence prenatal and postpartum maternal and infant health. Staff provides support throughout the transition process with program options and transition to program enrollment, as appropriate.

Support Services Provided for Pregnant Women to Access Comprehensive Services through Referrals include:

- Assessment for nutritional status as well as nutrition counseling and food assistance, if necessary.
- Health/oral health promotion and treatment, including medical and dental exams, on a schedule deemed appropriate by attending health care providers as early in the pregnancy as possible.
- Mental health interventions and follow-up services
- Substance abuse prevention and treatment services as needed.
- Emergency shelter or transitional housing in cases of domestic violence.

Pre-natal and postpartum information, education and services are provided to pregnant women, fathers and other relevant family members on the following:

- fetal development
- the importance of nutrition
- risks of smoking, alcohol and drug use

- labor and delivery
- postpartum recovery
- parental depression
- infant care
- safe sleep practices
- the benefits of breastfeeding and accommodation of breastfeeding in the program

### Newborn Home Visit

Newborn visits are scheduled with each mother and baby within two weeks after the infant's birth to offer support and identify family needs.

Comprehensive Services Staff is responsible for ensuring compliance with the requirement for a Newborn Home Visit within two weeks after the infant's birth as follows:

- At enrollment - Educating each pregnant woman on the importance of the Newborn Home Visit and explaining the importance of agreeing to this visit when it is offered at the hospital following the birth of her child or when the Public Health Nurse calls to schedule the home visit.
- Prior to delivery due date - Reminding the parent of the Newborn Home Visit requirement.
- After delivery – Following up with mother to provide support as needed with scheduling or obtaining documentation of the Newborn Home Visit or following up with Public Health Nursing to ensure Newborn Home Visit or obtain documentation.
- Entering documentation of the Newborn Home Visit in the file and in CLOUDS.

## **PART VIII. Program Human Resources Management (Personnel Policies & Procedures)**

### **A. Statement of Purpose of Policies and Procedures**

These personnel policies are produced for the purpose of:

- Promoting an effective, efficient, and economic operation of programs;
- Providing fair and equal opportunity to all qualified individuals to enter employment with Employment and Human Services Department, Community Services Bureau (CSB) and assuring that employees are promoted or advanced under impartial procedures;
- Maintaining a program of recruitment and advancement which will provide career development opportunities;
- Maintaining a uniform plan of evaluation, duties and wages based upon the relative duties and responsibilities of positions in CSB;
- Employing persons who can perform their duties with competence and integrity.

### **B. Governing Board**

The ultimate authority to manage the Head Start and Early Head Start program is vested in the County

Board of Supervisors. According to Contra Costa County, Personnel Management Regulations, the Executive Director or Department has the authority to act on behalf of the County Board of Supervisors on certain personnel actions as stipulated throughout the regulations. All authority for day-to-day administration of CSB is delegated to the Community Services Director.

The Board of Supervisors, upon the recommendation of the Employment and Human Services Director, reserves the exclusive right to hire, evaluate, compensate or release the CSB Director (HS/EHS Director), Human Resources and Fiscal Officers. The Policy Council shall approve or disapprove in advance the hiring of the Community Services Director.

The Board of Supervisors delegates the authority of the Head Start and Early Head Start program to the Community Services Director or his/her designee, who is responsible for carrying out the policies, procedures, and intent of these policies to include power to employ, promote, assign duties and responsibilities, evaluate, train, reprimand, suspend, discharge, or reward employees within the guidelines of all applicable federal, state and local regulations.

CSB will observe standards of organization, management, and administration that will ensure, so far as reasonably possible, that all program activities are conducted in a manner consistent with the purpose of Head Start Performance Standards and the objective of providing assistance effectively, efficiently, and free of any taint of partisan political bias or person or family favoritism.

### C. Organizational Structure

This section contains policies governing the activities of all CSB employees. It is not intended to supersede the Memorandum of Understanding between Contra Costa County and Public Employees Union, Local One (MOUs), the Personnel Management Regulations (PMRs) or any other policies adopted by the County Board of Supervisors. It establishes standard procedures which are applicable to all programs operated by CSB, irrespective of funding source. Unless otherwise noted, all provisions of the manual apply to each and every employee of CSB. If the requirements of MOUs, PMRs, funding sources, and etcetera are less stringent than the provisions of this section, then these provisions will apply. If personnel provisions imposed by the MOUs, PMRs, funding source, et cetera conflicts with the provisions of these policies, then such regulations shall apply.

The Community Services Director or designee has the authority to identify and interpret regulations which conflict with these policies. Employees may not take it upon themselves to interpret regulations which may permit them or require them to behave in a manner which is inconsistent with the provisions of this policy. If doubt arises, employees must request their supervisors to secure a ruling from the Community Services Director or designee.

In addition to these policies, the MOUs, PMRs, management bulletins, memos, side letters, et cetera regarding personnel policies issued by the County and funding sources shall be considered a part of CSB's personnel policies and procedures whenever applicable. All personnel policies and practices contained herein are established in accordance with current applicable rules and regulations of CSB funding sources and other mandates. All CSB staff members are required to become thoroughly familiar with these policies and adhere to their provisions.

The Community Services Director and senior management are charged with the responsibility for assuring that all provisions of these policies are administered fairly and impartially.

According to Contra Costa County, Personnel Management Regulations, the Executive Director or Department Head has the authority to act on behalf of the County Board of Supervisors on Certain personnel actions as stipulated throughout the regulations.

#### **D. Additional Personnel Policies Relating to Employees of Program Services**

##### **1. Criminal Record Clearance (Background Check/Fingerprinting)**

###### **i. Live Scan (Fingerprinting) Process**

- According to the Head Start Act, 45 CFR 1304.3(a)(18) and California DSS, 101170(f), all employees/adults must be fingerprinted. Failure to obtain clearance free of an exemption or with an exemption and/or to comply with fingerprinting regulations will result in refusal of employment.
- Applicable employees must be fingerprinted and cleared before their first day of employment. CSB will not employ anyone without an active clearance with or without an appropriate exemption.
- CSB Personnel works with the County's Central Human Resources to schedule a Livescan appointment and provides the applicant with a Livescan form to take to their appointment.
- All CSB employees must obtain Federal Bureau of Investigation (FBI), Child Abuse index and California State Department of Justice clearance or appropriate exemption
  - After the Live Scan is completed, the Department of Social Services notifies the County's Central Human Resources (HR) of the results of the Livescan via a Department of Justice Letter of Criminal Record Clearance. Human Resources forward the letter to the CSB Personnel.
  - After receiving the Department of Justice (DOJ) Letter, CSB Personnel contacts the Community Care Licensing Office to verify the clearance and obtain a clearance number for the prospective employee.
    - If the candidate receives full clearance, CSB Personnel proceeds with the hiring/on-boarding process
    - In the case that a candidate is required to apply for exemption, CSB Personnel works with the candidate to complete the required documentation to apply for exemption. Only after CSB Personnel receives written notification from the Department of Social Services that the candidate is granted exemption to work in a childcare facility, the candidate is further advanced through the County's hiring/on-boarding process.
- The DOJ letter or Exemption Notification is kept in the candidate confidential Personnel File.

###### **ii. Re-checking Livescan Process**



- According to the Head Start Performance Standards 1302.90 (5) the program must conduct the complete background check for each employee, consultant, or contractor at least every five years, unless the program can demonstrate that it has a more stringent system in place that will ensure child safety.
- California Department of Social Services, Community Care Licensing Division automatically re-checks live scans continuously and notifies the program and the employee.
- Should a conviction or other charge occur while the employee is employed, CSB receives an “Immediate Action Required (IAR)” letter from the Department of Social Services Caregiver Background Check Bureau. In this case:
  - The Community Services Bureau Director determines the appropriate action to be taken based on the Child Care and Development Fund (CCDF) disqualification factors described in 42. U.S.C. 9858f(c)(1)(D) and 42 U.S.C. 9858f(h)(1).
  - If a manager receives an IAR letter, he/she is to notify CSB Personnel Unit immediately. If CSB Personnel Unit receives an IAR letter, they will notify the Manager, Site Supervisor and immediately have the employee removed from the facility. Disciplinary actions may be taken up to and including termination.
  - It is the responsibility of the employee to obtain a waiver form from DSS and submit the waiver. Any employee who obtains a waiver may apply for reinstatement and applications will be considered by personnel. If no waiver is obtained as requested by the Personnel Unit, the employee may be terminated from employment with Contra Costa County.
  - Declaration-The State requires that all current/prospective employees must sign a declaration, Criminal Record Statement prior to employment, which reveals any background information that might be detrimental to their employment with CSB. The declaration or Criminal Record statement must list:
    - All pending and prior criminal arrests / charges related to child sexual abuse and their disposition
    - Convictions related to other forms of child abuse / neglect
    - All convictions
  - The grantee must review each application for employment individually in order to assess the relevancy of an arrest, a pending criminal charge, or a conviction.
  - The declaration may exclude listing of:
    - Any offense, other than the ones related to child abuse and/or child sexual abuse or violent felonies, committed before the prospective employee’s 18th birthday which was adjudicated in a juvenile court or under a youth offender law
    - Any conviction the record of which has been expunged under Federal or State law
    - Any conviction set aside under the Federal Youth Corrections Act or similar State authority

### **iii. Requirements for Staff Providing Mental Health Services**

In addition to the above, for staff providing mental health services, such as the Mental Health Clinical

Supervisors and Mental Health Interns, CSB is required by the Department of Health Care Services (CCR, title 42, section 1128 or section 1128A of the Social Security Act and CFR, Title 42, section 438.214) to verify that at time of hire the Mental Health Supervisors and the Mental Health Interns meet the following:

- Are eligible to claim for and receive state and federal funds
- Have the required licensure that is current and valid
- Are not on the following individual/entities excluded provider lists:
  - [http://oig.hhs.gov/exclusions/exclusions\\_list.sp](http://oig.hhs.gov/exclusions/exclusions_list.sp)
  - <https://files.medi-cal.ca.gov/pubsdoco/SandLanding.asp>
- Thereafter, verification will be conducted on a monthly basis.

## **2. Emergency Procedures**

### **i. Chemical Accident**

In case of a shelter-in-place emergency, a manager will notify all affected sites. In this case, all employees are required to follow shelter-in-place protocols.

**SHELTER**—Go inside a building immediately to avoid exposure to airborne chemicals.

**SHUT**—Seal all doors and windows/turn off ventilation systems. (Locking doors and windows creates the best seal.) Parents must be informed during orientation that staff is not authorized to release children during a shelter-in-place accident.

**LISTEN**—Turn on the radio/listen for up-to-date information. Avoid using the telephone unless you have a life-threatening emergency. All sites must have a working radio available at all times.

### **ii. Earthquake Emergency**

Duck and cover under a table or desk, crouching on knees with face down and hand covering the back of the head.

- Stay clear of outer walls, windows, glass, cabinets, files, or shelves
- Evacuate the building to Assembly Area after counting 100.
- Avoid re-entry into the building.
- Allow the Building Warden to re-enter the building (searching for missing persons, assessing the extent of damage, turning off utilities as needed, and checking for gas leaks).
- Keep clear of overhead wires, poles, buildings, trees, and falling objects if outside.
- Prepare for aftershocks.

### **iii. Fire Emergency**

Notify the fire department immediately, giving required information:

- CSB building, room number, address, and other means of identifying location of the fire
- Description of size / type of fire
- Information regarding any injured people
- The name, telephone number, and extension of the employee reporting

- Evacuate all people from the fire area and close off the fire area using posted emergency routes.
- Report to Assembly Area (consult the Evacuation Plan)
- Use appropriate type of fire extinguisher. If smoke or heat endangers safety, evacuation of the area is required (to allow emergency personnel to handle the situation).

#### **iv. Medical Emergency**

- Provide appropriate first aid and/or cardiopulmonary resuscitation (CPR).
- Call the Fire Department if advanced first aid is required (911).
- Call an ambulance if appropriate (911).
- Send the injured to either the physical location of his or her choice or to the nearest medical emergency center or hospital. Notify the family of the injured.
- Report injuries to the appropriate supervisor and the designated CSB Personnel Analyst immediately. The supervisor is responsible for notifying Community Care Licensing via telephone within 24 hours and in writing within 7 days.
- If an injury results in death or hospitalization of an employee for over twenty-four hours, notify CSB Personnel and the Workers' Compensation/Safety Coordinator. She/he is responsible to inform the CCC Risk Management and the State Division of Occupational Safety and Health (CAL/OSHA).

### **3. Work-Related Injury and Illness**

All County employees who are injured or become ill as a result of their job are covered under workers' Compensation.

Workers' Compensation is a no-fault insurance plan paid for by the County and supervised by the State. It is a plan where fault does not have to be proven to receive medical expenses and lost wages. If an employee is unable to work because of a work-related injury or illness, (s)he is eligible for benefits. All benefits are determined by the California State Legislature.

#### **i. If an employee is injured or becomes ill as a result of her/his job, the following steps should be taken:**

- The employee must immediately notify her/his supervisor. All work-related injuries/illnesses, including first-aid, need to be reported.
- The supervisor must notify CSB Personnel (the designated Workers' Compensation/Safety Coordinator)
- The supervisor and the employee are to complete the required workers' compensation forms: CCC Supervisor's Occupational Injury or Illness Report Procedures (AK 30 –Part A & B), and Workers' Compensation Claim Form (DWC – 1), as soon as possible
- The supervisor is to submit the completed forms to CSB Personnel (CSB Workers' Compensation Coordinator) by the end of the business day of the injury/illness or by the end of the day (s)he became aware of the injury or the illness; The Supervisor is to fax the first white page of the DWC-1 and parts A & B of the AK-30, Supervisors Report, to the CSB Worker's Compensation/Safety Coordinator at Personnel on the day of the injury and to send the original paperwork via the Interoffice Mail.

- The CSB Workers' Compensation Safety Coordinator will submit the required documentation to CCC Risk Management Office. County policy requires the documentation to be submitted to Risk Management within 24 hours of the injury/illness
- Injured/ill employees are encouraged to seek immediate medical attention. The CSB Workers' Compensation/Safety Coordinator will provide information on medical facilities that can be visited in case of a work-related injury/illness
- The injured/ill employee may only return to work with a doctor's note stating that employee is cleared to return to work on that date. If the employee is placed on "Off Work" or any modified work status, (s)he must notify her/his supervisor and the CSB Workers' Compensation/Safety Coordinator about her/his status and fax/deliver the appropriate doctor's note to both parties
- Modified work will be assigned only by the CSB Workers' Compensation/Safety Coordinator in coordination with the employee's supervisor if accommodations are viable
- If an employee is ordered for follow-up doctor visits or therapy as a result of a job-related injury or illness, (s)he is required to attend all prescribed visits and furnish Work Status Reports to her/his supervisor and the CSB Workers' Compensation/Safety Coordinator after each visit
- Employees leaving work for appointments connected to work-related injuries/illness are to claim the time off as workers' compensation time (WC) on their time cards
- Doctor bills and hospital expenses related to on the job injuries or illness will be paid directly by the County. If an employee receives a bill that is related to a job-connected injury or illness, (s)he should notify the CSB Workers' Compensation/Safety Coordinator and should not pay the bill.

## ii. Return-To-Work Program

CSB participates in the Return-To-Work (RTW) Program. It is a plan utilized by Contra Costa County with the main objective to manage the employees' successful and timely return to work after a work related injury. The program facilitates the earliest possible return of an injured employee to meaningful, productive work within the parameters of her/his physical capabilities. If necessary, the program allows for temporary modifications to the employee's job description or position to accommodate the physical restrictions identified by the medical provider. Employees participating in the program are assigned transitional jobs. Two main transitional jobs are available for employees through the RTW program:

- Modified work within the employee's unit – this is usually for on-the-job injured employees who can perform their usual jobs full time or part time with significant accommodations
- Bridge Assignments – these are for employees who cannot perform their usual jobs, but can be assigned to other meaningful jobs. Usually, Bridge Assignments are much broader and employees assigned to them may be placed in any of the EHSD's Bureaus or even other County Departments.

Assigning employees to transitional jobs is facilitated by the CSB RTW Coordinator (Personnel) in collaboration with the employee's supervisor. While in the RTW program, each employee is required to furnish Personnel with Work Status reports after each visit with the Worker's Comp doctor.

Employees with work related injuries benefit from participating in the RTW Program by returning back to work quickly, by continuing to participate in meaningful jobs and maintaining their self-esteem, by the on-the-job hardening, and faster recovery.

#### **4. Ergonomic Safety and Evaluation**

All employees are expected to maintain their work environment and equipment safe and in good repair. Employees are to organize their work space considering basic ergonomic and safety practices such as, easy access/reach of desk equipment, appropriate lighting, use of appropriate equipment, avoidance of forceful lifting, pushing or pulling, prolonged repetitive motions. Employees performing mainly sitting jobs are encouraged to periodically change activities and positions, take small stretch breaks to reduce repeated stress to various parts of the body.

Employees who experience discomfort by using their work equipment or have doctor's recommendation for ergonomic evaluation are to notify their direct supervisor and request evaluation. The supervisor should contact CSB Personnel, the Workers' Compensation/Safety Coordinator and request ergonomic evaluation for the employee. The CSB Workers' Compensation/Safety Coordinator will review the request and arrange for the evaluation.

After the completion of the ergo evaluation, the employee and her/his supervisor will receive a copy of the evaluation report and an Ergonomic Equipment Acknowledgment Form. The employee is to review and keep the copy of the evaluation. Both the employee and the supervisor are to sign the Ergonomic Equipment Acknowledgment Form and return the original to the CSB Workers' Compensation/Safety Coordinator at the Personnel Unit for authorization of the recommended ergonomic equipment.

The CSB Workers' Compensation/Safety Coordinator will work with the CCC Ergo Lab to ensure the appropriate accommodations are made and that the employee is trained on ergonomic and safety practices. Ergonomic Equipment Acknowledgment forms sent by the employees directly to the CCC Ergo Lab without the authorization of the CSB Workers' Compensation/Safety Coordinator will not be accepted by the Ergo Lab and the requested equipment/accommodations will not be provided.

#### **5. Employee Relations**

As a part of a team providing services for the benefit of the public, each employee must cooperate with co-workers and supervisors and the public through professionalism and mutual respect in order to set a high standard of work performance. The entire staff of CSB must function as a team. Each employee is required to make a positive contribution in the interest of efficient public service.

Unwillingness or failure to cooperate will not be tolerated and will be cause for disciplinary action.

#### **6. Smoke-Free Environment**

CSB will create a smoke-free environment and eliminate exposure to tobacco smoke by children, staff, parents, and visitors in the Head Start program.

Under California labor code, it is unlawful for any individual to smoke tobacco products in an enclosed workplace.

Furthermore, in June 2014 the Contra Costa County Board of Supervisors adopted a Smoke-Free Contra Costa law which prohibits smoking, including use of medical marijuana and electronic smoking devices such as e-cigarettes. This law, which will be fully enforced on March 1, 2015, prohibits smoking as follows:

- In all buildings, vehicles, and other enclosed areas occupied by county employees, owned or leased by the county, or otherwise operated by the county.
- In all outdoor areas owned or leased by the county, including parking lots, the grounds of the county's hospital and health clinics, and the grounds of all other buildings owned or leased by the county.
- In personal vehicle, whether parked or in motion, if it is located on property owned by the county.

Employees leaving the County property to smoke or use electronic smoking devices, have to be mindful of their personal safety while off county property. Staff is encouraged to wear protective wear, such as a smoke or "smoking jacket" so that when they finish smoking, they can remove it so as to not carry the tobacco chemicals on their clothing into the classrooms or offices.

Adults are also prohibited from smoking during group socialization activities, such as field trips, neighborhood walks, and other outdoor activities. The only situation under which this does not apply is during a presentation or field trip related to American Indian cultural customs in which tobacco is utilized.

Educational and wellness activities, such as smoking cessation programs for adults and inclusion of developmentally appropriate activities in health education for children will be developed to assist in carrying out smoke-free policies. Staff and parents are encouraged to call the California Smokers Helpline at 1-800-NO-BUTTS (English speakers) or 1-800-No-Fume (Spanish speakers) or to visit <http://cchealth.org/tobacco/time-to-quit-smoking.php> for a list of local cessation resources. Additional information and resources are available by contacting the Comprehensive Services Unit's Health Services Manager.

## **7. Drug-Free Work Environment**

In Compliance with the Federal Drug-Free Workplace Act 1988, the Contra Costa County Board of supervisors instituted a Drug-Free Workplace Policy (Resolution No. 90/674 from October 16, 1990). The Board is committed to a Drug-Free Workplace because of the inherent dangers to employees who abuse drugs and/or alcohol. According to the Drug-Free Workplace Policy:

- The County prohibits the unlawful manufacture, distribution, dispensing, possession, or use of controlled substance in the workplace, and/or during work hours.
- Any violation of this policy may result in disciplinary action, up to and including termination, or when needed, mandatory participation of the employee in a drug-abuse assistance or rehabilitation program.
- Any employee convicted of any State or Federal criminal drug statute for a violation occurring in the County workplace or on County time, shall report the conviction to their supervisor, department manager or personnel officer no later than five (5) days after such conviction.

CSB strives to maintain a workplace that is reflective of the County Smoke-Free and Drug-Free Workplace Environment Policy. CSB employees are expected to conduct themselves responsibly. Upon report that an employee appears to be under the influence of alcohol or illegal drugs, the employee's supervisor must notify the Assistant Director or the Division Manager, or the Personnel Administrator.

One of these CSB Senior Managers and the employee's supervisor will immediately meet with the employee and determine if she/he is under the influence of alcohol or illegal drugs. If they determine that the employee is under the influence, the employee shall be instructed to immediately leave the workplace. An employee under the influence of alcohol or illegal drugs is to report back to work sober and clean of drugs at least one day after the incident. The employee has the option to claim unpaid time or to use her/his own accruals.

#### **8. Solicitation of Goods**

Contra Costa County prohibits the solicitation of goods on any County property. Goods for sale will not be accepted, bought, or sold at any Grantee office or CSB center. This applies to commercial activities only. This does not apply to parent fundraising. Parent fundraising activities are reviewed and approved by the Policy Council and the Bureau Director.

#### **9. CSB Telephone Usage Policy**

There may be times when personal telephone calls must be made or received during working hours. Personal telephone calls must be kept to a minimum, and may not interfere with classroom or business activities. CSB expects employees to make these calls during break or lunch periods. No long distance calls can be made on CSB telephones. Personal cellular phone usage is prohibited in the classroom and business offices at all times.

#### **10. Food in the Classroom**

Food for individual staff consumption is not allowed in the classroom unless the staff member is eating a CSB provided meal or snack with the children. Any other food and drink must be consumed by the staff member during their break or lunchtime, away from the classroom and children.

### **E. Analysis of Staff Needs**

The needs of individual staff members for assistance and training, as well as the training tools are analyzed regularly to ensure optimal performance and efficiency of services. The Community Services Director or designee assesses staff needs by considering levels of responsibility, experience, performance of assigned tasks, and other relevant factors. On the basis of such assessment, the Community Services Director or designee determines the delivery of needed assistance after considering funding limitations. Assessment of staff needs is performed annually or as needed.

Self-reflection is also a support strategy used to assess staff strengths and needs. Teachers will utilize the Early Childhood Teacher Self-Reflection Tool at least annually and throughout the year, as desired. Upon completion, teachers can continue to reflect on their own thoughts and teaching practices to support the classroom. In the fall, teachers will update and refresh their own self-reflection tool and

share their reflection tool with their supervisor so that s/he is able to support desired areas of growth and development.

CSB also recognizes that building positive employee morale leads to staff feeling motivated, encouraged, and appreciated. To maintain high morale, CSB will recognize and appreciate staff efforts through various wellness initiatives. Employee health and wellness is a CSB priority and recognition expenditures will directly relate to building a wellness culture that promotes staff well-being and personal effectiveness.

## F. Recruitment and Selection

It is the policy of CSB to employ qualified, capable, and responsible personnel who are of good character and reputation. Consideration will be given to provide employment opportunities to current and former Head Start and Early Head Start parents. CSB will follow the guidelines for recruitment as required by the MOUs, PMRs, Management Bulletins and other provisions established by the County and funding sources. CSB shall make certain that its recruiting procedures afford adequate opportunity for the hiring and career advancement of its parents and staff. The attainment of a high level of education may be important to performance in certain positions; however, formal educational qualifications, unless required by state, local or federal law, where practical, shall be made discretionary rather than required for employment and advancement. Head Start staff will be required to meet the educational requirement as established in the Head Start Act and/or Head Start Performance Standards.

Parent Participation in Staff Recruitment/Screening:

CSB has a comprehensive approach with regard to parent participation in the recruitment and screening of HS/EHS program employees. (HSPS1301.4 (b)(3))

- Annually, CSB families complete a Parent Interest Survey (CSB300 Form), a question in the survey asks and identifies parent interest in being part of the screening/interviewing process for new hires. Results from the Parent Interest Survey are tallied and the PFCE clerk provides personnel with a list of interested parents. The Personnel unit is responsible for contacting parents to request their participation as recruitment and screening opportunities become available.
- To support recruitment:
  - During Policy Council Meetings, parents are informed of open positions within the program. Informational flyers are also made available to be shared at site Parent Committee Meeting and with the community.
  - At the site level, AD's inform staff of open positions during their monthly Cluster Meetings. Flyers with information about individual open positions are shared and posted on site Parent Boards with extra copies accessible for dissemination.
  - CSB Family Newsletters, a triannual publication, advertises CSB employment opportunities.
  - CSB Friday Flyers, a semi-monthly resource publication for families includes CSB employment opportunities.



## G. Hiring of CSB Staff

A position will be following steps outlined below:

- Following the approved Contra Costa County Personnel Management Regulations, the Personnel Unit will work with the County Human Resources Department, as required, to publicly announce a position for employment.
- Upon receipt of applications, the Human Resources Department or designee will screen the applications to ensure that applicants meet the minimum requirements for filling the position.
- The Human Resources Department shall designate selection procedures that may be written tests, oral tests, physical agility tests, assessment centers, training and experience evaluations or other selection procedures, or any combination of these. Selection procedures shall be practical and job related, constructed to sample the knowledge, skills, abilities and/or personal attributes required for successful job performance.
- When, after public announcement, the number of accepted candidates is equal to or less than the number necessary for a full certification, after consulting with the Community Services Director, the Personnel Unit may waive competitive testing and certify the applicants without rank or score. Under these circumstances, the Community Services Director will appoint a Qualifications Appraisal Board within the Community Services Bureau to conduct oral interviews of the applicants.
- In examinations where an oral interview is to be conducted as part of the total examination, the Personnel Unit shall appoint two or more qualified staff, to conduct oral interviews.
- Whenever final interviews are conducted to fill key management positions such as Executive Director, Head Start or Early Head Start Director, Chief Fiscal Officer, Personnel Director or any other equivalent position within the Community Services Bureau, in addition to the appointed subject matter experts, the Policy Council Chair/Vice Chair will be included in the panel conducting the interview/s.
- After completion of the examination process, the Personnel Unit will certify to the Bureau Director in rank order, according to the overall scores in the examination process, the names, addresses and phone numbers of the persons entitled to certification.
- CSB Personnel will coordinate the Hiring Manager to identify an interviewing panel consisting of managers and supervisors with expertise in the content area of the position needed to be filled. The panel should include minimum of two managers or supervisors and a parent always when possible.
- The designated interview panel will interview the prospective employee to determine:
  - If the individual will be able to work with staff in a cooperative, team-like manner;
  - The individual's commitment to low income families and the community;
  - The experience the individual has working with or the understanding the individual has of culturally diverse groups;
  - Personal characteristics such as warmth, strength, flexibility, understanding, empathy, ability to respond quickly under stress;
  - The ability of the individual to work within systems;
  - The individual's respect for authority and ability to work under supervision; and
  - Any other special skills such as speaking, reading, or writing in other languages.

- A second interview may be conducted in some cases with the purpose of determining the candidate/s suitability to the agency and the particular job. The interview should be conducted by a panel of at least two interviews. No interviewer should be conducting an interview by him/herself. This interview, although set up with CSB Personnel assistance, can be informal without the usage of a structured interview questionnaire.
- After the interview, the Personnel Unit will conduct personal and employment reference checks on all potential new hires and will submit a reference report for review along with recommendations to the Hiring Manager and Community Services Director or designee for employment in the position being considered.
- The name and qualifications of the candidate/s will be considered for approval by the Hiring Manager and the Community Services Director. Only after the candidate has been approved for employment may the candidate be officially employed and report for work.
- In case of hiring a new Head Start Director, a Chief Fiscal Officer, or a Personnel Director, the candidate/s will be presented for approval by the Policy Council.
- Policy Council will be informed of all new hires during the monthly Policy Council meetings.
- All newly hired employees will serve a probationary period as outlined in Section 9 of the Personnel Management Regulations and the appropriate Section of the applicable Memorandum of Understanding between Contra Costa County and Public Employees Union, Local One.

#### H. Reject from Probation

When an employee is being separated from employment while on probation, the employee's supervisor and/or a CSB Personnel Analyst will notify the employee and at that time shall ask for any keys and/or employee badges they may have to the facility.

#### I. 9/80 Work Schedule

A 9/80 work schedule has been established for a period determined by the Community Services Bureau Director. The schedule is available for Senior Management and some management and middle management classifications. There may be some job functions or classifications that are not feasible for participation in the 9/80 schedule. Additionally, probationary employees are not eligible for a 9/80 schedule until successfully completing their probationary period. Furthermore, temporary employees are excluded from the 9/80 work schedule. The Director of Community Services Bureau has the authority to determine the exclusion or the participation of particular jobs or classifications in the 9/80 shift.

The 9/80 schedule is voluntary. An employee who participates in the 9/80 schedule is not obligated to maintain it except for a two-week cycle from the beginning of the 9/80 shift. If an employee opts out of the schedule, she/he may opt back in once in the following three-month period. Work expectations do not change as a result of an employee's participation in a 9/80 schedule. If her/his performance deteriorates due to participation in the 9/80 schedule, the employee may be returned to a regular schedule. This action requires the approval of the Community Services Director or designee.

Employees requesting participation in the 9/80 work schedule should complete a Participation Request form that can be obtained from CSB Personnel Unit. The employees are to submit the completed form to their supervisor. Approval is granted by the Community Services Director or designee with

consideration for adequate coverage of the Department and the individual units. A copy of the approved request should be submitted to the Fiscal unit and to CSB Personnel to be filed in the employee's personnel file.

Employees participating in a 9/80 schedule must take a day off during the two-week pay period. During the period, the employees work one 8-hour day and 9 hours each day thereafter. The total work hours for the pay period should equal 80. If a holiday falls on the employee's day off, the employee should take her/his 9/80 day within the pay period before or after the holiday. If a holiday falls on a work day, the employee must use 1 hour accruals to make the required 9-hour work day since a holiday is 8 hours.

#### 9/80 Work Schedule for Employees Temporary Disabled Due to Industrial Injury

In accordance with the Memorandum of the Office of the County Administrator, dated November 23, 2009, and the Contra Costa County's Return to Work Policy for Industrial Injury or Illness, Section VI, A. Restrictive Duty, the 9/80 or flexible work schedule for every employee who has sustained industrial injuries, who has an accepted worker's compensation claim and is temporarily disabled from working full time will be temporarily revoked. Upon release to full time work by the treating physician and only if the employee is able to work more than 8 hours per day, the 9/80 or flexible schedule may be resumed.

### J. Separation

Employees are dismissed, suspended, and demoted in accordance with Contra Costa County, Personnel Management Regulations Part 11, Separation and Memorandum of Understanding between Contra Costa County and the Labor Unions.

### K. Resignation

A resignation letter from the employee shall be made in writing and submitted to the employee's immediate supervisor and/or Assistant Director. The original letter should be sent to Personnel Unit.

### L. Nepotism

No immediate family member of a supervisor shall work directly under his/her supervision. Immediate family member shall be defined as person's parent/s, grandparent/s, siblings, spouse, in-laws, natural child, stepchild, foster child, child in employee's custody, legally adopted child, legal guardianship, foreign adoption, tribal adoption, disabled adult child, domestic partner, child of domestic partner, and children's spouses.

### M. Enrolled Children of CSB Employees

To maintain an equitable educational environment at our child care centers, CSB requires that an enrolled child of a CSB employee or immediate family member be placed at facility that is different from the employee or immediate family member's worksite, with the exception of AD approval under extenuating circumstances. In NO case will an employee's child be placed in the employee's or immediate family members classroom. CSB employees' children may be enrolled in the program only if eligible.

#### **N. Staff Qualifications – General**

All site-based staff must meet the minimum qualifications of the State Department of Education matrix and the Early Head Start and Head Start staff qualification requirements as stated in Sections 645(A) and 648(A) & (B) of the 2007 Head Start Act and Section 1302.91 of the Head Start Performance Standards. This includes Assistant Directors, Site Supervisors, Infant/Toddler Master Teachers, Master Teachers, Infant/Toddler Teachers, Teachers, Infant/Toddler Associate Teachers, and Associate Teachers. It is the employee's responsibility to maintain and provide to Personnel and their Site Supervisor a current Permit or Temporary Certificate issued by the Office of Education and to meet the Head Start and Early Head Start staff qualification requirements by the established timelines.

Services for families enrolled in the home-based program option are provided by Early Childhood Educators. These employees must meet the education qualification requirements established in Section 1302.91(e)(6) of the Head Start Performance Standards, demonstrate competency to implement home visiting curriculum, promote the progress of all children, including dual language learners and children with disabilities, and build respectful, culturally responsive, and trusting relationship with families.

Family services staff work directly with families on the family partnership process. Staff hired after November 7, 2016 must, within 18 months of hire, obtain at a minimum a credential or certification in social work, human services, family services, counseling or a related field.

In addition, all staff must meet the minimum qualifications as stated in the Community Services Bureau Job Descriptions and as set forth by state and federal regulations. Should an employee fail to meet the minimum qualification of his or her job while employed with Contra Costa County, he or she will be dismissed as stipulated in the Personnel Management Regulations, Part 1108 and the Public Employees Union, Local One MOU, Section 24.2.

#### **O. Qualification Requirements for Positions**

Minimum qualification requirements reflecting the California Department of Education, the Head Start Act and Section 1302.91 of the Head Start Performance Standards qualification guidelines are set for all Contra Costa County Community Services Bureau positions.

The Personnel Director, in conjunction with the Assistant Directors and/or other subject matter experts, drafts minimum qualification requirements for certain positions. These are received by Division Managers for input and review.

Where minimum qualification requirements affect health, education, food service, or other component positions, the draft is received by the appropriate committee for input and review.

The draft is then submitted to the Community Services Director for review and approval. After Community Services Director's approval, the draft is sent to the CSB Personnel Unit for further processing.

Managers receive copies of job descriptions and qualifications adopted by Human Resources. Preference will be given to former and current parents who meet the qualifications as set forth in the job descriptions.

All staff must be able to perform the Essential Functions as set forth by the Bureau at all times (please refer to Essential Functions documentation). If staff is unable to perform the functions at any time during employment, the Bureau will try to accommodate needs; however, there are some instances where this may not be possible.

New Hires: Before a new employee / volunteer who will work directly with the families and children begin work, (s)he must have completed the following:

- Complete health screening by a physician including a tuberculosis test (prior to employment) or a written statement from a doctor stating a TB test is not required.
- Provide verification of required vaccinations for Measles and Pertussis or waiver of such vaccination/s as required by Community Services Bureau Vaccination policy as per SB 792(for staff working in child care centers).
- Fingerprint / criminal record clearance without any exemptions.

## **P. Classroom Staffing and Ratios and Comprehensive Services Staffing**

### **1. Classroom Staffing and Ratios**

Each classroom maintains the adult/child ratios required by Title V: For children ages 3-5, 1:8; for toddlers, 1:4; for infants 1:3. Children under three years of age may not be in groups with more than eight children. Each full-day pre-school classroom is staffed with a qualified Teacher and 2 Associate Teachers. If this is not possible, an Associate Teacher may be substituted for a Teacher and a Teacher Assistant Trainee for an Associate. Each part-day pre-school classroom is staffed with two Teachers and Teacher Assistant Trainees.

CSB center classrooms will have no more than 20 children enrolled at any time, except in State Preschool classrooms where there may be 24 children enrolled at one time and in Head Start classrooms with an approved 24-waiver from the Administration for Children and Families (ACF).

The Supervisor must ensure that adult/child ratios are maintained at all times. If a staff member is absent, the Site Supervisor must do the following:

- Assess the staffing needs of the classroom based on the number of children present and the staff/child ratios in other classrooms at the site.
- Request the services of a parent volunteer.
- If a substitute is needed, the Supervisor must contact the clerk who coordinates the substitutes. All staff inside the classroom and outside in the yard are responsible to ensure that all children are visible at all times and that they are being supervised at every moment.
- Whenever the classroom is outside on the yard or on a field trip, all members of the teaching team must be present to ensure the health and safety of children. No scheduled prep time or breaks are permitted during times scheduled outside of the classroom.

Teaching staff supervise infants and toddlers/twos by sight and sound at all times. When infants and toddlers/twos are sleeping, mirrors, video or sound monitors may be used to augment supervision in sleeping areas, but such monitors may not be relied on in lieu of direct visual and auditory supervision. Sides of cribs are checked to ensure that they are up and locked.

Teaching staff and volunteers are aware of, and positioned so they can hear and see any sleeping children for whom they are responsible, especially when they are actively engaged with children who are awake.

CSB management ensures that the staff reflects the cultures and languages of the children and families served in the program whenever possible. If this is not possible, the Supervisor must contact the main office to obtain the services of a translator in order to communicate with families.

## **2. Comprehensive Services**

The program is supported at all times by the following personnel:

- A health services content area expert who is trained and experienced in public health, nursing, health education, maternal and child health, or health administration.
- An education and curriculum services content area expert who is trained and experienced in early childhood education and development, classroom observation and monitoring, and coaching/mentoring.
- A nutrition services content area expert who is a registered dietitian or nutritionist.
- A mental health services content area expert who is a licensed or certified mental health professional with experience and expertise in serving young children and their families.
- A family and community partnership or parent involvement content area expert who is trained and experienced in field(s) related to social, human, or family services and who is skilled in assisting parents of young children in advocating and decision-making for their families.
- A disabilities services content area expert who is trained and experienced in securing and individualizing needed services for children with disabilities.

When a health procedure must only be provided by a licensed or certified health professional, the agency will ensure that this requirement is met.

## **Q. Site Administration**

Each site that receives State Department of Education funding must have a full time Site Supervisor housed in the building. For sites with more than nine classrooms, an additional Site Supervisor will be housed at the building. This Supervisor may be counted in the ratio if working directly with the children. Sites with infant/toddler care must have a Site Supervisor who, in addition to the regular qualifications, has completed 3 units of Infant and Toddler Care.

As an entity operating child care and development programs, providing direct services to children at two or more sites, CSB shall employ Assistant Directors that meet the minimum qualifications of a Program Director as outlined in the State Department of Education matrix.

### R. Teacher Assistant Trainees (TATs)

CSB employs Teacher Assistant Trainees (TATs) who have no less than 12 Early Child Education units from an accredited college. The following applies for all teaching staff with less than 12 units in Early Childhood Education courses:

- The TAT must be at least 18 years of age
- If the TAT has enrolled in or completed at least 6 units in Early Childhood Education, (s)he may supervise children at nap time and escort children to the bathroom without the direct supervision of a Teacher/Associate.
- The TAT will support the classroom needs under the supervision of the Lead Teacher

In order to support the professional development and career advancement of TATs, CSB will provide a select number, based on funding and availability, of TATs the opportunity to participate in the ECE Work Study Program, as outlined in Section 2.VIII.EE.vii

### S. Volunteers

CSB encourages volunteers from the community whenever possible. Each year, program staff recruits volunteers through flyers and other announcements. Before a volunteer begins in the program, (s)he must be approved by the CSB Manager responsible for volunteer coordination. This ensures that the volunteer has fulfilled the necessary requirements prior to being given an assignment. All potential volunteers must complete a Volunteer Application. If the volunteer works more than sixteen (16) hours at one facility s/he must obtain fingerprint clearance. All volunteers, regardless of the number of hours they are planning to work, must submit a statement of good health. The statement could be issued by a doctor, a medical professional or be a self-disclosure signed by the volunteer. Each volunteer must undergo a TB risk assessment and if at risk submit a negative TB test result, as well as provide verification of measles, pertussis and influenza immunizations as outlined in California Community Care Licensing and Health and Safety Code 1596.7995 at their own cost prior to volunteering. The statement of good health, the TB and immunization result should be provided to the manager overseeing volunteer coordination and kept on file by the Site Supervisor. As outlined in California DSS section 101170(b), certain volunteers may be exempt from the requirement to submit fingerprints and or immunization verification.

Once fingerprint, criminal background clearance, immunization verification/s and TB clearance is received, the volunteer coordinator will contact site supervisors to see if there is an appropriate volunteer opportunity at their site. The volunteer coordinator will forward all paperwork to the site supervisor for their Licensing and Health file. The Site Supervisor or designee will review the Volunteer Policy with the volunteer and have him/her sign the Standards of Conduct, Certification Statement and all other Licensing forms. Only then will CSB make the final volunteering assignment which includes: start date, end date, and number of days and hours per week. The volunteer enters hours worked daily on an in-kind form for the whole month. At the end of the month, the volunteer submits the completed in-kind reporting form to the assigned volunteer supervisor to have them sign their approval and to make a copy of form for the volunteer. The volunteer's supervisor or designee submits the in-kind records monthly to the cluster clerk for entry into the In-Kind Log in the shared drive.

## T. Standards of Conduct

CSB ensures that all staff, consultants, and volunteers will observe the program's Standards of Conduct. All employees must sign the Standards of Conduct annually and the original will be maintained in their personnel file.

Every employee, consultant and volunteer involved in the Program, must subscribe to the following:

- Respect and promote the unique identity of each child/family.
- Refrain from stereotyping on the basis of gender, race, ethnicity, culture, religion, disability, Sexual orientation, or family composition.
- Follow program confidentiality policies concerning information about children, families, and other staff members.
- Never leave a child alone/unsupervised while under their care.
- Use positive methods of child guidance.
- Never engage in corporal punishment, emotional/physical abuse, rejection, extended ignoring, humiliation, intimidation, ridicule, coercion or threats.
- Never use any form of verbal abuse, including profane, sarcastic language, threats, or derogatory remarks about the child and/or about his/her family.
- Never prohibit a child from attending religious services outside the agency.
- Never use methods of discipline that involve:
  - Isolation
  - Binding or tying a child to restrict movement or taping a child's mouth.
  - The use of physical activity or outdoor times as a punishment or reward
  - The use of food as punishment or reward
  - The denial of basic needs
- Provide a safe, healthy and accommodating environment that meets the children's needs.

Each employee, consultant, contractor, and volunteer must comply with program confidentiality policies concerning personally identifiable information about children, families, and other staff members.

Every employee engaged in the award/administration of contracts or other financial awards will sign a statement to the effect that they will not solicit or accept personal gratuities, favors, or anything of significant monetary value from contractors or potential contractors. Additionally, employees will not engage in any form of picketing, protest, or other direct action that is in violation of law and must comply with Contra Costa County Administrative Bulletin 405.4.

If a staff member, consultant, contractor, or volunteer violates any of the above Standards of Conduct, the following disciplinary steps may be followed:

- Conference(s) with the individual's supervisor to discuss implications of their behavior, and corrective action plans.
- Further training for the individual may be provided.
- A letter of Coaching and Counseling may be sent to the individual, detailing the seriousness of their violation(s) of the Standards of Conduct.
- If the letter of Coaching and Counseling is ignored, the employee may receive further disciplinary action.



- If the behavior of the individual does not change, disciplinary measures may be applied, such as Letter of Reprimand, suspension, and/or termination of employment. In some cases, termination may be the first discipline.

## U. Professional Behavior and Attire

### 1. CSB Standards of Professional Behavior

As representatives of County government, it is important that staff adhere to high standards of professional behavior at all times. Public and client perceptions of our staff and services can be significantly affected by a single negative interaction with any employee in our department.

As professionals, staff members need to refrain from excessively negative behavior in all interactions with their colleagues, in meetings and training sessions, with clients, or the public. Such behavior can over time create a hostile work environment, be experienced as harassment, interfere with client access to services, or violate client rights.

Examples of excessively negative behavior can include: rudeness, being overly brusque and impatient, showing contempt for others, being excessively critical and fault-finding, demeaning and sarcastic, disrespectful, slamming doors or files, raised voices, use of profanities, sexual and national origin harassment and discrimination, There may also be other behaviors that create a hostile or extremely unpleasant environment for staff or clients.

Staff who engages in such behaviors will receive counseling and coaching from their supervisors. Continued engagement in unprofessional behavior after counseling and coaching has been provided may result in disciplinary action.

To ensure the health and safety of enrolled children and to foster professionalism at our child care centers and offices, staff is expected to adhere to the following dress code.

Staff at child care centers, whether direct caregivers or support staff, must wear clean, neat, comfortable clothing and footwear suitable for the daily tasks of significant bending, walking, lifting, sitting and running. Central Kitchen staff must adhere to policies that specifically pertain to hygiene and attire.

### 2. CSB Standards for Appropriate Attire

- Shoes: heel height to a maximum of 1 inch, closed toe and heel required
- Shorts: must reach the knee, transparent fabric is unacceptable.
- Tops: prohibited are tops that expose the midriff, low cut necklines, backless, strapless, halter or tube tops, spaghetti straps, or any transparent material.
- Skirts/dresses: hem must be knee length or longer; fabric may not be transparent.
- Pants: hems of pants cannot drag on the floor, and waistband may hit no lower than the top of the hip. Transparent fabric is unacceptable.
- Jewelry: Earrings must be shorter than 1 inch from lobe, rings no higher than ¼ inch from shank. Any jewelry that may pose a hazard to children or staff may not be worn to work.
- Any articles of clothing with statements deemed by CSB to be political, offensive, or inappropriate are prohibited. The display of 'gang colors' is prohibited.

- Administrative staff shall dress in a manner that reflects a positive public image. In general, appropriate business attire will include well maintained clothing, as described above. 'Casual Friday' attire is acceptable, but must incorporate the above standards. Administrative staff may wear blue jeans on Casual Friday but may not be worn with sneakers, thong shoes, or T-shirts.

#### V. Non-Discrimination and Anti-Harassment Policies

It is the policy of Contra Costa County to maintain a work, service and program environment free of discrimination, harassment, or intimidation based on sex, gender, age, race, religion, national origin, ancestry marital status, sexual orientation, disability or medical condition. These policies are also mandated by state and federal law. It is the policy of the Community Services Bureau to comply with all applicable state and federal statutes and regulations prohibiting discrimination in employment, contracting, buildings, facilities, and provision of services. All employees should be familiar with all of the provisions in the County's "Notice of County Non-Discrimination and Anti-Harassment Policies" and the procedures for "Reporting Discrimination, Harassment, and Retaliation".

In addition to policies and regulations which prohibit harassment on the job on the basis of one's membership in one of the protected classes as well as all forms of sexual harassment, please note that the County policy also states that:

- "Employees are entitled to, and will be provided with, a workplace environment which is free from harassment...All employees are individually responsible for conducting themselves in ways that ensure others are able to work in an atmosphere free of discrimination, harassment or intimidation...Each employee has a duty to report incidents of unlawful discrimination and harassment. Retaliation for reporting discrimination or harassment or participating in an investigation of a discrimination claim is both unlawful and against County policy."
- Supervisors have an affirmative and legal duty and responsibility to report all allegations of sexual and other forms of harassment or discrimination to their managers or supervisors. The Employment and Human Services Department will fully comply with these policies and will not tolerate discrimination, harassment, or intimidation in any form. Reports of violations of these policies will be promptly investigated and appropriate disciplinary action taken if warranted. This policy also includes more subtle forms of harassment, such as threats, name-calling, and use of slurs, innuendo, or misrepresentation of actions or intent to damage an employee's reputation.

#### W. Whistleblowers are Protected

Community Services Bureau adheres to the California Whistleblower Protection Act (Government Code Sections 8547-8547.13) and EHS Policy against Retaliation. It is the public policy of the State of California to encourage employees to report or "blow the whistle" to an appropriate government or law enforcement agency when they have reason to believe their employer is violating a state or federal statute, or violating or not complying with a state or federal rule or regulation. These violations may include fraud, waste, abuse, unnecessary government spending, an unsafe or unhealthy employer practices.

A “whistleblower” is an employee afforded with the following protections:

- An employer may not make, adopt, or enforce any rule, regulation, or policy preventing an employee from being a whistleblower.
- An employer may not retaliate against an employee who is a whistleblower.
- An employer may not retaliate against an employee for refusing to participate in an activity that would result in a violation of a state or federal statute, or a violation or noncompliance with a state or federal rule or regulation.
- An employer may not retaliate against an employee for having exercised his or her rights as a whistleblower in any former employment.

Information regarding possible violations of state or federal statutes, rules, or regulations, or violations of fiduciary responsibilities should be reported by calling the California State Attorney General’s Whistleblower Hotline at 1-800-952-5225.

A copy of this Labor Code and how to report improper acts is posted at each CSB center.

#### **X. Protocol for Tracking Staff Absences and Recognizing Excessive Absenteeism**

Maintaining good attendance is a condition of employment and essential function of every employee's job. Further, consistent staff attendance is critical to the operation of quality child development centers. To maintain our daily staffing levels so that our work is completed effectively and efficiently it is necessary to keep accurate account of the use of these benefits.

Use of vacation and personal leave accruals is by mutual agreement between the employee and the supervisor. Request for use of this time must be made and approved in advance using the form provided by CSB.

For employees who do not have pre-approved absence from work, each Site Supervisor is required to maintain a daily employee call-in log to record employee absences that were not pre-approved. Employees calling off of their shift must do so by 6:00am on the day of the absence. For consecutive absences, employees must notify their supervisor by 3:00pm of the day prior. If no communication between the employee and supervisor takes place during the first day of absence it is expected that the employee will be present for their shift on the next business day. The employee is required to provide the following information when calling in: Name, date of the absence, job classification, shift, time of the call, reason for not reporting to work.

Supervisors are to track absences on the monthly Staff Absentee Tracking log that is provided in an Excel workbook. Assistant Directors are to review monthly Staff Absentee Tracking logs for analysis of staffing patterns, site needs for substitutes, etc. Additionally, through review of these logs, assistant directors, supervisors and managers can detect abuse of sick leave and excessive absenteeism and allow management and supervisory staff to proactively address absenteeism concerns in a timely manner.

- **Excessive Absenteeism:**

- Absenteeism (including use of sick leave) may be considered excessive where there are frequent and often unscheduled absences, including use of vacation, floating holiday and earned compensatory time accruals. Excessive absenteeism usually results in exhausted sick leave accruals and frequent use of other leave balances such as vacation, floating holidays or compensatory time for “sick leave” purposes, as well as other unscheduled absences (including tardiness). In general, repeated depletion of sick leave accruals as they are earned may be an indicator of excessive absenteeism as is the frequent placement in Absent With Out Pay (AWOP) status.
- Abuse of sick leave use occurs when it is used for absences that are not permissible under the definition of appropriate use of sick leave or for the purpose other than that for which it is claimed (as described in the MOUs and the Personnel Management Regulations).
- Use of large amount of sick leave accruals may be mitigated by extenuating circumstances as applicable in the MOUs (FMLA, disability status, etc.).

Supervisors and managers are encouraged to look for patterns of absenteeism such as unscheduled absenteeism at the beginning or the end of the work week, before and after holidays, before and after approved time off, etc. Such patterns may be indicators of excessive absenteeism.

- **Handling Excessive Absenteeism:**

When patterns of excessive absenteeism are detected, and there are no known mitigating circumstances, supervisors and managers are to discuss their findings with the Assistant Director or Unit Manager and decide on appropriate course of action. Actions taken may include but are not limited to the following:

- Counsel the employee verbally to improve their attendance
- Issue Counseling and Counseling Letter (if employee does not improve)
- Pursue disciplinary actions: Letter of Reprimand
- Reference the absenteeism issue in the employee’s annual performance review
- Develop Improvement Plan with the impute of the employee
- Consult with Personnel Analyst on other disciplinary actions if no improvement is noticed
- If appropriate, refer the employee to the County’s Employee Assistance Program (EAP). This action requires consult with and involvement of the CSB Personnel Analyst. Note: EAP is always available to an employee who may wish to make an appointment him/herself.

Supervisors and managers are encouraged to check with CSB Personnel Analyst if not sure if an employee has any known mitigation circumstances.

### Y. Family Medical Leave Act (FMLA)

CSB provides coverage under the Family Medical Leave Act (FMLA). Eligible employees can receive up to 18 weeks unpaid, job-protected leave in rolling 12 months period. An “eligible” employee is an employee who had work for his/her employer for at least a year and had worked a minimum of 1,250 hours and meets any of the qualifying reasons listed below:

- The birth of a child or placement of a child with the employee for adoption or foster care
- The employee’s own serious health condition
- The employee’s need to care for her/his spouse, child, parent, due to his/her serious health condition
- The employee is the spouse, son/daughter, parent, next of kin of a service member with a serious injury or illness (in this case the FMLA may be up to 26 weeks in a single 12 month period)
- Qualifying emergency arising out of the fact that the employee’s spouse, son/daughter, parent is on active duty or call to active duty status in support of a contingency operation as a member of the National Guard or Reserves

Employees needing to take FMLA are required to notify their supervisor and Personnel, and submit a medical certification or appropriate document/s issued by a court, law/enforcement agency or a military service entity showing need for the employee to take time from work. Medical certification has to be provided on CCC Certification of Health Care Provider Form. This form can be obtained from the CSB Personnel Unit. The employee is required to submit the completed and signed by his/her doctor document within 15 calendar days of receiving the form from Personnel. The CSB Personnel Analyst/FMLA Coordinator will provide the employee with official letter approving/disapproving the FMLA and information on the employee’s benefits and rights while away of work.

If a supervisor is aware that an employee is off work due to a condition qualifying under the FMLA, she/he should notify CSB Personnel on behalf of the employee. Personnel will contact the employee and will provide information on his/her rights under the FMLA.

Employees who have been on FMLA or Approved Leave of Absence (LOA) due to their serious medical condition are required to submit to CSB Personnel a Physician’s Statement of Ability to Work clearing them to return to work, prior to reporting to their assigned work location. If the employee is cleared to return to modified work, CSB Personnel Analyst/Return-to-Work Coordinator will assign modified work, if any is available.

While on FMLA, an employee may be eligible for Temporary Disability Benefits or Paid Family Leave. The employee is to make personal decision if (s)he wants to take advantage of these benefits. Employees are encouraged to contact CCC Benefits Unit at (925) 335-1746 for specific information regarding their benefits during time off work. While on FMLA, employees may choose to use their accruals. In this case, they are to contact their payroll clerk and make specific arrangements for the use of their accruals.

In California, employees are also covered by the California Family Rights Act (CFRA) and the Pregnancy Disability Leave (PDL) Act, each of which provide family or medical leave that can run concurrently or consecutively with the FMLA, depending on the circumstances.

Paid Family Leave is also available to employees who contribute to State Disability Insurance (SDI). Paid Family Leave runs concurrently with FMLA, CFRA, and PDL.

## Z. Confidentiality

As public employees, CSB is governed by numerous federal, state, and county regulations that are designed to ensure that public resources are being administered in an ethical manner and that the right of both employees and the public CSB serves are respected and honored. These include regulations that ensure that the rights of individual employees are respected to work in an environment that is free of discrimination, intimidation, hostility, or retaliation. CSB's mission to serve the most vulnerable members of the community also requires even higher standards of professional conduct to ensure that rights are respected and that there will be no cause of additional harm and suffering.

Knowing what these myriad regulations are and understanding their relationships to each other can be confusing. The purpose of this policy is to update and summarize the major policies that govern employee conduct. References will be made to other policy documents that contain the more detailed provisions.

These policies will be reviewed with all existing employees and will be presented to and discussed with all new employees and temporary staff at the time of their orientation. New employees will sign a statement that certifies that they have received and read these Standards of Conduct.

### 1. General Policies

Policies and procedures in this matter bind CSB employees who have access to confidential information. The policy is:

- No information about a child or family is to be released without written, parental informed consent if the material is personally identifiable.
- "Personally identifiable" information is defined as information about a child or family that would make it possible to identify the child or family with reasonable certainty. Such information includes:
  - The child's name, address, telephone number
  - Medical record
  - Social Security number
  - Any other data that can readily identify the child or family.

When the child's name is attached to any of the following, that information is considered confidential:

- Specific educational/medical screening
- Diagnostic data
- Disability
- Categorical diagnosis
- Child's functional assessment
- Family needs assessment
- Home visit reports
- Progress reports

## **2. Confidentiality Procedure**

All records containing information pertaining to a child and/or family must be kept in a locked file. The locked file should be maintained at each center location, and the Site Supervisor shall designate a staff member to be responsible for the key.

A list of individuals authorized to review files must be available at every center. Any individual not on the list, but requesting access to files must be approved by the lead Teacher/Site Supervisor prior to release of files.

Please refer to Record Keeping and Reporting Section for protocols for file review.

An Individual Access Log must be kept in each file, and any individual working with/reviewing/monitoring the file must sign his/her name, date, and reason for accessing the file.

Files or papers containing confidential material regarding a family must not be left on desks, tables, or other areas where others may have access to them. After current business concerning a file is completed, the file must be returned to the file cabinet, and the cabinet locked.

Discussions of family problems or situations are to be held only with those staff members working directly with the family. Information should be shared only if it is relevant to that staff member in assisting the family. The normal mode of information sharing is the Case Conference/Family Meeting. The following must be followed:

- Problems of one family must not be discussed with another family.
- Family situations/problems must not be discussed in the presence of parents, children, or visitors at the centers or division office.
- Written information regarding families must not be shared with any community agency without express prior written authorization from the family.
- After a child's participation in the program has ended, no records of home visits, Case Conferences/Family Meeting, IEP's or other confidential reports are to be forwarded to any school without prior written authorization from the parent(s).
- Prior to using children's photographs outside the program or allowing children to participate in research, parents' written permission must be secured.

## **3. Parent Access to Family Records**

The following protocols are followed with regards to family records:

- Parents have full review / access rights to information regarding their children and themselves.
- CSB has an obligation to explain to parents any information in the records that pertains to the child/family.
- Parents have the right, after reviewing their child's records, to have them amended or corrected. The request can be written or verbal; the Site Supervisor must approve it.
- If the parents cannot come to an agreement with the Comprehensive Services team/Site Supervisor, then all explanations and requests for change must be kept with, and become part of, the child's permanent record.
- Parents may obtain from the Site Supervisor, upon written request, a list of locations of

all personally identifiable information kept by CSB.

#### 4. Photo Consent Policy

The Community Services Bureau provides families with the Parent Handbook upon enrollment. In the Parent Handbook, there is a section on Photo Consent where parents/guardians can choose to grant consent for photographs/videos taken of their children during the term of their child's enrollment. Note that **when children transition** from the EHS program to the HS program they will **need to re-enroll** and a new consent form needs to be signed.

- Community Services Bureau will use photographs to record children's progress and development during their time at preschool. These photographs may also be used in a variety of ways in the agency such as for publicity for a variety of events, Social Media, annual reports, and newsletters.
- Photo Consents must be signed by parents/guardians upon enrollment and re-enrollment. A record of the consent forms need to be filed and readily accessible at each site. The signed consent form is added in each child's file (parent communication section).
- Site Supervisors must be aware of where the photo consent forms are filed and must be able to identify the children with no consent.
  - In addition if the child has no consent, at the time of enrollment, Site Supervisors must checkmark the field in CLOUDS titled 'No Photo Consent' in the child's Data Sheet to indicate lack of photo consent.
  - Smart Reports can be created from CLOUDS to show the list of children with no consent so it is of utmost importance to checkmark the 'No Photo Consent' field upon enrollment.
- In the case of a change in guardianship, the signed consent form is sufficient for the pictures taken prior to the change of guardianship. If however, the new guardian approaches you and asks for the child's picture not to be used, you must stop using it going forward. Any time a student's guardianship changes, the new guardian must review and initial the policies and forms to stay informed.
- Under no circumstances are foster children to be given photo consent or to be photographed for display to the public. Site Supervisors must ensure that the field in CLOUDS titled 'No Photo Consent' in the child Data Sheet is check-marked.



## AA. Probationary Period and Staff Performance Appraisals

### 1. Probationary Period

All employees appointed from officially promulgated employment list for original entrance and promotions are subject to a probationary period. For original entrance appointments the duration of the probationary period is determined by the Personnel Management Regulations and the appropriate MOUs. For all CSB employees represented by Public Employee Union Local 1, the entrance probationary period is 9 months. For most promotional appointments, the probationary period is six months.

#### Probationary Period Protocol:

The probationary period for new and promoted employees gives the supervisor the opportunity to evaluate an employee's performance and conduct on the job training, provide learning opportunities and, if necessary, remove or resign the employee. During this time a new or promoted employee receives extra supervision and coaching to help the employee meet the standards and expectations of the job. The period begins on the day of appointment to a permanent position.

- **Period length:** The length of the probationary period is negotiated between the county and the labor unions for different classifications and may vary.
  - For new non-management, project employees and Site Supervisors – (all represented by PEU, Local 1) 9 months;
  - Promotional positions, non-management project and Site Supervisors – 6 months;
  - Management classifications (represented by Local 21 and not represented) – 6 months
- **Tracking Date of Appointment / End of Probationary Period:** Supervisors of employees on probation must obtain and know the official date of appointment to a permanent position and the date that the probationary period ends. This information should be provided by Personnel, but if not, it is the supervisor's responsibility to obtain it.
  - The Supervisor shall mark the probationary period end date in her/his Outlook calendar to ensure it does not pass without the supervisor's knowledge.
  - Once the official date of appointment has been determined, Personnel is to send out a communication to the responsible supervisor that contains the start date, the end of probation period date, and a guide to onboarding a new employee which is to outline the steps and the roles of the supervisor in providing an exceptional onboarding experience.
- **Orientation:** All new and promoted employees will receive a full orientation to their new position, which includes CSB New Employee Orientation, EHSD New Employee Orientation and any classification and unit-related orientation checklists.
  - These activities shall be completed within the first two months after the appointment date.
  - It is the responsibility of the supervisor to arrange for the new employee to timely meet with the other key stakeholders to complete their onboarding check lists.

- Completed orientation checklists shall be signed and submitted to the CSB Personnel Analyst.
- Management and supervisory staff may be scheduled for additional orientation sessions provided by the Employment and human Services Staff Development Unit.

The Personnel unit will track receipt of checklists timely and provide reminders 4 weeks before the completion deadline, if not yet received.

- **Support and Coaching:** Within the first 45 days of appointment, all new teaching staff will receive an observation in his/ her classroom from the education manager and an opportunity to discuss the observation and receive feedback.
  - All supervisors will provide regular reflective supervision opportunities to the employee as a means to provide timely feedback and discuss any issues brought forth by the employee or supervisor.
  - If issues arise, the supervisor will provide resources and support as needed. This shall be documented.
  - For all new employees, a 3 and/or 6 month evaluation will be conducted to provide feedback and resources. If concerning issues are identified prior to 3 months, both 3 and 6 month evaluations with coaching, resources and remedial learning opportunities will be provided and documented.
  - Small group conferences may also be used in addition to formal evaluations but not in lieu of. If concerning issues arise, the second level supervisor will be notified immediately of any concerns and kept regularly and well-informed on progress or lack thereof.
  - A final probationary evaluation will be provided just prior to the conclusion of the probationary period.
  - For all promoted employees, a 3 month evaluation will be conducted to provide feedback and resources. A final probationary evaluation will be provided just prior to the conclusion of the 6 month probationary period.
- **Release during probationary period:** An employee may be released during their probationary period at any time; however, sufficient documentation which includes evidence of adequate support, coaching, and proof of resources and learning opportunities, must be present. The second-level supervisor and the Personnel Analyst must review all documentation to ensure it is complete and that adequate evidence is present to warrant release.

## 2. Staff Performance Appraisals

A Uniform Service Rating System includes provision for periodic rating of employees' performance for the purposes of:

- Promotion
- Transfer
- Demotion
- Termination

- Salary adjustment
- Re-hiring
- Recommendation to future employers
- Performance improvement

A probationary employee must be evaluated at least once during their probationary period. In accordance with Contra Costa County probationary requirements, every employee on original entry appointment is evaluated at the end of the first six months of employment. A formal, written review of the employee is completed at that time and thereafter at least annually by the immediate supervisor.

In the process of formal evaluation of the employees, CSB utilizes also peer feedback evaluation and self-evaluation. The information collected through the feedback evaluation tool is analyzed and summarized by the supervisor and included in the employee's Performance Evaluation. The employee is given the opportunity to evaluate his/her Professional Goals and submit the self-evaluation form to his/her supervisor before the Performance Evaluation meeting. The employee's self-evaluation is included in the Performance Evaluation.

The probationary period is used as the final phase of the examination process. It is utilized by the appointing authority for effective adjustment of new employees, and for release of employees whose performance is unsatisfactory. Ongoing evaluation continues throughout employment. (For more information on the probationary period, see "Personnel Management Regulations, Part 9, Sections 901 and 902, pages 9-10.)

Performance Evaluation Schedules (due dates) are tracked monthly by the Personnel Unit and notifications are given directly to the immediate supervisors as well as the 2nd line supervisor and the Bureau Director. The immediate supervisor is also notified via the COPA/CLOUDS electronic system.

### **3. When Completing Employee Evaluations**

The immediate supervisor rates an individual employee on work performance, efficiency, dependability, and adaptability. Step ratings are made in a formal report by the immediate supervisor (responsible for the work of the employee being rated).

In completing the Performance Evaluation for each employee the supervisor takes in consideration the feedback information received from the employee's peers, as well as, the self-evaluation completed by the employee. At least two weeks before completing the employee's evaluation, the supervisor will ask 2-3 employees working closely and familiar with the employee to complete the appropriate feedback tool. The supervisor will summarize and analyze the results and include them in the employee's review. Prior to the meeting with the employee, the supervisor will also ask the employee to evaluate his/her performance in the area of Professional Goals. The employee self-evaluation will be reviewed at the time of the Performance Evaluation meeting and included with the Performance Evaluation.

During the Performance Evaluation meeting both the supervisor and the employee will review and discuss his/her performance, as well as their goals. After the discussion, the employee must sign the Performance Evaluation form. Each employee shall receive a copy of his/her evaluation.

Signed original evaluations are submitted to the Personnel Unit.

Evaluations are filed in the employee's personnel records. The formal report becomes a part of the employee's permanent personnel record.

An employee who receives an unsatisfactory rating may be ineligible for a higher pay until a satisfactory rating has been received.

An employee may be reassigned, demoted, or discharged for receiving an unsatisfactory rating.

Each employee shall receive a copy of his/her rating.

The primary functions of supervisory personnel are: 1) guidance, and 2) improvement of the operation. Each supervisory visit shall be a positive approach to improvement, and add to the employee's contribution to the department.

In accordance with section 648(A)(f) of the Head Start Act, staff and supervisors will collaboratively complete a Professional Development Plan that connects the employee's professional goals to training and educational programs and/or resources that support attainment of such goals. Each plan will clearly outline high quality activities that will improve the knowledge and skills of staff as relevant to their roles and functions in a manner that will improve delivery of program services to enrolled children and families. Supervisors shall ensure that the plans are regularly evaluated for their impact on teacher and staff effectiveness. Professional Development Plans are part of the performance evaluation process and must be submitted with the completed evaluation tool.

#### **4. Supervisor's Approval**

Before evaluations are reviewed with employees, they must be approved by the second level supervisor. The supervisor's supervisor or designee reviews step ratings. That reviewing official must:

- Approve or disapprove the service rating
- Change the service rating, without formal appeal procedures, when in the interest of sound administration
- Discuss the rating with the employee
- Upon request of the employee, provide an impartial review of the service rating.

#### **5. Appealing a Performance Evaluation**

If the employee is dissatisfied with the review/decision, the employee may appeal in writing (within ten days) to the CSB Director for an impartial review of their service rating. The CSB Director shall render a written decision, sustaining or modifying the rating to the employee within ten days following a hearing. The Appeal Letter submitted by the employee will be attached to the Performance Review being disputed and will be kept in the employee's Personnel File.

### **BB. Chronological Supervision and Filing System**

Chronological Supervision is a management and record-keeping system that organizes and facilitates the tasks of supervision, staff development, and progressive discipline. It is based on the concept that all employees are trained and supervised over a chronological period of time. Since this training and

supervision occurs over an indefinite time period, the documentation of these activities should be filed in the chronological order that they happened. Chronological supervision supports non-discriminatory documentation of employee professional growth and performance, increases management accountability, and contributes to personal and organizational development. Chronological Supervision files will contain all non-disciplinary correspondence and documents pertaining to the supervision of subordinate employees. Examples of mentoring and supervision include, but are not limited to recognition for excellent and/or consistent performance of assigned tasks; written instructions for improving job functioning with follow-up of monitoring activities; and documentation of meetings held with employees.

Each site will maintain a site Chronological and Supervision File. If a staff person's site assignment changes, Site Supervisors are responsible for transferring the employee's Chronological and Supervision File to the new assigned site.

## **CC. Staff and Volunteer Health**

### **1. Volunteer Health**

In accordance with California Care Licensing Regulations, all volunteers (regardless of the number of hours volunteering) must sign and date form CSB232-Volunteer Health Statement (See Forms CSB232), indicating that they are in good health and pose no threat to the health and safety of the staff and children of the program. All volunteers must provide proof of required immunizations for measles, pertussis and influenza (flu), as per the Health and Safety Code 1596.7995(a)(1) and a negative TB test or negative chest x-ray, certified by a health care professional. TB tests are not required for visiting experts.

The TB test must be administered and the results documented by an authorized medical provider. CSB will help in obtaining a TB test with our LVN. Also, provide all potential volunteers with information regarding the latest schedule for the immunization clinics throughout the county. Call 1-800-246-2494 for clinic times and locations. The cost is approximately \$10.00, but may be covered under some insurance policies.

A signed statement from a provider indicating the test date and result must be on file before the first day of volunteering at the site(s). For parent volunteers, place the documentation behind the volunteer health statement in the health section of the comprehensive file. For non-parent volunteers, place the documentation in file specific to that volunteer along with other required documentation such as fingerprints and volunteer applications. Keep all information confidential.

For frequency of testing and other details regarding TB test results, please refer to "Tuberculosis Screening Guidelines," below.

### **2. Staff Health**

New employees must obtain and submit to CSB Personnel Unit a Physical and an Intradermal Mantoux 5TU PPD skin test (note: Tine or other multiple puncture tests are not acceptable.) prior to starting work. If an employee has had a positive PPD skin test in the past, a negative chest x-ray and physician's statement must be obtained. Initial Physicals and TB tests must be obtained within one year of the date of employment with CSB.

In compliance with California Community Care Licensing regulation 101216(g)(1), staff shall obtain a health screening performed by or under the supervision of a physician not more than one year prior to or upon employment. No further re-examination is required by the State of California.

In accordance with Health and Safety Code 1596.7995(a)(1), effective September 1, 2016 all employees working in child care facilities must provide proof of measles and pertussis immunizations or waiver of such immunizations per the regulation. Additionally, each employee must annually provide verification or waiver of influenza (flu) immunization. Influenza vaccination must be received between August 1st and December 1st of the same calendar year.

### **3. Tuberculosis Screening Guidelines for Staff and Volunteers**

If staff or volunteers present a positive TB test (10mm or more of indurations), it must be followed by a chest x-ray and a statement from the examining physician indicating that the employee or volunteer is free from active disease.

Employees and volunteers with a negative initial TB test, who do not live in the Richmond or San Pablo area, must repeat the test every four years. Employees and volunteers with a negative initial TB test must complete a TB Risk Assessment every year (See Form CSB262) to determine whether annual TB testing is recommended.

An employee or volunteer who lives in the Richmond or San Pablo area must have a TB test done yearly. Employees and volunteers with a documented positive initial TB Test that was followed with an x-ray showing no active disease do not require any additional exam. These employees and volunteers must complete the TB Symptom Review (CSB260) every year to determine whether they require further medical evaluation.

### **4. Hand Hygiene Standards at Sites**

To assist in the prevention of spreading infection and viruses, and for safety reasons, all staff at child care facilities, whether considered direct caregivers, clerical or management must adhere to the following standards of hand and fingernail hygiene.

Artificial or natural fingernails must be clean, and at a maximum, ¼ inch in length.

Large rings that extend above the ring base more than ¼ inch may not be worn while at work.

Hands must be washed, at a minimum, before and after diapering, before and after food preparation or handling, before and after morning health check-in, after contact with any bodily fluid (blood, mucus etc.), after personal use of the restroom, after playing with pets or other animals, after handling garbage, and after playground activities, including sandbox play.

If staff are found in violation of the hand hygiene policy, they may be required, at the Site Supervisor's or CSB management's discretion, to rectify the problem by washing their hands, removing rings or trimming or cleaning nails before returning to their position.

#### DD. Career Development Opportunities

The County encourages/supports employees' efforts to improve their skills, abilities, and knowledge to be more productive in their current assignments and to be prepared for career advancement (as opportunities arise). Staff may be required to attend trainings and/or educational advancement programs to meet licensing, state and/or federal regulations. As resources are available, CSB will support staff in attaining certain goals; however, it is the responsibility of CSB staff to meet the minimum qualifications and requirements of their position.

Service Requirements may be established for certain professional development programs to comply with federal, state, or local regulations. As mandated in the Improving Head Start for School Readiness Act of 2007, Section 648A (6), employees who receive financial assistance to pursue a degree shall:

- Teach or work in a Head Start program for a minimum of 3 years after receiving the degree; or
- Repay the total or a prorated amount of the financial assistance received based on the length of service completed after receiving the degree.

Contra Costa County Community Services Bureau agrees that:

- Career development activities are the joint responsibility of the individual and the County.
- All staff members should engage in continuing education, whether it takes the form of formal courses of study, participation in technical society activities, attendance at meetings, reading, or other forms of communication with the profession. CSB will make every effort possible to accommodate working schedules to permit occasional attendance at educational meetings.
- To encourage continuing education, the Board of Supervisors has established a career development education policy. Applications for assistance will be considered by the Bureau and, subject to funding limitations. The details of this policy are outlined in Administrative Bulletin 112.9. Funds may be provided for tuition, books, and other direct costs, providing that the following criteria are met:
  - The employee must start and complete course while associated with the County, within timelines.
  - The field of study must relate to assigned duties or prospective assignments.
  - Attendance at all meetings or classes is required, unless compelling reasons for missing sessions occur.
  - Passing grades must be maintained throughout the course.

Certain classified, exempt, and project management employees may be eligible for reimbursement for up to \$625 every two years for memberships in professional organizations, subscriptions to professional publications, professional engineering license fees required by the employee's classification, and attendance fees at job-related professional development activities. Individual professional development reimbursement requests are authorized by the department head.

Training sessions are held to provide opportunities for staff development and to help employees grow professionally. Such sessions help orient employees to their assignments, explain policies and procedures, teach new skills and methods, and help prepare for a particular program. Professional growth is accomplished through staff meetings and conferences, supervisory interviews, correspondence, extension courses, attendance at professional conferences, inspection tours, and directed readings.

If an employee is directed to undertake a course of study or to attend any meeting or lecture requiring travel and/or expenditure of funds, the County reimburses the authorized expenses. Time out of the office during normal working hours attending meetings will be counted as regular hours worked. The details of allowable training travel and reimbursable expenses are outlined in Administrative Bulletins 111.7 and 204.13 respectively.

The Bureau provides opportunities for employees to attend conferences which may benefit the employee and which would help to improve the department's operation or service. All employees must submit written reports to their supervisor within fourteen (14) days after attending a conference. The written report should include a summary of ideas or methods, which may benefit or improve the services or operation of the Bureau. Requests to attend conferences are made to the CSB Director.

Additionally, the County offers wide variety of free of charge on-line or in-class training and professional growth opportunities through its Risk Management Office (Target Solution) and the Employment and Human Services Department/Staff Development Office (SMART, Learning Management System). Teaching and technical staff members are encouraged to participate as active members of technical societies and professional organizations of their choice. With prior approval, time off to attend local meetings of particular interest and benefit may be arranged. The same pertains to national meetings dealing with subjects benefiting professional advancement.

Ongoing staff meetings are held for all employees. Individual employees may be called upon to present assigned topics to the group or be appointed to a committee to study special problems/lead discussions. All such meetings are held on department time and are designed to improve overall job performance/efficiency and services of the department.

CSB has designated the Personnel Unit as the lead for professional development and training activities within the program.

## **EE. Staff Training and Development**

### **1. Training and Technical Assistance Plan**

The Training and Technical Assistance Plan is reviewed and updated annually and included as part of the continuation grant process to promote program improvement and enhancement. Senior managers, Content Area Experts, and other stakeholders are to submit projected trainings for each year that support the needs of their staff and meet program mandates, and are responsible for the delivery of such trainings. These trainings are included in the Training Calendar for each program year. Any training requested after the Training and Technical Assistance Plan is finalized will require approval by the Community Services Director or designee.

The designated Staff Development Coordinator should be informed of all scheduled CSB trainings in advance. Aside from their own recordkeeping, training leaders are responsible for submitting original sign-in sheets and copies of training agendas and materials to the Staff Development Coordinator.

The Training Calendar that has been developed is based, in part, on career development training needs.

### **2. Staff Training and Development System**

Purpose/Philosophy: CSB delivery of high quality services depends on enhancing the skills, knowledge, and ability of the staff. The management staff and Training Committee carefully design training and



professional growth opportunities for staff, which serve as critical resources for maintaining and improving program quality.

**i. Strategic Training Plan**

This reflects the training and staff development needs identified through Community Assessment, Program Self-Assessment, Performance Indicator Report (PIR), Ongoing Monitoring, Federal and State Reviews and Regulations. The Strategic Training Plan is closely aligned to CSB short and long term goals and objectives.

**ii. Annual Training Plan**

The plan is developed based on: Staff Training and Professional Development Survey results from the program's self-assessment and the ongoing monitoring, staff's needs and goals identified in their performance evaluations, and federal, state and county regulations.

**iii. Training Calendar**

This identifies training topics and events for a 12-month period. It is updated quarterly and training opportunities and events are reflected on a monthly program calendar available to each CSB staff member. In addition, staff members are informed of ongoing community training events and opportunities.

**iv. Training Budget**

This is developed annually to support the implementation of the Training Plan. The budget also provides for additional training activities, as well as for training materials and equipment.

**v. Training Delivery / Implementation-Required Staff/Management Training**

- Orientation – All new staff are required to complete a bureau orientation covering all Department and County policies relating to employment. A site-based and program orientation is conducted within the first 2 weeks of employment. Additional orientation information is included in the New Employee Orientation section below.
- Ongoing Training – provided throughout the year in a timely and balanced fashion to ensure that staff possess the knowledge, skills, and expertise required to fulfill their job responsibilities and to operate a successful program.
- Head Start Required Training – provided to ensure that line and management staff develop skills and knowledge needed to operate a successful and effective Head Start program, one that fully meets the Head Start Performance Standards and the program objectives of the grantee.
- California Department of Education (CDE) Required Training – provided to meet the requirements of the Exemplary Program Standards and the State regulations.
- Community Care Licensing (CCL) Required Training – provided to ensure that line and management staff have knowledge and skills to provide services and operate a program in congruence with the Community Care Licensing requirements.
- Contra Costa County (CCC) Required Training – provided to all CSB staff to ensure that

the program creates a working environment that meets the County requirements and that staff members conduct themselves in a manner prescribed by the Code of Conduct.

- Domestic Violence Training- All Head Start and Early Head Start staff is trained on an annual basis regarding domestic violence. This training includes identifying the effects these situations may have on a child's behavior, how to talk with a parent who has made a disclosure of domestic violence, and community resources available to those in need. The role of staff is to listen to the parents' needs and provide specialized resources/assistance as requested and appropriate following the procedure for supporting families in crisis.

#### **vi. Staff/Professional Development**

Staff/Professional Development activities are the joint responsibility of the individual and CSB. All staff members are encouraged to improve their knowledge and skills to advance in their career and effectively serve enrolled children and families. Staff/Professional Development training supported/offered by CSB are as follows:

- Basic Professional Level – Staff members are encouraged and supported to engage in continuing education.
- Participation in activities leading to an associate or bachelor degree – Teaching staff working toward their associate or bachelor degree are supported by various continuing education programs offered by CSB. Additional information is included in the Continuing Education Programs section below.

All permanent County employees are eligible for financial assistance as specified by the policy for training (Administrative Bulletin 112.9) and reimbursement (Administrative Bulletin 204.13).

With the support of educational advancement grants for teaching staff awarded to CSB, staff is eligible for the benefits specified in such grant.

Whenever possible, appropriate accommodations are made to allow staff participation in the training opportunities leading toward an associate or bachelor degree.

CSB makes every effort to accommodate the work schedule to permit staff's attendance in formal training classes, conferences, and professional meetings.

Staff receive information about classes offered through the Community Colleges, Adult Schools, community based workshops, and conferences.

#### **vii. ECE Work Study Program**

Teacher Assistant Trainees (TATs) employed with CSB and in need of core classes to acquire the Associate Teacher Permit are encouraged to participate in the ECE Work Study Program:

- In partnership with the community colleges of Contra Costa, CSB offers its ECE Work Study
- Program designed for TATs endeavoring to advance in the ECE field

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- TATs work to obtain the four core classes, a total of 12 units; upon completing the program, they become eligible for the California Child Development Associate Teacher Permit
- Provides assistance with books, school supplies, tutoring, and paid tuition for required courses
- The only reimbursable travel expenses are: from work to class or from work to campus to fulfill college registration obligations are reimbursable
- The expectation is that participants in this program are working and studying

Program Participation Requirements:

- Must be a TAT with CSB and at least 18 years of age
- Must have worked at least 30 days in the classroom prior to applying for program
- Must have completed orientation and online trainings with sub coordinators and onsite orientation with initial Site Supervisor or designee
- Must work at least 24 hours on average per week in the classroom; 30+ preferred;
- Must maintain good attendance, job performance, and professional conduct by being professional, respectful, cooperative, punctual, prepared to learn, collaborative, communicative, and courteous
- Must be recommended for program by Site Supervisor and approved by Assistant Director
- Must complete and submit application both for CSB program and college
- Must register for classes (assistance provided during Enrollment Sessions)
- Must attend mandated tutoring when grade is below a “C”
  - If a participant in the program during the semester finds difficulty with coursework, they may utilize tutoring services even if their grade is “C” or above to ensure success in their classes; if tutoring is received during TAT’s work hours, they will be paid
  - TATs will also be paid to attend mandated tutoring during work hours
- Must study outside of class, utilize available resources, and complete all required assignments and tasks by college instructors to maximize success in the program
- Must communicate individual and academic needs, concerns, and/or challenges immediately to Program Coordinator to ensure they are addressed and resolved so that it does not become a barrier to TAT’s success in the program
- Must provide timely notification to the college instructor and the Program Coordinator of changes and/or circumstances that affect participation in the program (e.g. absences, medical reasons, change in phone number, etc.)
- Must obtain a grade of “C” or higher in all classes
  - If a grade below a “C” is received in any of the four core classes offered, participant is permitted to take the class again. If, after second attempt to take the class, the grade remains below a “C”, participation in the program must be discontinued.
- Upon completing the program:
  - Must transition into an Associate Teacher sub position
  - Must apply for the California Child Development Associate Teacher Permit
  - Must commit to at least two years of working with young children ages 0-5 at CSB
- If CSB has a permanent Associate Teacher position vacancy, the TAT must apply

- Must submit requested documents to the Program Coordinator
- Must keep all borrowed textbooks and laptops in the condition it was received; return all books at the end of the semester; return laptop upon completing the program

**viii. On-the-Job Training Program (Metrix Learning)**

Income-eligible Contra Costa Residents, including parents, are provided with employment, mentorship, on-the-job training and support in establishing and pursuing career advancement objectives and goals within the field of clerical support and administrative services. The program requires participation in on-line vocational learning. Participants who successfully complete the program receive a Certificate.

**ix. Professional Growth Activities for renewal of existing or receiving of a new Child Development Permit**

Staff are provided the opportunity to participate in a variety of training/ professional development activities offered by CSB or the educational community, leading to completion of the CDE required professional growth hours for Child Development Certification. It is the responsibility of the employee to ensure that all renewal or upgrade requirements are met to maintain a valid Child Development permit as required by their position.

- CSB managers and supervisors, who are certified Professional Growth Advisors, counsel program staff and provide them with effective guidance and assistance in accomplishing their professional goals.
- Participation in professional organizations and technical societies – staff are encouraged and supported to participate in technical societies and professional organizations.
- Staff are given time off to attend meetings/conferences, whenever possible.
- Staff's membership in the NHSA is paid by CSB. Participation in other professional organizations and technical societies is governed by the CCC Personnel Management Regulations (PMRs).

**x. Parent training is conducted throughout the year in a variety of settings including**

- Annual Parent Conferences
- Monthly Policy Council Meetings
- Monthly Parent Committee Meetings
- Policy Council training events
- Monthly Parent Trainings (in each part of the County)
- Annual Trainings

**xi. Evaluation and Monitoring**

Evaluation and monitoring of the training activities are effective ways to determine the extent to which the training achieved its objectives and to plan follow-up activities. They also ensure a

consistent sequence in the whole training process. The following tools are used to evaluate and monitor the Staff Training and Development process:

- Staff Performance Evaluations - provide information for effectiveness of training, follow-up activities, and individual training needs.
- Tracking System - provides data regarding individual staff training and the sequence for balance of training opportunities in general.
- Training Summary - provides information about effectiveness of the training, the follow-up activities and the need for technical assistance.
- Ongoing Monitoring and Self-Assessment findings - provide information for the update of the training plan. Monitoring and Self-Assessment are used to determine the training needs and professional development activities for the next school year and for the next three-year Strategic Plan. The Staff Training and Development System operate in a cycle. The results from the Evaluation and Monitoring are crucial elements for the beginning of the new planning cycle.

## FF. New Employment Orientation

1. All new employees will receive a CSB orientation covering the goal and the underlying philosophy of the program, the department and county policies and programs and the ways they are implemented, and will sign a New Employee General Orientation Record form. The Personnel Unit is responsible for conducting New Employee Orientation Trainings, which include but are not limited to:

- EHSD and CSB Mission Statements and Organizational Structures
- Employee Rights and Responsibilities
- Standards of Conduct, Rules & Regulations, CSB's Buddy System
- Payroll and Expense Reimbursements
- Employee Benefits and Training
- IT Policies & Resources
- Injury & Illness Prevention Program Training

2. All newly employed teaching staff, including Site Supervisors, and other staff determined to benefit from, will receive an Education Orientation. The CSB Education Team is responsible for conducting the Education Orientation, which includes, but is not limited to:

- Performance Standards
- Job Descriptions
- Curriculum goals, objectives and effective implementation
- Screenings, assessment, individualization, and parent-teacher conferences
- Kindergarten transition
- Positive Guidance and Discipline
- Project Approach
- Lesson Planning
- Nutrition, Education, Health, Mental Health, Disabilities & Homelessness Programs
- Parent, Family, and Community Engagement

Further, newly hired teaching staff will receive on-the-job training to ensure their successful acclimation with the program.

3. All non-teaching staff will receive on-the job training as identified for the work unit and specific job.

Specially designed New Employee Orientation Check-Off Lists will be utilized for navigating each employee learning and on-boarding.

Additional initial and ongoing orientation trainings will be provided to new employees as required by County, State and Federal regulations.

All volunteers and temporary/substitute staff will review the CSB Substitute and Volunteer Handbook, and will sign the Handbook receipt which will be kept on file at the center and the personnel files. Both volunteers and substitute staff will also receive on-site orientation at the center/office. Substitute staff additionally will complete the Substitute Orientation Checklist with the Substitute Coordinator.

## GG. Continuing Education Programs

CSB will make every effort to support staff pursuing a degree in higher education that is relevant to the public services provided by CSB.

CSB staff enrolled in programs leading to an associate or bachelor degree are encouraged to use the financial benefits available through the County as outlined in Administrative Bulletin 112.9.

CSB works with local colleges and universities, and community organizations to provide mentorship, tutorial, and other support services. A lending library is available to staff attending degree programs in the local community colleges.

In addition, CSB is committed to pursue grant opportunities providing financial support for staff working towards degrees or credentials in early childhood education, or related field, as specified in the Teacher Qualifications Section 648(A)(2) of the Improving Head Start for School Readiness Act of 2007 and the 2016 Head Start Performance Standards.

## HH. Delegate Agency Policies

### 1. Appeal Procedures for Current & Prospective Delegate Agencies:

The 2007 Head Start Act requires all grantees to provide written procedures for evaluating and defunding a delegate agency and procedures for a delegate agency to appeal a defunding decision. Head Start Program Performance Standards in 45 CFR 1303.33 and 1304.6 provides for three (3) separate and distinct occasions a current or prospective delegate may have appeal rights to CSB or the responsible HHS official:

- Termination of a contract with a current delegate agency

- Rejection of a funding application from a prospective delegate agency
- Failure of the grantee to act on a funding application from a prospective delegate agency

The applicable procedures are described in the sections below. These appeal procedures do not apply in any of the following circumstances:

- CSB's decision not to fund a prospective delegate agency or a current delegate agency in the first year of any future competitive or non-competitive five-year grant award period from the Office of Head Start (OHS);
- Any CSB contract for services other than as a current HS or EHS delegate agency;
- Funding applications from current delegate agencies for cost-of-living allowances (COLA), program improvement funds (PIF), or quality improvement (QI) funds, or similar supplemental funding whether one-time or permanent increase in the funding amount to the current delegate agency;
- Reduction, by any amount or percentage, of a current delegate's recruitment area(s);
- Reduction, by any amount or percentage, of a current delegate's slots or funding level;
- Removal of one or more contracted programs funded by CSB except where the removal is a termination of the contract and all of the delegate agency's funded programs;
- Suspension of a current delegate's funding; or
- CSB-funded CSPP or CCTR programs.

## **2. Mandates and Implementation**

### **i. Current Delegate Appeals**

Termination of a Head Start, Early Head Start, or Early Head Start-Child Care Partnership contract with a current delegate. CSB may not terminate a current delegate's contract based on defects or deficiencies in the operation of the program without first:

- Notifying the delegate of the defects/deficiencies;
- Providing, or providing for, technical assistance to assist the delegate in correcting the defects and deficiencies; and
- Giving the delegate the opportunity to make corrections based on the grantee's approval of the delegate's Quality Improvement Plan (QIP) and the identified defects and deficiencies within ninety (90) days from the date of notification by the grantee to the delegate agency of those

defects and deficiencies. Extensions are at the discretion of CSB.

If after the above procedures have been followed, the delegate agency still fails or refuses to make the necessary corrections in its program operations, the CSB Bureau Director, shall notify the EHSD Department Director of his/her recommendation to terminate a delegate agency's contract and the need to identify a designated reviewer in the event there is an appeal of CSB's decision.

If the EHSD Director supports terminating a delegate agency's contract, the EHSD Director will provide the Board of Supervisors with a recommendation to terminate the contract. The Policy Council is not required to approve the decision to terminate a current delegate agency contract.

Once the Board of Supervisors and the EHSD Director have reached an agreement, the EHSD Director will:

- Notify the delegate agency within five (5) working days after the EHSD Director and Board of Supervisors have reached an agreement.
- Convene a meeting with the delegate agency's governing board and CSB representatives to outline the options available to the delegate agency.
- Allow the delegate agency five (5) working days following the joint meeting to voluntarily terminate the contract with CSB. This meeting must include a representative from the delegate agency's policy committee executive membership.
- Notify the delegate agency of the termination of the contract to provide HS and/or EHS services (including EHS-CCP) and the reasons for the decision when the delegate agency rejects voluntary termination. The notice will include a statement that the delegate agency has a right to appeal the decision within ten (10) working days of receiving the notice.
- Ensure that the appeal procedure is fair and timely and is not arbitrary or capricious.
- Select a EHSD designated reviewer in preparation for a possible appeal from the delegate agency.
- Submit a copy of the delegate agency's appeal together with CSB's response to the appeal to the designated reviewer within twenty (20) working days from the receipt of the appeal.
- Review the written appeal from the delegate agency and issue a decision within sixty (60) working days of receiving the appeal notice.
- Notify the responsible HHS official about the termination decision, the delegate agency's appeal timelines, and CSB's final decision.



The designated reviewer will review within ten (10) working days the delegate agency's appeal and CSB's response to the appeal. The designated reviewer will not accept and/or review from the delegate agency and/or CSB any additional information after the appeal is submitted. The designated reviewer will submit his/her recommendation to the EHSD Director or designee to sustain CSB's initial decision to terminate the delegate agency's contract or to support the delegate agency's appeal position.

The designated reviewer will review all submitted documentation by the delegate agency and determine the following:

- Whether, when, and how CSB advised the delegate agency of alleged defects and deficiencies in the agency's operations prior to sending the rejection notice.
- Whether CSB provided the delegate agency reasonable opportunity to correct the defects and deficiencies and the details of the opportunity that was given.
- Whether CSB provided or provided for technical advice, consultation, or assistance concerning the correction of the defects and deficiencies.
- The steps or measures undertaken by the delegate agency to correct the defects or deficiencies.
- When and how CSB notified the delegate agency of its decision, the reasons for its decision, and how the reasons were communicated to the agency.
- If the delegate agency believes CSB acted arbitrarily or capriciously, why the delegate agency believes this to be true.
- Any other facts supporting the delegate agency's appeal of CSB's decision.
- If the designated reviewer is in support of the EHSD Director's and Board of Supervisors' decision, the EHSD Director will notify the delegate agency within twenty (20) days and give instructions and timelines for completion of the close-out of the HS, EHS, and/or EHS-CCP program(s). A close-out contract will be issued to the delegate agency.
- If the designated reviewer disagrees with the EHSD Director's and Board of Supervisors' decision to terminate based on the appeal review, the designated reviewer will within ten (10) working days notify the EHSD Director in writing and provide specific reasons to support the decision.
  - The EHSD Director will review with the Board of Supervisors the recommendation of the designated reviewer, and the EHSD Director will make a subsequent recommendation to the Board.
  - The delegate agency will be notified within twenty (20) working days whether the Board of Supervisors and EHSD Director uphold the initial decision or will allow other actions to be taken with the delegate agency.

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- The EHSD Director will notify the responsible HHS official about the appeal decision and the next steps.

This decision is final and no further appeals are allowed from the delegate agency to CSB or to the responsible HHS official. Current delegates that meet the criteria for termination will be sent formal notice of the intent to terminate the contract with specific reasons included in the notice.

The notice will be sent to the following three contacts at the delegate:

- Governing Entity of the Organization: President of the Board of Directors
- Head Start/Early Head Start Executive Director
- Policy Committee Chair

This notice may be sent by certified mail, return receipt requested, or any manner that provides proof of the date of receipt by the delegate.

The notice will be sent to the delegate's official address as identified in the current contract unless the agency has provided a change of address notification. If the notice is returned by the delivery company or the United States Postal Service as "undeliverable," the notice will be sent to the delegate's last known address provided by the California Secretary of State.

The notice must include the EHSD contact and the address to file all appeals and supporting documentation.

Selection of the EHSD Designated Reviewer:

During the annual planning process, but no later than August 1, and in anticipation of a possible appeal, the CSB Director will prepare a list of prospective reviewers and work with Division Managers to review the EHSD staff roster for potential "designated reviewers." Qualifications and requirements for the reviewer(s) are listed below.

The designated reviewer must:

- Be knowledgeable about HS and EHS programs (including EHS-CCP), regulations, and legal contracts.

- Have no involvement with the original decision to terminate the contract.
- Have no personal interest or bias in the matter that may prevent an objective, impartial review of all information relevant to the case.
- Have not received funding directly or indirectly through CSB's HS or EHS budget.

The CSB Director, will identify a minimum of three (3) current or former EHSD employees or external consultants as designated reviewers. The list will be submitted to the EHSD Director no later than September 1 each year. The EHSD Director will review and approve the list. The designated reviewers must not be employees of CSB.

The approved list will be sent to the CSB Director, who will train new additions to the list as necessary. The training will include appeal procedures, federal regulations, Head Start law, and the current CSB delegate contract. The training will also provide the timetable for the refunding process, including the date(s) applications are due to CSB, the cutoff date for CSB's completed application review, and the deadline for delegate to submit appeals.

#### **ii. Prospective Delegate Agencies**

The EHSD Director chooses delegate agencies through a competitive solicitation process, assigns services areas, and enters into contract service agreements. The EHSD Director will share information on the process and outcome with the Board of Supervisors.

#### Unsolicited Request for Funding:

If CSB receives an unsolicited funding application from a prospective delegate agency or a current delegate agency when no CSB RFP/RFQ was announced, the executive director, Head Start-State Preschool Division, will notify the applicant that its funding application cannot be accepted and that it has no appeal rights to the responsible HHS official.

#### Solicitation through RFQ:

An RFQ is initiated to establish a list of qualified prospective delegate agencies. It is intended to determine the viability of a prospective delegate to effectively operate a CSB program through its existing organizational structure, policies and procedures, and fiscal solvency. The application requires programs to answer questions pertaining to the organization's current operations and fiscal management.

If a prospective delegate agency submits an application to CSB in response to an RFQ and that RFQ does not request a written program narrative and detailed operational budget, the prospective delegate agency has not submitted a “funding application” and, therefore, no appeal rights are available.

Solicitation through RFP:

An RFP is initiated when a service area identified by CSB becomes available with associated funding allocation. An RFP requires submission of a written program narrative and detailed operational budget detailing plans that will be undertaken should the prospective delegate agency be awarded a contract to directly serve children under CSB.

Appeals from prospective delegate agencies or RFP applicants will follow the appeal process as outlined in Board of Supervisors Policy 5148.4.

- If a prospective delegate agency’s funding application is rejected, CSB’s Business Services will notify the prospective delegate agency of CSB’s decision and the prospective delegate agency’s right to appeal directly to the responsible HHS official.
- If CSB denies, or fails to act on, a prospective delegate agency’s RFP funding application within the specified amount of time, the prospective delegate may appeal CSB’s decision or inaction.
- If after a prospective delegate agency submits an application to CSB under an RFP publication and CSB requests and the prospective delegate agency submits additional information (i.e., written program narrative and detailed operational budget), then a “funding application” has been submitted to CSB. Should CSB reject that funding application, the prospective delegate agency now has the right of appeal to the responsible HHS official.

**Note:** A current delegate agency submitting a funding application under a CSB RFQ/RFP is considered a “prospective delegate agency” and must follow the appeal process as specified herein for prospective delegate agencies.

To appeal, a prospective delegate agency must:

- Submit the appeal, including a copy of the funding application, to the responsible HHS official within 30 days after it receives CSB’s decision to reject a funding application, or within 30 days after CSB has had 120 days to review but has not notified the prospective delegate agency of CSB’s decision; and,

- Provide CSB with a copy of the appeal at the same time the appeal is filed with the responsible HHS official.

CSB must provide the responsible HHS official with a response to the prospective delegate agency's appeal within thirty (30) working days of receiving the materials submitted by the prospective delegate agency.

CSB's response must:

- Relate to the items specified by the agency in its appeal submitted to HHS.
- Specify why CSB acted appropriately.
- Identify why CSB's actions taken were not arbitrary or capricious.
- Explain any other mitigating factors that support CSB's position not to accept the application or why action was not taken on the prospective delegate agency's funding application.

If the responsible HHS official finds CSB acted arbitrarily, capriciously, or otherwise contrary to law, regulation, or other applicable requirements, CSB may be directed to reevaluate its decision.

The responsible HHS official's decision is final and not subject to further appeal.

## II. Short-Term Contract Employees

Contract employees working over one year must have the approval of Contra Costa County. The need for contract labor is determined and funds must be available for contract labor.

Selection of persons to fill contract labor positions is determined by the appointing authority or designee.

Contra Costa County Managers and Directors give input into the development of the Service Plan.

Please see reference to contracts and grants under Record Keeping and Reporting.

## JJ. Union Membership

Contra Costa County follows the State of California Legislature, adopting a set of codes pertaining to employer-employee relations for public agencies as follows:

- The Contra Costa County Board of Supervisors recognizes collective bargaining units to

represent certain classifications of County employees - to determine the wishes to be represented, and by which organizations.

- Representatives of the collective bargaining unit provide literature/information regarding the services of that unit, and conditions of employment (agreed to by the Board of Supervisors and that collective bargaining unit).

The Board of Supervisors approves processes by which representatives of the bargaining unit may use Contra Costa County time, facilities, and bulletin boards to communicate with members. The collective bargaining unit provides its members with information regarding these matters. Questions relating to policies guiding the collective bargaining process are directed to:

*Human Resources  
Department Employee  
Relations Division 651 Pine  
Street, Second Floor  
Martinez, CA 94553*

#### **KK. Equal Opportunity/Affirmative Action Policy**

CSB shall not illegally discriminate in their recruitment, selection, promotion, or implementation of personnel policies and procedures against any person without regard to race, religion, sex, sexual orientation, national origin, age, disability, or military status. All applicable state and federal laws will be followed including, but not limited to Title VI, and Title VII, of the Civil Rights Act of 1964, as amended; the Age Discrimination in Employment Act of 1967, as amended, Section 504 of the Rehabilitation Act Amendments of 1974; the Civil Rights Restoration Act of 1987; the Americans with Disabilities Act of 1990 and the Civil Rights Act of 1991. Employment Discrimination procedures are set forth in Contra Costa County Administrative Bulletin 429.3.

#### **LL. Approval of New Personnel Policies and Revisions**

All personnel policies must be approved by Community Services Bureau, Policy Council, the County Human Resources Department, and the Board of Supervisors. Personnel policies and procedures must be consistent with collective bargaining agreements, and approved by County Counsel and County Human Resources as appropriate. The process is as follows:

- A policy is drafted with input from managers and program staff, related committees, and appropriate department personnel.
- County Counsel and County HR review it as appropriate.
- The draft policy is submitted to appropriate Managers and Assistant Directors for review/input before it is submitted to the Community Services Director for review and approval.
- After the Community Services Director's approval of the draft policy, it is submitted to the Policy Council for review and approval.
- If the draft policy is health-related, the draft is reviewed by the Health Advisory Committee before submission to the Policy Council.
- The draft policy must be consistent with written policies of collective bargaining agreements.

- The draft policy is submitted to the Board of Supervisors for review and approval.
- If the content of a policy has changed since the Policy Council's original approval, the Policy Council must approve the final version.
- After personnel policies and procedures have been approved, they are made available to staff electronically and in hard copy if requested.
- Policies and procedures are translated as needed.
- Policies and procedures are being made available in Braille as needed.
- Community Services Director and Personnel Director are responsible for amending, revising, or otherwise modifying these policies and procedures.

# POLICIES AND PROCEDURES

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## SECTION 3-ALTERNATIVE PAYMENT PROGRAM

**2019-21**

Board of Supervisors Approved: 07/30/19



2019-21  
Policies and Procedures  
Section 3: Alternative Payment Program

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## Part I. Program Overview

The purpose of this program is to provide subsidized child care for eligible children and families living in Contra Costa County and to provide a wide range of child care choices for participants. The CalWORKs Stage 2 child care program is limited to those participants who are in receipt of or have received CalWORKs cash assistance within the last twenty four (24) months. Our California Alternative Payment Program (CAPP) assists families referred by Children and Family Services and low-income families. Both of these programs support families in their child care decisions and make timely payments to their chosen child care providers.

CSB operates in accordance with all applicable state and federal laws governing human service agencies. Directed by the California Department of Education Title 5 regulations, CSB administers the child care subsidy program on a non-discriminatory basis, giving equal treatment and access to services without regard to race, color, creed religion, age, sex, national origin, sexual orientation, disabilities, or any other category that is prohibited by law.

For participants/families/providers that do not speak English, the Child Care Assistant Manager will provide, if available, translated materials, or upon request will provide an interpreter to explain the materials in the language the participants/family/provider prefers.

Children can be served from birth up until their 13<sup>th</sup> birthday, or up to age 21 if special needs are verified with appropriate documentation.

CSB CalWORKs Stage 2 & CAPP child care program administers subsidized child care through a vendor approach, providing full or partial payments for child care of eligible participants. These programs are designed to maximize parental choice in selecting child care. Participants may select child care services from licensed centers and preschools, licensed family child care homes, or licensed-exempt providers. Subsidized child care does NOT pay for private schooling.

### A. How to Qualify for Services

There are various ways that families can qualify for our programs. There are two distinctly subsidized programs that CSB administers, CalWORKs Stage 2 and CAPP (California Alternative Payment Program).

#### 1. CalWORKs Stage 2:

This program is the second out of three stages from the CalWORKs child care services. CalWORKs Stage 2 child care services begins when the county welfare department determines that a CalWORKs Stage 1 family is stable and transfers the family to our CalWORKs Stage 2 program for continuation of child care services.

Families that are not participating in CalWORKs Stage 1 child care services may be eligible in receiving CalWORKs Stage 2 if a family applies and is found eligible by meeting the following criteria:

- Family is and remains income eligible *and*

- Participant is responsible for the care of the child needing child care services *and*
- Participant is a CalWORKs cash aid recipient or a former case aid recipient who received cash aid within the last 24 months *or*
- Participant is determined eligible for diversion services by the county welfare department.
- *And* Participants must have a documented need(s) for child care

The twenty-four (24) month period begins when the participant leaves cash aid. For example, if a participant's last date of cash aid was January 31<sup>st</sup>, 2015, the participant is eligible in receiving CalWORKs Stage 2 until January 31<sup>st</sup>, 2017 (as long as family remains income eligible and maintains a need for child care). Upon approaching the twenty-four month period, families will be transferred to CalWORKs Stage 3 child care. It will be the responsibility of the Child Care Assistant Manager to work with the participant to determine the appropriate stage for child care services. The twenty-four (24) month period resets when the participant begins receiving CalWORKs cash aid.

Please Note: Families receiving CalWORKs cash aid for child aid only are not eligible for CalWORKs Stage 2. Families that are not eligible for CalWORKs Stage 2, will be placed on a waiting list for CAPP, if funding is not available.

## **2. CAPP (California Alternative Payment Program):**

Families may be eligible for CAPP funding based on need and eligibility criteria (such as low income working families), with first priority for those children currently receiving child protective services, or those children who are considered at risk of abuse, neglect or exploitation by a legally qualified professional. Participants must maintain eligibility and need while enrolled in CAPP. Enrollment is based on available funding.

### **B. How Families are selected for the Programs**

There are various ways that families may be selected to participate in one of our programs. Families are enrolled based on the following (*all enrollments are subject to availability of funding*):

- Families may be referred to CSB for enrollment from *Children and Family Services* (CFS), if child is receiving child protective services and it is stated on referral that child care is deemed a necessary part of the service plan.
- Families may be enrolled through an eligibility list maintained by CSB for families wanting to participate in subsidized child care. These lists rank families on their income and family size to ensure the most eligible family is being served at the time of enrollment. (All families with CPS, or at-risk referrals, will be enrolled as 1<sup>st</sup> priority.)
- Families may be transferred to Stage 2 child care services from the Stage 1 child care unit upon discontinuance of cash assistance or when families have been considered stable by their previous child care worker. Families may also be enrolled directly into Stage 2 child care if the family is deemed Stage 2 eligible and meet the eligibility and need criteria.

### C. Enrollment Process

Based on the availability of funding, families will be notified by phone if they are selected to participate in our program. For those families referred by Children and Family Services or for those deemed At-Risk, our office will contact the referring individual to verify the child's need and begin communication regarding enrollment to better support the needs of the family.

Intake Packet for the CalWORKs Stage 2 & CAPP Child Care Program will be mailed to the participant applying for services. Participants may be scheduled for an appointment to review all documents being submitted. Participant must provide all requested information and documentation to determine initial and ongoing eligibility within the timeframe given.

Intake Packet may be completed electronically by the participant by the due date indicated by CSB staff. Digital signature by the participant is accepted, however, participant must comply with CSB's policies.

- At the time of appointment, participants will be required to bring documentation that may include, but is not limited to, the following:
  - Birth records for all children counted in the family size
  - One month current/consecutive paycheck stubs
  - Any other income received such as Cash Aid, Unemployment, Disability, etc.
  - Verification of need for child care such as employment, vocational training, or parental incapacity
  - Immunization records for non-school age children (if chosen provider is non-licensed)
  - If applicable, an active individual family service plan (IFSP) or individualized education program (IEP) for children with special needs that includes a statement signed by a legally qualified professional that the child requires the special attention of adults in a child care setting which also includes the name, address, license number and telephone number of the legally qualified professional who is rendering the opinion
  - Any other verification documentation as requested by the Child Care Assistant Manager to determine the families need and eligibility for services.
  - Provider Packet (see Provider Participation section)

Upon completion of the Child Care Application, the assigned Child Care Assistant Manager will review and verify the information provided by the participant.

Once services are reviewed, verified and approved, the Child Care Assistant Manager will issue a *Notice of Action* (NOA) to the participant and send a copy to the chosen provider indicating certification has been completed. Along with the Notice of Action, the participant will receive one *Child Care Agreement* per child.

- The Child Care Agreement(s) will outline the following:
  - The effective date of the Child Care Agreement

- The end date of the Child Care Agreement
- Name of the Participant
- Name of the Child
- Monthly Family Fee *if applicable* (See Family Fee section for more information)
- Authorized Days
- Authorized Hours
- Payment Rate
- Maximum Payment Amount CSB can reimburse
- Co-payment *if applicable* (See Co-Payment section for more information)
- Authorized Child Care Provider
- Type of Child Care Provider
- Registration Fee *if applicable* (Licensed Providers only)

Important: If child care starts before child care services or provider has been approved by the Child Care Assistant Manager, it will be the participant's responsibility to pay the provider directly for any child care services rendered before child care services has been approved.

For those families transferred from CalWORKs Stage 1 to our CalWORKs Stage 2 child care program, a *Welcome Packet* will be mailed to the participant explaining the transfer has occurred. The packet will contain a letter indicating the effective date of transfer and the contact information for the family's assigned Child Care Assistant Manager. The following documents in the Welcome Packet will include: Welcome Letter, Child Care Agreement(s), the Participation Handbook, attendance sheets, and any other documents pertaining to the case. A copy will be mailed to the child care provider(s) on file.

#### D. Eligibility and Need

##### 1. Eligibility:

Is determined at the time of enrollment, recertification or upon an update on the participant's application because of a reported change. The participant is required to provide to the Child Care Assistant Manager the appropriate documentation to prove their eligibility and continued eligibility for child care. One or more of the following criteria determines their eligibility for child care services.

##### i. Income Eligibility:

If the income is equal to or less than 85 percent of the state median income released by California Department of Education Early Learning and Care Division. Participants will be required to provide supporting documentation for all total countable income. Listed below are the income guidelines by family size:

- The Child Care Assistant Managers will calculate the total gross monthly income of the family based on, but not limited to, the following:
  - Gross wages or salaries, advances, commissions, overtime, tips, bonuses, gambling or lottery winnings

- Wages for migrant, agricultural, or seasonal work
- Public cash assistance (TANF/Cash Aid)
- Gross income from self-employment less business expenses with the exception of wage draws
- Portion of student grants or scholarships not identified for educational purposes as tuition, books, or supplies
- Disability or unemployment compensation
- Workers compensation
- Spousal and/or child support received from the former spouse or absent parent, or financial assistance for housing costs or car payments paid as part of or in addition to spousal or child support
- Foster care grants, payments or clothing allowance for children placed through child welfare services
- Financial assistance received for the care of a child living with an adult who is not the child's biological or adoptive parent

**i. Homelessness:**

If the basis of eligibility is homelessness, documentation is needed stating that the participant is homeless and a description of the family's situation from a local shelter, a legally qualified professional from a medical or social service agency, or a written parental declaration written by the participant.

**ii. Child Protective Services:**

If the basis of eligibility is Child Protective Services, a written referral by the county welfare department must be provided to our agency indicating that the child is currently receiving CPS services and child care is a necessary part of the service plan. The referrals must be dated within six (6) months prior to the date of application for services. The referral must also include:

- The probable duration of the CPS service plan
- The hours approved for child care services
- The name and signature of the child welfare services worker who is making the referral, their business address and telephone number

**iii. At Risk of Abuse/Neglect:**

If the basis of eligibility is that the child is deemed at-risk of abuse/neglect, a written referral by a legally qualified professional from a legal, medical, or social service agency must be provided to our agency indicating that child care is needed to reduce the risk. The referral must be dated within (6) months prior to the date of application for services. The referral must also include:

- The probable duration of the at risk situation
- The hours approved for child care services
- The name, signature and license number of the legally qualified professional who is making the referral, their business address and telephone number

**iv. Transferring from CalWORKs Stage 1 to CalWORKs Stage 2 child care (Cash aid recipient or discontinuing from cash aid):**

If the participant is transferring from Stage 1 to Stage 2, initial documentation (9 data elements) will be required at the time of transfer from Workforce Services Bureau. Upon receiving appropriate documentation, participant's eligibility for child care will be extended twenty-four (24 months) from the effective date of transfer. Participant will be asked to provide documents for recertification..

**2. Family Size:**

Upon completion of participant's initial application, recertification or upon an update in family size, participant will need to provide supporting documentation for all children listed in the family. The family members may be documented by the following:

- Birth records; or
- Court ordered child custody agreements; or
- Adoption records; or
- Foster care placement records; or
- School or medical records; or
- County welfare department records; or
- Any other reliable document indicating the relationship of the child to the parent

When only one (1) parent has signed the child care application and the documentation provided for family size determination indicates the child(ren) in the family has another parent whose name does not appear on the application, then parent may self-certify single parent status under penalty of perjury.

- If due to a recent departure of a parent from the family and when participant requests an update, the remaining applicant may submit a self- declaration under penalty of perjury explaining the recent departure of a parent from the family.
  - The Child Care Assistant Manager may require further documentation at any time to prove the absence of a parent from family and/or verify the family composition and family size.

**3. Service Need:**

Families who are income eligible to receive subsidized child care must also have, at minimum, one of the following service need to become enrolled or remain enrolled in our program. All participants/guardians listed in the family size must have a service need. Hours of care provided to the family will be determined by the family's need for services. Below are the service needs:

**i. Child Protective Services (CPS):**

If the need for childcare is based on CPS, a written referral by the county welfare department must be provided to our agency indicating that the child is currently receiving CPS services and childcare is a necessary part of the service plan. The referrals must be dated within six (6) months prior to the date of application for services. The referral must also include:

- The probable duration of the CPS service plan
- The hours approved for child care services
- The name and signature of the child welfare services worker who is making the referral, their business address and telephone number

**ii. At-Risk:**

If the need for child care is based on the child(ren) being at risk of abuse, neglect, or exploitation, a written referral by a legally qualified professional from a legal, medical, or social service agency must be provided to our agency indicating that child care is needed to reduce the risk. The referral must be dated within (6) months prior to the date of application for services. The referral must also include:

- The probable duration of the at risk situation
- The hours approved for child care services
- The name, signature and license number of the legally qualified professional who is making the referral, their business address and telephone number

**iii. Parental Incapacity:**

If the basis of need for child care is parental incapacity (temporary or permanent), documentation shall include a release signed by the incapacitated participant authorizing a legally qualified health professional to disclose information necessary indicating why the participant is incapable of providing care and supervision for the child(ren). The documentation must also include the following:

- The days and hours per week that services are recommended (Child care services cannot exceed 50 hours per week)
- If incapacitation is a physical condition, a statement from a legally qualified health professional indicating to the extent to which the participant is incapable of providing care and supervision for the children is required
- The name, business address, telephone number, professional license number and signature of the legally qualified health professional

**iv. Employment:**



If the basis of need for child care is employment, families may receive child care services during the time they are working and traveling to and from work. To qualify for child care services under this need, participants would need to submit the following documentation:

- An employment verification form – completed and signed by the participant consenting CSB staff to contact their employer to verify employment.
- One month’s worth of current and consecutive pay stubs (*if new employment, income will initially be assessed based on the employment verification form upon verifying employment with employer*)
- If participant is paid in cash by their employer, participant will provide a letter from the employer verifying the following:
  - An employment verification form – completed and signed by the participant’s consenting CSB staff to contact their employer to verify employment.
  - Statement declaring employee is paid in cash only
  - Self-certification of income from participant
- If the participant is self-employed, the participant will provide the following:
  - A declaration under penalty of perjury that includes a description of the nature of their employment and an estimated number of days and hours worked per week
  - Copies of appointment logs, client receipts and/or mileage logs to demonstrate the days and hours worked
  - As applicable, copy of their business license, or workspace rental agreement
  - As applicable, a list of clients with contact information
  - Provide documentation to establish income (*may include but not limited to, a list of clients and amounts paid, the most recently completed tax returns, other records of income to support the reported income, along with a self-certification of income*)

Please Note: Participants employed by child care centers, or assisting family care home providers may receive services, but those participants who are licensed providers registered with Community Care licensing are not eligible to receive child care services for their own child(ren).

**v. Approved Welfare to Work Activity (*For Stage 2 Participants receiving Cash Assistance*):**

The Welfare-to-Work (WTW) Program is a comprehensive Employment and Training Program designed to promote self-sufficiency. CalWORKs recipients are assessed to determine the best course of action, whether it is immediate placement into a job, placement into an education or training program, or both.

CalWORKs recipients must participate in the Welfare-to-Work Program or be employed in order to determine need for CalWORKs Stage 2. All Welfare-to-Work participants receive an orientation to the program and appraisal of their education and employment background, followed by the

development of a Welfare-to-Work plan designed to assist individuals with obtaining employment. Employment Specialist will forward a referral to the Child Care Assistant Manager in order for child care services to be approved. For any additional hours of child care, the participant must communicate with their Employment Specialist in order for activity to be approved by their worker as well as approval for child care services.

**vi. Training Towards Vocational Goal:**

If the basis of need for child care is training towards a vocational goal, families may be eligible for child care services if the participant(s) are enrolled in a program that will directly lead to a recognized trade or profession. There is a six (6) year limitation for services under this need and the participant must continue to make adequate progress towards their goal. Regardless of the length of time a participant needs to complete their training, child care services must not exceed the six (6) year time limit. To qualify for child care under this need, participants must submit the following documentation:

- Training Verification Form to be signed by registrar (or designee of program). This form includes such information as name and location of school/training institute, days and hours of class/training schedule, vocational goal of parent, etc. *If a printout of current class schedule is available, registrar does not need to sign.*
- A copy of the current class schedule if available in electronic print, if not this information may be indicated on the verification form listed above.
- The anticipated completion date of all required courses/trainings to meet the vocational goal of the parent.
- At recertification, participant will be required to submit their most recent grades to show they are meeting adequate progress towards their vocational goal.
- Participant may request hours for study time for any academic course(s) enrolled. Participant and Child Care Assistant Manager will discuss the hours of study time.

**vii. Actively Seeking Employment:**

If the basis of need for child care is seeking employment, each participant in the home may qualify for child care services during the time they are actively seeking employment. Services must not exceed more than five (5) days per week and for less than thirty (30) hours of child care per week. Participants seeking employment will be required to submit a self- declaration under penalty of perjury that they are currently looking for employment. This declaration will include their plan to secure, change or increase employment and a general description of the child care hours necessary during this time. The Child Care Assistant Manager may request verification of the job search and/or interviews at any time.

### **viii. Seeking Permanent Housing**

If the basis of need for child care is seeking permanent housing, each participant in the home may qualify for child care services during the time they are actively seeking permanent housing. Services must not exceed more than five (5) days per week and for less than thirty (30) hours of child care per week. Participants seeking permanent housing will be required to submit a self-declaration under penalty of perjury that they are currently looking for employment. This declaration will include their plan to secure, change or increase employment and a general description of the child care hours necessary during this time. The Child Care Assistant Manager may request verification of the job search and/or interviews at any time.

## **E. Share of Costs**

### **1. Family Fees:**

Some families may be required to pay a portion of their child care costs, this is called the “family fee”. These fees are paid by the participant directly to their child care provider. Family fees are determined using the “*Family Fee Schedule*” provided by the California Department of Education (CDE). The following determines a participant’s family fee:

- Family’s gross monthly income
- Family Size
- Child’s Certified Need

Based on the above criteria, families will be assessed either a flat monthly full-time fee or a flat monthly part-time fee based on participant’s certified need. If certified need is 130 hours or more per month, the Full-Time Monthly Fee will be assessed to the participant. If the certified need is less than 130 hours per month, the Part-Time Monthly Fee will be assessed to the participant.

*Example: If participant is approved on the 20<sup>th</sup> of the month and is certified for 8 hours per day, participant’s certified need for the month approved will be less than 130 hours. Therefore a flat Part-Time Monthly Fee will be assessed for the month participant was enrolled and a flat Full-Time Monthly Fee will be assessed on the following month and thereafter.*

If there is more than one child enrolled in the program, the child who uses the most hours of child care will be assessed the monthly fee. Monthly fees cannot under any circumstances, be recalculated based on a child’s actual attendance. Family fees are only to be assessed at initial certification, recertification or when a participant voluntarily reports a change to reduce their family fees. The collected family fee is part of the provider’s reimbursement. The family fee is deducted from the provider’s reimbursement each month. The Child Care Assistant Manager will issue a notice of action anytime there is a decrease, an increase or a new family fee with the effective date of change along with the updated Child Care Agreement. An informational copy will be sent to the provider.

*Example: If participant voluntarily reports a change in income requesting a decrease in family fee to the Child Care Assistant Manager, the Child Care Assistant Manager will reassess participant’s income. If at the time of updating participant’s income, it is determined that they will no longer have a family fee or a decrease in family fee, the Child Care Assistant Manager will issue a Notice of Action to the*

*participant. The family fee will be effective on the first day of the month that follows the issue date of the Notice of Action. For example, if a Notice of Action is issued on July 28, 2017, the effective date of the reduced fee would be August 1, 2017.*

Monthly Fees are due at the beginning of each month. Provider will declare on the monthly attendance record that the monthly fee have been paid for the month of services rendered. The provider shall issue a receipt to the participant of the amount family fees were paid. The monthly fee assessed by the Child Care Assistant Manager will still be deducted from the provider's reimbursement each month.

- The following exceptions apply in paying family fees:
  - Families with children at risk of abuse, neglect or exploitation as determined by a legally qualified professional in a legal, medical, or social services agency or emergency shelter (limitation is up to three (3) months).
  - Child Protective Services (CPS) families may be exempt from paying a fee if child development services are determined to be necessary by the county welfare department (limitation is up to twelve [12] cumulative months)
  - Families receiving CalWORKs (limitation is as long as family is receiving cash aid)

## 2. Co-Payments

A participant may choose a child care provider regardless of the provider's rates. If the participant chooses a provider who charges more than the maximum subsidy amount CSB can reimburse, the participant will be responsible to pay the difference directly to the provider. This difference is referred to as a "co-payment". The maximum subsidy amount CSB can reimburse is determined by the California Department of Education (CDE) reimbursement ceiling guidelines. It will be the provider's responsibility to collect payment from the participant. If applicable, the provider will declare on the monthly attendance sheet that co-payments have been paid for the month of services rendered.

***Example:*** Participant's approved certified need for child care is 25 hours per week for their two (2) year old. Participant's child care provider who is a Licensed Family Day Care Home charges \$210 per week for Part-Time Care (less than 30 hours per week). Based on participant's certified need, CSB will only be able to reimburse the maximum subsidy amount of \$205.50 per week for Part-Time care. Therefore, participant will be responsible to pay their provider the difference of what CSB cannot cover which is \$4.50 per week.

Please Note: Family Fees and Co-payments are two different shares of costs. If participant has a Family Fee and a Co-Payment, participant will be responsible in reimbursing both the Family Fee and Co-Payment directly to their provider. Failure to reimburse any shares of cost mentioned above to the child care provider may result in termination.

## F. Maintaining Enrollment

### 1. Recertification

After initial approval, participants are required to recertify their child care services for not less than twenty-four (24) months.

CSB Staff will mail a *Recertification Packet* to be completed within a specified amount of time. Participants are responsible to ensure that all requested documents are submitted before the due date. If participant submits an incomplete recertification packet by the due date requested, their child care services may be denied. CSB staff will attempt to request the missing documentation before the participant's certification end date.

If a recertification packet is not submitted within the timeframe given, a Notice of Action will be issued to the participant terminating their child care services at the end of their contract period. If a recertification packet is submitted after the termination Notice of Action has been mailed out to the participant, the packet may be viewed as a reapplication of child care services. Application will be forwarded to the intake specialist to be reviewed and determine approval or denial of care. There may be a lapse in services if application packet is not completed before the participant's certification end date.

Recertification Packet may be completed electronically by the participant by the due date indicated by CSB staff. Digital signature by the participant is accepted, however, participant must comply with CSB's policies.

## **2. Reporting Changes**

The participant may voluntarily report changes to their family size, income, if participant has been discontinued from cash aid, need for services, address, contact phone numbers, or any other information with regards to their need and eligibility. Examples of change in need for services may include but are not limited to: a change in employment, a change of hours in employment, starting or ending a training, loss of employment, child's school schedule change, leave of absence from employment due to incapacitation, etc. To better accommodate a participant's child care needs, participants are encouraged to report any significant changes to the Child Care Assistant Manager. Participant must call their Child Care Assistant Manager to report the change.

Upon notifying the Child Care Assistant Manager, the Child Care Assistant Manager will

Use information as applicable to reduce the family fee, increase the family's services, or extend the period of eligibility.

Request the documentation in writing to be submitted by the participant within ten (10) calendar days from the date letter was mailed. It is the participant's responsibility to submit the requested documents within the due date. Otherwise, reported change may not be updated accordingly.

Not later than ten (10) business days after receipt of applicable documentation, issue a Notice of Action. The Child Care Assistant Manager will not use any information received to make any other changes to the child care agreement unless it is an increase.

A family may at any time voluntarily request a reduction to their service level. Before a contractor may make any reductions to the service level, a parent shall:

Submit a written request that includes:

- Days and hours per day requested;
- Effective date of proposed reduction of service level; and
- Acknowledge in writing that they understand that they may retain their current service level.

Upon receipt of the parent's written request, the Child Care Assistant Manager shall:

Notify the family in writing of the parent's right to continue to bring their child pursuant to the original certified service level

Collect documentation to support the changes requested, and

Not later than ten (10) business days after receipt of applicable documentation, issue a Notice of Action.

The Child Care Assistant Manager will not use any information received to make any other changes to the child care agreement unless it is an increase.

When a participant is initially certified or recertified on the basis of income eligibility, the participant shall, within thirty (30) calendar days, report changes to ongoing income that causes their adjusted monthly income, adjusted for family size to exceed ongoing income eligibility. The Child Care Assistant Manager will:

At initial certification and recertification, notify the participant in writing of the following:

Of the adjusted monthly income amount, based on the family size, that would render the family ineligible for services, based on ongoing income eligibility requirements

Of the requirement to notify the Child Care Assistant Manager, within thirty (30) calendar days, of any change in ongoing income that causes the family's adjusted monthly income to exceed eighty-five (85%) percent of the State Medium Income.

### **3. Fee Payment/Repayment Plans**

If the family does not meet another basis for eligibility, the Child Care Assistant Manager shall issue a Notice of Action to dis-enroll the family.

All family fees are to be collected by the child care provider. Due dates for these fees will at the beginning of each month, and payment will be acknowledged on the monthly attendance sheets. Fees are delinquent seven (7) calendar days from the due date. It is the provider's responsibility to collect all fees from the participant and notify the Child Care Assistant Manager if fees have not been paid. Upon receipt of notification that the participant has outstanding fees due to the provider, the Child Care Assistant Manager will issue a Notice of Action terminating child care services for Delinquent Family Fees. Participant will have nineteen (19) calendar days to pay the debt owed to the provider, or submit a written reasonable repayment plan signed off by both the participant and provider. If repayment plan is submitted within the nineteen (19) calendar days of the termination notice, child care services will be rescinded. The participant must comply with the repayment plan in order for child care to continue. However, if the provider notifies the Child Care Assistant Manager that the participant is failing to comply with the repayment plan, the family will be disenrolled from the program.

### **4. Alternative Payment Program Policies and Procedures**

By abiding to the policies and procedures outlined in the Participation Handbook, participant may retain their child care services as long as they are eligible to participate. Any violation of the program regulations may result in termination from the program.

## Part II. Alternative Payment Program Parent Policies and Procedures

### A. Reimbursement Policy

#### 1. General Description

Participants are responsible for the accurate completion of the CSB attendance sheets (CCARE5). Attendance Sheets are provider's form of reimbursement. CSB can only reimburse for childcare services, not private school tuition, educational fees, transportation, diapers, clothing items, or other expenses that are not part of the basic child care cost.

Below are criteria for accurate and reimbursable attendance sheets:

- Only original hard copy or electronic attendance sheets will be accepted (one attendance sheet per child and provider). Participant may request additional attendance sheets by calling the main office, emailing the unit or calling their Child Care Assistant Manager.
- Photocopies of an attendance sheets and faxed copies will not be accepted without prior approval from Comprehensive Services Manager.
- The full name of the child receiving services must be provided on the attendance sheets.
- The month/year must be reflected on the attendance sheet
- The specific dates services were provided must be entered on the attendance sheets.
- Attendance sheets must be filled out DAILY. This means each day the participant (or authorized adult) must record the ACTUAL TIME IN when dropping off the child, and again record the ACTUAL TIME OUT when picking up the child. Participant shall not round off the time; the actual time of pick up must be recorded. For school age child(ren) only or split schedule: The provider/authorized representative must sign school age children in and out from school on the attendance sheet using the exact drop off/pick up times.
- The participant must state the reason of child's absence from care (*see absence policy for further information*).
- Signatures and/or date of signatures of both the provider and the participant at the end of each month, attesting under penalty of perjury, that the information provided on the attendance sheet is accurate.
- Should participant make a mistake on the attendance sheet, they should simply cross out the error, initial it and write in the correct information. Correction tape shall not be used or information shall not be transferred to a new attendance sheet. The original attendance sheet must be submitted for reimbursement.

Complete and accurate attendance sheets are due by 5pm on the fifth (5<sup>th</sup>) day of each month following the month in which services were rendered. If the fifth (5<sup>th</sup>) day falls on a weekend, or holiday, attendance sheets will be due by 5pm on the next business day following the fifth (5<sup>th</sup>). Payments for correct and accurate attendance sheets received by the fifth (5<sup>th</sup>) of the month will be processed no later than the last day of the month. Any attendance sheet submitted after 5pm on the

fifth (5<sup>th</sup>) day of the month may be processed no later than the last day of the following month. For example, an attendance sheet submitted on August 7<sup>th</sup> may not be processed and mailed until September 30<sup>th</sup>.

## 2. Incomplete Attendance Sheet(s)

If an attendance sheet is incomplete or have missing documentation required for a reimbursement to be processed, a Provider Reimbursement Notice (PRN) will be issued to the participant and a copy to provider indicating that the reimbursement was not made because of the following reason:

- Missing Signature and/or date of signature from either the participant or the provider at the end of each month, attesting under penalty of perjury, that the information provided on the attendance sheet is accurate
- The full name of the child receiving services must be provided on the attendance sheets (if it occurs more than once, participant or provider must come into the office for completion)
- The month/year is not reflected on the attendance sheet (if it occurs more than once, participant or provider must come into the office for completion)

Important: If an attendance sheet is received on or before the fifth (5<sup>th</sup>) of the month, but is missing one or more of the items listed above, and depending upon the date of completion, the attendance sheet will be considered late and may be processed the following month.

## 3. Invalid Attendance Sheet(s)

The California Department of Education (CDE) code of regulations 10865(b)(1) requires that attendance sheets be filled out properly by the participant or other adult authorized by the participant. CDE has directed all child care contractors to develop a policy to ensure that attendance sheets are completed on a daily basis using actual times. This policy will be strictly enforced when attendance sheets are submitted that appears to have not been filled out on a daily basis with ACTUAL TIME IN and ACTUAL TIME OUT.

In an effort to support participants and providers and to comply with all regulations, the following three step policy shall be implemented when suspect attendance sheets are received:

Step 1: Participant will be contacted by the Child Care Assistant Manager to verbally warn them the problem with the attendance sheet and explain how to complete the form correctly. Participants will be advised the next time this occurs, they will receive an advisory letter.

Step 2: An Advisory Letter will be sent to the participant, and copied to the provider, that explains the exact problem with the attendance sheet and includes information on how to complete the form correctly. Participants will be advised the next time this occurs they will be asked to come in to the office to review attendance sheet procedures with their Child Care Assistant Manager.

Step 3: An appointment will be set up between the participant and Child Care Assistant Manager to review attendance sheet policies. The participant will be advised should the problem occur a fourth time, they will be disenrolled from the program for failure to comply with program policies. At this time the provider will be mailed a letter indicating the participant has been to our office or via telephone to review policies



and has been warned of possible termination.

Step 4: Participant will be disenrolled from the child care program. Participant and provider will receive appropriate documentation regarding termination.

At the beginning of each fiscal year (July 1<sup>st</sup>), any steps participant previously had will reset. Participant will start at Step 1.

#### **4. Definition of Broadly Consistent**

In an effort to ensure the full use of the certified child care, participant's hours of care on the attendance sheet must be broadly consistent with the child care agreement. Broadly consistent is defined as participant's utilization for child care being between eighty (80%) to one hundred twenty (120%) percent from the certified child care agreement.

*Example: If the certified need for the month of February is a maximum of 180 hours per month, utilization for child care must be no less than 144 and no greater than 216 hours for February in order for CSB to reimburse without contacting participant.*

- When the participant's utilization of the certified child care agreement falls below the 80% or over 120% threshold, the following shall occur:
  - The participant will be called to discuss the low or high use of child care based on the monthly attendance sheet submitted. The Child Care Assistant Manager will inform participant of their right to continue using child care based on their approved certified hours regardless of a change in participant's need or if services may need to be increased.
  - For participants with a variable schedule and/or unpredictable schedule, reimbursement will be based on the actual days and hours for which services were provided, but no more than the maximum certified need for services.

Please Note: Absences due to illness or emergency will be considered prior to Child Care Assistant Manager contacting the participant. On a case by case, Child Care Assistant Manager may contact the participant if child has excessive absences on a monthly basis.

#### **5. Reduction in Reimbursement**

It is the intent of CSB to reimburse child care providers for the care provided. However, there are limitations in which CSB cannot reimburse child care providers. The following are possible examples that reimbursement will be reduced by CSB:

- Participant started child care services prior to approval from the Child Care Assistant Manager
- Provider was NOT available to provide child care (includes when the provider is sick, days not listed on the Provider Self Declaration, etc.)
- Any child care used by the participant when the hours and/or days of child care fall outside of the

### Child Care Agreement

The provider must notify CSB if a participant withdraws from care without advance notice, has been absent for five (5) or more days without knowledge.

The provider may charge the participant and obtain payment directly from the participant for these absences. It is the participant's responsibility to pay any charges for unauthorized care to the provider.

A Provider Reimbursement Notice (PRN) will be issued to the participant and a copy to provider regarding a reduction for the above reasons.

### 6. Denial of Reimbursement

Attendance sheets may not be reimbursed and may be denied by CSB for any, but not limited to, the following reasons:

- They are received sixty (60) days after the month of which services were rendered (*i.e. an April attendance sheet received in July will not be reimbursed*).
- If after sixty (60) days after the month of which services were rendered, parent or provider fails to complete the full name of the child receiving services on the attendance sheet.
- If after sixty (60) days after the month of which services were rendered, parent or provider fails to complete the month/year on the attendance sheet.
- If after sixty (60) days after the month of which services were rendered, parent and/or provider fails to sign or date under penalty of perjury, that the information provided on the attendance sheet is accurate.
- Provider was not approved at the time child care services were provided, no exceptions.
- Participant or child were not approved at the time child care services were provided, no exceptions.

A Provider Reimbursement Notice (PRN) will be issued to the participant and a copy to provider regarding a non-reimbursement for the above reasons. Exceptions may apply to some of the above reasons, however, must be approved by a supervisor prior to reimbursement.

### B. Temporary Suspension of Services

A family may request a leave of absence from the program if the family temporarily does not have a need for subsidized child care. They may contact their Child Care Assistant Manager to request the leave over the phone or submit a written request for a temporary leave from services. CSB may grant the family a limited term service leave for no more than twelve (12) consecutive weeks per fiscal year, except when the participant is on a maternity or medical related leave of absence from his/her employment or vocational training.

Maternity leave, or medical limited term service leave, shall not exceed sixteen (16) consecutive weeks in duration. During this time no child care services shall be provided nor be claimed for reimbursement. Participants may be required to provide documentation from their physician prior to going on leave and

again when released.

At the time of authorized reinstatement, when the service leave ends, CSB cannot pay another registration or other new provider charges.

Please Note: It is important to remember that providers do not have to hold child care spaces throughout the leave and participants may need to seek a new child care provider(s) upon their return from leave.

### C. Confidentiality

The use or disclosure of information about the child and his/her family is limited to purposes directly connected with administering the program. When helping participants/families move to another subsidized program, information about the participant/family may be exchanged and the other program or provider is then bound by these same confidentiality guidelines. Participant or their authorized representatives may review the case file upon request and at the time and place considered reasonable by CSB. Participant may only review the forms or other documentation/information that they have provided CSB and are in their own case file.

When a Contra Costa County employee or a client to whom an employee has a relationship with as defined above is applying or receiving child care services, the case will be considered Confidential. Employees will not process any action involving their own case, or the cases of family members or those with whom they have a relationship like a family member or close friend. Employees who are not sure if there is a conflict of interest should check in advance through their supervisor to ensure that this policy is not violated. Files considered confidential will be locked in a designated location of which only the authorized employees and supervisors will have access.

### D. Release of Information

CSB is authorized to discuss information regarding the family's child care services and eligibility with other agencies as appropriate. Examples may include but not limited to other Social Services Programs, CFS, employers, schools, child care providers, licensed physicians. Prior written consent from the participant may be asked by CSB. The participant's eligibility may be reviewed by representatives of the State of California, the Federal Government, independent auditors, or others as necessary for the administration of the program.

### E. Fraud Policy

Fraud is the knowing misrepresentation of facts made with the intent to obtain something to which one is not entitled. Fraud exists when an individual:

- Makes a false statement or representation to obtain benefits, or continuation of benefits that they are not eligible to receive
- Fails to disclose information, which if disclosed would result in denial, reduction, discontinuance of child care benefits
- Accepts benefits knowing she/he is not entitled to them

The California Department of Education (CDE) requires that CSB create a Fraud Policy, which applies to program participants and providers receiving reimbursements through CSB. If fraud is suspected, CSB will initiate investigation, pursue collection of payments and may seek legal assistance made through fraudulent participant and/or provider action.

Any participant or provider whose participation is disenrolled under the Fraud Policy will not be eligible to participate in the CSB CalWORKs Stage 2 & CAPP Child Care Program for a minimum of twelve (12) months. Any past debts or expenses must be paid in full prior to return.

#### F. Grievance Policy

It is the policy of CSB to resolve any participant or provider grievances. What is a grievance? A grievance is a complaint over a situation or an action to be deemed wrong or unfair. There will be no retaliation, formal or informal, against the participant and/or provider who file a grievance. All participants and/or providers are encouraged to first speak with the Child Care Assistant Managers to attempt to resolve any issues that may arise. If the issue is not resolved to the participant and/or provider's satisfaction, the participant and/or provider may file a written request within ten (10) calendar days from the date of complaint. The written request should be submitted to the Program Supervisor.

Upon receiving participant and/or provider's written request, the Program Supervisor will review the complaint and meet with the participant and/or provider by phone, or by appointment, to discuss the issue within ten (10) calendar days of receiving the complaint. If the participant and/or provider still feels dissatisfied, they may submit a written request for the issue to be elevated to a staff at least one level higher than the Program Supervisor who made the contested decision. The participant and/or provider will be contacted within ten (10) calendar days of receiving the complaint and given an opportunity to present their concerns. The decision at this level will be final.

#### G. Uniform Complaint Policy

It is the intent of the Community Services Bureau to fully comply with all applicable state and federal laws and regulations.

Individuals, agencies, organizations, students and interested third parties have the right to file a complaint regarding Community Services alleged violations of federal and/or state laws. This includes allegations of unlawful discrimination (ED Code Sections 200 and 220 and Government Code Section 11135) in any program or activity funded directly by the State or receiving federal or state financial assistance. Complaints must be signed and filed in writing with:

The California State Department of Education Early Education  
and Support Division Complaint Coordinator  
1430 N Street, Suite 3410  
Sacramento, CA, 95814

If the complaint is not satisfied with the final written decision of the California Department of Education, remedies may be available in federal or state court. The complainant should seek the advice of an attorney of his/her choosing in this event.

A complainant filing a written complaint alleging violations of prohibited discrimination may also pursue civil law remedies, including, but not limited to, injunctions, restraining order, or other remedies or orders.

## H. Sexual Harassment

It is the policy of Contra Costa County to maintain a work, service and program environment free of discrimination, harassment, or intimidation based on sex, gender, age, race, religion, national origin, ancestry, marital status, sexual orientation, disability or medical condition. These policies are also mandated by state and federal law. It is the policy of the Community Services Bureau to comply with all applicable state and federal statutes and regulations prohibiting discrimination in employment, contracting, buildings, facilities, and provision of services. Reports of violations of these policies will be promptly investigated and appropriate disciplinary action taken if warranted.

## I. Zero Tolerance

CSB prohibits inappropriate behavior towards staff, or in the presence of families, children or providers on the program. Such use of abusive/foul language, intimidating actions (including belligerent emails and voicemails), physical harassment, destruction of property, threats to staff, etc., will be documented and may lead to termination from the program.

## J. Disenrollment Policies

Child Care services may be disenrolled for any, but not limited to, the following reasons:

- Failure to maintain required ongoing need and/or eligibility at recertification
- Failure to recertify in a timely manner
- Failure to pay family fee or co-payment
- Failure to make payments to licensed exempt in-home providers in a timely manner
- Failure to use services for sixty (60) consecutive days, or two (2) consecutive months
- Violation of the Zero Tolerance policy towards staff
- Failure to comply with the State mandates requirements of the program
- Families income exceeds the state income ceiling
- Children are no longer age appropriate for the program with which they are enrolled, and family cannot provide required documentation to maintain services past that age (i.e. IEP)
- Failure to maintain a 2.0 GPA if services are based on a vocational training need
- Failure to abide by attendance policies and reimbursement guidelines
- Contract funding has been exhausted

## K. Notice of Action and Appeal Process

Whenever CSB approves, denies, terminates or updates a change regarding participant's child care, CSB will issue the participant a Notice of Action and send an informational copy to the provider(s). The Notice of Action will notify the participant of the following:

- Tell participant what action is being taken (approval, denial, recertification, change or

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termination)

- The reason for the action
- The effective date of the action
- The date participant has to appeal CSB's action

If a participant disagrees with an action taken by CSB, the participant may file an appeal request for a hearing with Employment and Human Services Department Appeals Unit. To request a hearing, participant must complete the back page of the Notice of Action no later than the appeal's date on the first page of the notice and mail or deliver the notice to the following address:

*Office of Appeals Coordinator  
400 Ellinwood Way  
Pleasant Hill, CA 94523  
(925) 677-2900*

At the local hearing, the Appeals Officer will explain the reason for the hearing and will ask both CSB representative and participant to swear under oath. The hearing will be recorded by the Appeals Officer. CSB will state the reason for the Notice of Action and provide any supporting documentation that supports their action. The participant or authorized representative will be able to explain the reason why they think the action on the Notice of Action is wrong. The participant may bring any documentation that supports their reason why the action was wrong.

The Appeals Officer will make a decision based on the information provided at the hearing. Within ten (10) calendar days after the local hearing, the Appeals Officer will mail their written decision.

If the participant disagrees with the written decision of the local hearing, the participant may request a review of the local decision by the California Department of Education. The request must include the following information:

- A copy of both sides of the original Notice of Action with which participant disagrees
- A copy of the written decision letter from the local hearing; and
- A statement explaining why participant disagrees with the local Appeals Officer's decision.

Participant may mail, fax or deliver their request within fourteen (14) calendar days from the date of local agency's decision letter to the following address:

California Department of Education Early Education and Support  
Division ATTN: Appeals Coordinator  
1430 N Street, Suite 3410  
Sacramento, CA 95814  
Phone: (916) 322-6233  
Fax: (916) 323-6853

CDE will review the information provided and may contact the participant or CSB if necessary. CDE will have thirty (30) calendar days to make a decision and mail a final decision letter to the participant and CSB. CDE's decision is the final administrative decision and CSB will follow CDE's decision.

## Part III. Provider Participation

### A. General Requirements - Parental Choice

CSB policies provide for parental choice in selecting a child care provider. Participants are responsible for selecting the child care provider and the type of care, which they feel best, meets the needs of the family and meets enrollment requirements. However, CSB may reserve the right to deny or terminate a provider for the health and safety of the child/ren. Participants also have the right to change providers (up to two [2] changes per fiscal year) while they are participating in the child care program (unless the participant can provide reasonable concerns for more changes). Participants may choose the following types of care while enrolled in one of our programs:

#### 1. Licensed Child Care Centers, Licensed Exempt Centers & Licensed Family Child Care Homes

Child care centers and family child care homes are all licensed by the California Department of Social Services Community Care Licensing division, which ensures all standards of health and safety criteria are being met. These programs will be required to submit and comply with the following:

- A complete Child Care Provider & Parent Statement by both the participant and provider
- A complete Agreement For Direct Payments To Child Care Providers by both the participant and provider
- A complete Provider Self Declaration listing a maximum of ten (10) non-operational days charged to families
- A copy of their current license
- A copy of their current policies, rules and rates
- A complete W-9 Form (request for Taxpayer Identification Number and Certification)
- Provide services to all eligible children on a non-discriminatory basis, giving equal treatment and access to services without regard to race, color, creed, religion, sex, national origin, or any other category that is prohibited by law
- Providers must report observed and/or suspected child abuse to the local police departments and/or Children and Family Services and refrain from all forms of punishment, cruelty, and/or physical/corporal punishment
- Providers must maintain confidential child and family records and other information with the exception of authorized disclosures to CSB staff or other authorized State or Federal agency staff in accordance with the law
- Allow CSB to visit licensed facilities if requested
- Provide care for children only during the period authorized
- Enter into Child Care Provider Agreement with CSB as an independent contractor and in no way be considered an employee of CSB or any of its funding sources
- Hold CSB harmless for any damages to person(s), or property, which arise out of the delivery of services under agreement with CSB

- A statement signed by the provider that the child care and development services being provided do not include religious instruction or worship. An exception may be for those participants enrolled in the Alternative Payment Program (CAPP).
- Sign the CalWORKs Stage 2 & CAPP Child Care Participation Program Handbook Acknowledgement of Receipt understanding and following CSB's policies

## 2. Licensed-Exempt Providers

Licensed-exempt providers are not licensed by the State of California. Participants are responsible for hiring, terminating services, and setting up the days and hours when care will be used. Licensed-exempt child care providers must be on the Trustline Registry or be exempt from Trustline in order to participate as an approved child care provider. The following are types of License-Exempt Providers:

- License Exempt Providers Exempt from Trustline  
Who is exempt from Trustline? Providers who are the child/ren's grandparent, aunt or uncle by blood, marriage or court decree are exempt from the Trustline registration. Participant and provider must complete the Trustline Exemption Form as well as provide proof of relationship between the child and the provider.

*Example: If the chosen provider is the child's grandparent, the participant may submit their birth certificate to demonstrate that provider is their parent and therefore the child/ren's grandparent.*

If no documentation can be provided, the grandparent, aunt or uncle must complete the Trustline Registration Process and be cleared and placed on the Trustline Registry before services can be approved by the Child Care Assistant Manager.

- License Exempt Providers not exempt from Trustline  
License exempt providers not exempt from Trustline, must go through the Trustline Registration Process to get fingerprinted through the Department of Justice (DOJ) and the Federal Bureau of Investigation (FBI). The provider must be cleared and placed on the Trustline Registry prior to child care services being approved. Participants must contact their Child Care Assistant Manager to request a Trustline Application.
- Provisional License Exempt Providers (not exempt from Trustline)  
In cases where the participant has an immediate need for child care services, the participant is allowed to select a provisional child care provider. However, the Provisional child care provider must go through the Trustline Application Process to get fingerprinted through the Department of Justice (DOJ) and the Federal Bureau of Investigation (FBI). The provider MUST be cleared and placed on the Trustline Registry within thirty (30) days in order to be eligible for reimbursement. If the provider is not cleared within the thirty (30) days, no reimbursement can be given for any child care services provided. Services will be approved on the day provider was cleared and placed on the Trustline Registry.



Participants must also submit the following documentation regarding their chosen license exempt provider:

- A complete Child Care Provider & Parent Statement by both the participant and provider (indicating the hours and rate of pay for child care)
- A complete Agreement For Direct Payments To Child Care Providers by both the participant and provider
- Health and Safety Self-Certification Form indicating the following:
  - The provider's name, date of birth, address, phone number and social security number
  - A description of the provider's qualifications and experience
  - A health statement, including Tuberculosis clearance
  - A statement from the parent that he/she has interviewed and approve of the provider
  - Names and ages of all other adults residing in the home where the child care is provided
  - All forms signed by both the parent and provider, as appropriate
  - The location where the care is to be provided
- Health & Safety Facility Checklist (a supplement to the Health & Safety Self Certification form)
- A complete W-9 Form (request for Taxpayer Identification Number and Certification)
- A copy of provider's California driver's license or a valid California ID verifying the provider to be at least eighteen (18) years of age
- A copy of provider's Social Security Card
- Provide care for one (1) family at a time and only during the period authorized
- Enter into Child Care Provider Agreement with CSB as an independent contractor and in no way be considered an employee of CSB or any of its funding sources
- Hold CSB harmless for any damages to person(s), or property, which arise out of the delivery of services under agreement with CSB
- Sign the CalWORKs Stage 2 & CAPP Child Care Participation Program Handbook Acknowledgement of Receipt understanding and following CSB's policies
- In-Home Child Care Provider (*for In Home Licensed Exempt Providers only*)

License-exempt providers must only provide care for only ONE family at one time other than their own. If it is found that a license-exempt provider is providing care for two (2) or more families at one time, they may be terminated as a provider and the families will need to find an alternate provider.

In Home Licensed Exempt Providers – Since child care providers are independent contractors and therefore not employees of CSB, CSB is not held responsible for federal and state tax obligations. If it is determined that the child care provider performs child care in the home where the child resides, the participant may be considered to be the employer of the child care provider (domestic worker) and will be responsible to ensure

the child care provider receives minimum wage, social security taxes, state worker's compensation and unemployment requirements. In order to ensure that minimum wage is being met, the participant must have at a combination of at least three to four (3-4) children depending on child's age, receiving child care services. In-home licensed exempt child care may be subject to Federal and California laws pertaining to household employees.

Please Note: Families transferring directly from CalWORKs Stage 1 to CalWORKs Stage 2 that have an In Home Licensed Exempt Provider will be given a timeframe to find alternate child care.

1099 Hotline - Contact (877) 375-0312, during tax season if 1099 is not received.

## B. Oliver's Law

Participants have the right to receive information regarding any substantiated or inconclusive complaint about any licensed child care provider. That information is public and can be acquired by calling Contra Costa County's local licensing office at (510) 622-2602.

## C. Rate Sheets

Licensed Providers shall submit a statement of their current rates to CSB. Rates must be the same for both subsidized and private paying families. If the provider charges more than the current Regional Market Rate allows CSB to pay, the participant will be responsible to pay the difference directly to the provider. If a provider offers any discount for siblings, the subsidized family will offered the same discount.

Providers must submit a written thirty (30) calendar day advanced notice addressed to the Program Supervisor of any changes to their rates; all rate increases are subject to availability of funds. New rate increases will take in effect thirty (30) calendar days after receipt of notice. CSB will only accept one (1) rate change from providers per fiscal year (July 1<sup>st</sup> – June 30<sup>th</sup>).

## D. Child Care Agreement

Upon approval or update of child care services, the Child Care Assistant Manager will issue a Notice of Action indicating initial approval for services or change in services and will be accompanied by a *Child Care Agreement* that will outline the schedule approved for services as well as indicate if the child has a Family Fee and/or Co-payment. It is the participant's responsibility to review the approved child care agreement and notify the Child Care Assistant Manager of any questions.

Important: If provider starts providing services before the agreement has been approved, the participant will be responsible to reimburse for any services rendered before the certificate start date on the *Child Care Agreement*.

## E. References to Written Information

All providers are subject to the general policies described in the CalWORKs Stage 2 & CAPP Child Care Participation Program Handbook. Providers are encouraged to become familiar with the parental

requirements, as well as those identified for child care providers.

## F. Limitations on Child Care Reimbursement

### 1. Regional Market Rate (RMR)

Beginning January 1<sup>st</sup>, 2018, California Department of Education required all agencies to implement ceilings at the 75<sup>th</sup> percentile of the 2016 Regional Market Rate Survey. Licensed exempt child care is reimbursed up to 70% of the Family Child Care Home rates. This is referred to as the Regional Market Rate (RMR). *This rate is subject to change, if directed from the California Department of Education (CDE).*

Children attending less than thirty (30) hours of child care per week will be reimbursed at the part-time benefit ceiling and children attending thirty (30) hours or more will be reimbursed at the full time benefit ceiling. Those families that have variable schedules will be assessed by the Child Care Assistant Manager and assigned the most appropriate ceiling for their needs.

Should the participant choose a provider with a rate exceeding that exceeds the maximum subsidy amount, the participant will be responsible in paying the difference. This is referred to as a co-payment. This is paid by the participant to the provider directly and not accounted for by CSB (see example on Share of Cost-Co-Payments).

If the provider has a registration fee (*licensed providers only*) the rate for reimbursement will be determined by State guidelines and may be paid no more than once a fiscal year if the provider meets eligibility requirements.

### 2. Provider Days of Non-Operation

CSB will only reimburse for up to ten (10) days of non-operation (per fiscal year) to a licensed provider when the center, or family child care home, is closed if they fall on a contracted day. The provider **MUST** list the days of non-operation on the *Provider Self Declaration* form to be eligible to receive payment. If more than ten (10) days are listed, Child Care Assistant Managers will review the non-operational days with provider to determine which of the ten (10) would be reimbursed. Days of non-operation may include, but are not limited to the following:

- Holiday (i.e. New Year's Day, Christmas, Labor Day)
- Provider Vacation Days
- Staff Training/Development Days

This does not apply to child care in which the provider charges an hourly rate or has a drop-in rate.

### 3. Instructional Minutes for School Age Children

Providers will **NOT** be reimbursed for child care provided for a school age child/ren care during instructional minutes, whether they are attending public or private schools.

#### 4. Reduction or Denial of Reimbursement

See Reimbursement Policy.

#### G. Multiple/Alternate Providers

CSB can only reimburse one provider per child for child care services. However, there are some exceptions:

1. If a family's need exceeds the hours of operation of the first provider, the participant may add an alternate provider to cover the hours the primary provider is closed. Child Care Assistant Manager must approve the alternate child care provider prior to the use of care. CSB will contract separately with the alternate provider for child care services. If participant begins the use of alternate provider before approval from Child Care Assistant Manager, participant must reimburse alternate provider for any unauthorized care.
2. If a child's usual child care provider is closed, or if the child is sick and cannot attend the usual care, the participant may request to seek an alternate child care provider. Child Care Assistant Manager must approve the alternate child care provider prior to the use of care. CSB will contract separately with the alternate provider for child care services. Upon approval of the alternate provider, reimbursement for alternate provider when primary provider is closed is limited to 10 days per fiscal year. Reimbursement for alternate provider when child is sick and cannot attend primary provider is also limited up to 10 days per fiscal year. CSB may make an exception based on the illness and if participant provides written documentation from physician.

#### H. Participant's Rights to Change Providers & Rights to Terminate Services

Participants have the right to change their providers, up to two (2) per fiscal year, unless they can provide the Child Care Assistant Manager with reasonable concerns for more changes. CSB asks all participant to provide a written (preferable), or verbal, two (2) week notice to their licensed provider regarding the termination of care. The Child Care Assistant Manager will follow up with any notifications necessary.

Should the participant not give a two (2) week notice to the licensed provider, CSB will work with the licensed provider and offer any reimbursement as required by the licensed provider's established policies and procedures submitted with the initial approval of care (not to exceed two [2] weeks). Participants may be disenrolled from the program due to abandonment of care.

**IMPORTANT:** The attendance sheet must meet the minimum requirements in order to honor the two week notice when the participant does not give a two week notice to their child care provider. See *Reimbursement Policy*.

#### I. Provider's Rights to Terminate Services

A licensed provider may terminate services with cause in adherence to his/her established policies and procedures and with a two (2) week advance notification to the participant and the Child Care Assistant Manager. Should a licensed provider terminate a family without notification, CSB will not reimburse any days past the child's last day of care.

#### J. CSB's Rights to Terminate a Provider

CSB reserves the right to terminate a provider from participation with or without a two weeks' notice. Reasons for termination may include but are not limited to the following:

- Child/ren's health and safety is at risk (*all providers*)
- Closure or denial of Trustline Registry (*licensed-exempt providers*)
- Child care license revoked (*licensed providers only*)
- Falsifying attendance sheets in any manner (*all providers*)
- Charging subsidized families more than non-subsidized families (*licensed providers only*)
- Providing care for more than one family other than their own at one time (*licensed-exempt providers*)
- Using abusive language and behavior to staff, children or participants (*all providers*)

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**Part IV Staff Roles and Responsibilities**

**A. Stage 2/CAPP Unit Clerks**

- Administrative Support to Unit Managers
  - Program Calendars
  - Form Revisions
  - Mass Mailings
  - Other clerical tasks as assigned by Assistant Managers
  - Complete Reports (such as 801 A Report)
- Reimbursement Calculations
  - Collect, review and distribute incoming CCAREs to appropriate staff
  - Perform initial reimbursement calculations for Assistant Managers
- Incoming Phone Calls
  - Check and empty Stage 2/CAPP Unit General Voicemail
  - Return all calls within 24 hours of retrieving the message
  - Answer and forward calls to appropriate staff member
- Mail Process
  - Log all incoming mail in database
  - Forward mail to appropriate staff member
- Scanning Process/Document Record Keeping
  - Scan and Index all documents into Northwoods Compass database
- Stage 1 Transfers
  - Prepare and send Welcome Packets
  - Prepare Family Files
  - Coordinate with Unit Manager on case assignments
- Intake Applications
  - Prepare and mail intake packets
  - Collect and verify all documentation
  - Forward packet to appropriate Assistant Manager upon completion
- Family Recertification's

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### Section 3: Alternative Payment Program

- Prepare and mail recertification packets
- Collect and verify all documentation
- Forward packet to appropriate Assistant Manager upon completion
  
- Suite Support
  - Monitor office supplies
  - Monitor Postage Meter
  - Monitor office equipment

### B. Stage 2/CAPP Unit Child Care Assistant Managers (CCAM)

- Case Management
  - Initial intake for new/transferred families
  - Verify documents
  - Coordinate with referring agencies about prior case information
  - Review selection of provider(s)
  - Monitor families need and eligibility
  - Family/Provider Correspondence as needed
  - Recertify families need/eligibility for services at minimum once annually
  - Termination procedures where appropriate
  
- Process Reimbursements
  - Review calculations
  - Process payments into CalWIN system for fiscal review/release
  
- Attend Appeals hearing if needed
  
- Monitoring/Audits/Reviews
  - Quarterly monitoring of selected family files
  - Assist Unit Manager with fiscal and/or state audits and reviews of program
  - Prepare family files as needed for reviews

### C. Stage 2/CAPP Unit Manager – (CSM)

- Reports
  - Monthly Report to Program Director
  - Monthly liaison to fiscal
  - Fiscal Audits/State Reviews as scheduled
  
- Personnel
  - Supervise Student Worker Assignments

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- Supervise Field Intern Assignments
- Supervise Clerks
- Supervise Child Care Assistant Managers
  
- Program Handbook
  - Revisions per CDE regulations
  - Annual Update if applicable
  
- CDE Regulations
  - Monitor Management Bulletin Releases
  - Participate in CDE conference calls regarding program regulations as needed
  - Review Title 5 and Education Codes as they pertain to program implementation.
  
- Client/Provider Correspondence
- Stage 1 Transfer Process
  - Monitor incoming Stage 1 transfer process
  - Assign cases to CCAMs
  - Review potential cases to be transferred out to Child Care Council
  
- Monitoring
  - Review monthly reimbursements
  - Monitor CCAM Caseloads
  - Review terminations
  - Monitor Unit calendar
  
- Miscellaneous
  - Order office supplies for Suite
  - Approves requests for equipment/work orders

**D. Stage 2/CAPP Fiscal Support (Accountant III)**

- Review and release payments to providers in CalWIN in the absence of Program staff
- Monitor program budgets
- Release payments for Maintenance of Effort contracts
- Submit to State CDE/ELCD monthly Fiscal and Caseload reports
- Submit to CDE projection request for additional funding in excess of MRA
- Submit year-end financial reports and schedules to External Auditors
- Correspond with Unit Manager/Program Manager



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**E. Stage 2/CAPP Program Manager (ASA III)**

- Program Support for CDE/ELCD Programs
- State Correspondence/Management Bulletins
- Liaison with CDE/ELCD
- Quarterly Monitoring
- CDE/ELCD Contract initiation/renewal
- Reports/Program Self-Assessments to CDE/ELCD
- Supervise Unit Manager (CSM)
- Liaison with Stage 1/WFS, Child Care Council and CalWIN
- State Audit/APMU/Independent Audit
- Review MOE Payments
- Agency's CWDA Child Care Representative

# POLICIES AND PROCEDURES

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## SECTION 4-LOW-INCOME HOME ENERGY ASSISTANCE PROGRAM

**2019-21**

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Section 4: Low-Income Home Energy Assistance Program

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## A. Introduction

### 1. Program Overview

The Low-Income Home Energy Assistance Program (LIHEAP) is a federally-funded program that assists low-income households with their utility bill. Eligibility is based on the household's total monthly income that is provided by Department of Community Services and Development on a yearly basis. This assistance is targeted to households with low income and high energy costs, taking into consideration households with elderly, disabled persons, and children under six. The amount of assistance is based on the number of household members, total gross household income, the cost of energy within Contra Costa County and funding availability.

In addition to helping with a household's utility bill, LIHEAP offers free weatherization. Weatherization is the process of making a household more air tight and energy efficient. Weatherizing a home can help lower a household's energy usage and utility costs.

### 2. Types of Assistance Available

#### i. Utility Assistance

HEAP: Pay the amount eligible of an applicant's utility bill.

Fast Track: LIHEAP funds are available in case of a crisis/emergency situation. Staff is required to resolve an energy crisis situation within forty-eight (48) hours and a life threatening energy situation within eighteen (18) hours.

#### ii. Weatherization Assistance

Weatherization: The weatherization program provides services designed to reduce heating and cooling costs to improve the energy efficiency of a home, while safeguarding the health and safety of the household. Weatherization is supported through the partnership with Department of Conservation and Development (DCD).

ECIP EHCS: LIHEAP funds are available to low-income families in case of a crisis/emergency situation. DCD staff is required to resolve an energy crisis situation within forty-eight (48) hours and a life threatening energy situation within eighteen (18) hours.

### 3. Service Center Locations

- i. LIHEAP Utility Assistance: 1470 Civic Ct. Suite 200, Concord, CA 94520, Phone: 925-681-6380, Fax: 925-229-6784
- ii. Weatherization Assistance: 30 Muir Rd, Martinez, CA 94553, Phone: 925-674-7214, Fax: 925-646-9339

## B. LIHEAP Eligibility Guidelines

### 1. General Guidelines

Applications are received via mail, email, fax, or drop-in. Applicants for all utility assistance and/or weatherization programs must meet the following for eligibility:

- Must be 18 years of age or older
- Be a resident of Contra Costa County
- Meet the definition of a household
- Housing unit must meet the definition of a dwelling
- Provide proof of citizenship or alien status
- Meet the income guidelines and provide proof of income from all sources for all members of the household.
- Be responsible for energy costs and provide copies of utility bills
- Receive energy/budget counseling
- Meet agency's priority plan
- Submit all applicable documentation to complete application process. Other eligibility requirements for Fast Track Assistance/ECIP EHCS/SWEATS must be submitted.

### 2. Household Composition

An eligible household is defined as an individual or group of individuals, related or unrelated, who share residential energy and have an energy cost.

Ineligible households for utility assistance consist of the following:

- Subsidized households that do not pay any out of pocket energy costs.
- Persons living in licensed facilities (nursing homes, assisted living, etc.).
- Temporary shelters or group homes with residents who have no energy expense or who pay a nominal fee to live there.
- Single room dwelling, within a larger dwelling and the single room dwelling is not considered a separate household.
- Persons who have no physical address.
- Individuals who previously received Utility Assistance (UA) in another LIHEAP household during the same program year are considered ineligible household members to receive services. However, his/her income is counted in the household's total income.
- Applicants under the age of 18 who are not legally emancipated and do not have a parent or legal guardian to apply on their behalf.

Ineligible households for weatherization consist of the following:

- Persons living in licensed facilities (nursing homes, assisted living, etc.).
- Persons who reside in only one room within a larger dwelling and is not considered a separate household.

- Persons who have no physical address.
- Applicants under the age of 18 who are not legally emancipated and do not have a parent or legal guardian to apply on their behalf.

The following exceptions on ineligible household members apply to both Utility Assistance and Weatherization:

- Live-in Attendants - Individuals who reside within a household to provide necessary medical services and whose services are paid for in part or in full by a third party.
- Persons living in multi-unit buildings - If a building contains more than one housing unit, but has only one meter or tank that is shared by all the units, each unit may contain a separate household if each one functions as a separate economic unit (also known as submetered).
- A person out of the home for reasons of employment, education, hospitalization, etc., who continues to support or be supported by the unit and who intends to return to the unit, will remain a member of the household.
- A dependent child who is a student living away from his/her primary residence to attend an educational facility is considered to be a member of the primary residence.

### **3. Housing Unit Must Meet the Definition of a Dwelling**

Housing unit must meet the definition of a dwelling in order to be eligible for assistance. Below are examples of a housing unit that are considered an eligible dwelling:

- A housing unit is a house, an apartment, a mobile home, a group of rooms, or a single room that is occupied (or if vacant is intended for occupancy) as separate living quarters.
- All dwellings must be a permanent building and located in Contra Costa County. Applicants can have a mailing address in another county/state, but the location where they receive utility services must be in Contra Costa County.
- Applicant must complete the Intake Form CSD 43

The following housing units are considered ineligible dwellings:

- Applicants renting a room in someone else’s home (Exception: applicant provides proof that his/her living arrangement adheres to the definition of “separate living quarters”)
- Applicants living in transitory, tent or temporary encampments
- Applicants living in board-and-care facilities, nursing or convalescent homes, or in jail or prison
- Applicants that are homeless

There are exceptions on dwelling eligibility and staff may need to review the list below to determine if a housing unit is eligible for assistance. Below is a list of the exceptions:

- Applicants living on boats, in a marina with a dock number and utility hook-up, are eligible for Utility Assistance.
- Applicants living in mobile homes or RVs are ineligible for energy and weatherization services unless they meet the following criteria:

- I. The dwelling must not be mobile (i.e., wheels have been removed, attached porch, etc.).
- II. The dwelling must have resided in the same location for a reasonable length of time.

#### 4. Citizenship and Alien Status

Applicant must be a permanent and legal United States resident and complete a Statement of Citizenship or Non-Citizen Status for Public Benefits Form (CSD 600). Federal law requires that all public agencies verify that an applicant is a United States (U.S.) citizen, national, or an alien in a qualified immigration status. A copy of the documentation to verify their qualified status must be retained in the applicant file. An individual is a U.S. citizen if:

- Born in the U.S. regardless of the citizenship of his/her parents
- Born outside of the U.S. to U.S. citizen parents
- Born outside of the U.S. of alien parents and has been naturalized as a U.S. citizen. A child born outside of the U.S. of alien parents automatically becomes a citizen after birth if his/her parents are naturalized before he/she becomes age 16
- U.S. territories that include: American Samoa, Guam, the Northern Mariana Islands, Puerto Rico and the Virgin Islands.

Applicants must submit acceptable verification of their citizenship and/or alien status. The following is a list of acceptable verification:

- U.S. birth certificate
- U.S. passport
- Naturalization certificate, N-550 or N-570. Certificate cannot be copied, but agency should review, verify and document in the file that the “naturalized certificate was “verified and valid”
- Report of birth abroad of a U.S. Citizen FS-240
- U.S. Citizen Identification Card, I-197
- Certificate of Citizenship, N-560 or N-561
- Statement provided by the U.S. consular officer certifying the individual is a U.S. citizen
- American Indian card with a classification code KIC
- Documentation of direct receipt of SSI or SSA benefits
- DD 214 – Military Separation – This document must show a U.S. place of birth.
- REAL ID Card

Applicants who are ineligible to participate in the utility assistance and/or weatherization programs with public agencies are:

- Individuals who hold an INS I-94 who are admitted as temporary entrants (such as students, visitors, tourists, diplomats, etc.).
- Aliens who have no other INS document.
- Individuals possessing an Individual Taxpayer Identification Number (ITIN). An ITIN does not create an inference regarding the person’s immigration status. An ITIN is issued by the U.S. Internal Revenue Service to individuals who are required to have a U.S. taxpayer identification number but who do not have, and are not eligible to obtain, a Social Security Number issued by the Social Security Administration.
- Individuals possessing an ID card issued by a foreign consulate

- California Driver's licenses and identification cards with “Federal Limits Apply” issued prior to January 22,2018.

## 5. Income Guidelines

Applicants must meet the income guidelines provided by Department of Community Services and Development each program year. Staff must obtain income documentation supporting the total gross monthly income earnings stated on the Energy Intake Form (CSD 43). Income documentation for all household members must be within 6 weeks of the application intake date, and must comply with the stated acceptable forms of income documentation referenced below.

Countable Income includes:

<b>Income Type</b>	<b>Definition</b>
Annuities, Pensions, Retirement	Includes Rail Road retirement
Assistance payments	Retirement Survivor Disability Insurance, Supplemental Security Insurance (SSI), General Assistance, Cal Works
Business income	Income from business, less business operational expenses
Capital gains or losses	For self-employment only
Cash gifts (regular basis)	Must provide regular support for an individual or for the family
Child support	Include child support for the household receiving it
Declaration of personal income	Irregular income resulting from occasional sources such as yard work, childcare, collecting cans/bottles, donating blood/plasma
Dividends, Interest & Royalties	If withdrawn
Foster care payments	Include foster care payments received for foster children or foster adults living alone.
Government Employee Pensions	
Insurance or annuity payments	Military family allotments, Military retirement
Jury duty pay	
Military pay	
Payment from government sponsored programs	Such as agricultural programs
Payment on behalf of the household	Must provide regular support for the family
Railroad Retirement	
Social Security Benefits	Net amount of the check, excluding the amount deducted for Medicare
Spousal support	
Strike benefits	
Training allowances	From Federal and State Employment programs, only the portion that pays or reimburses for living expenses
Tribal payments from casinos	Per capita payments
Trust disbursements	Regular
Unemployment insurance	
Veteran’s Benefits	



Wages, salaries, commissions, bonuses, profit sharing, tips, vacation pay, severance pay, sick leave, royalties and honoraria which result from the applicant's work or service	Count all gross income received for the period used to determine income eligibility
Worker's compensation	

Applicants claiming no income must reveal their source(s) of support. If there is zero income reported; Certification of Income And Expenses Form (CSD43B) must be completed by the applicant and included in the file. If applicant is reporting zero income for a consecutive year, a Certification of Income And Expenses form will need to be completed by the applicant PLUS include documentation of monthly expenses (a letter from the person/agency that supports the applicant's rental, food and/or utility expenses). An example of documentation can be a print out of applicant's food stamps, a letter from housing authority, a declaration from the person that supports the applicant's rental expenses. Staff must obtain written or verbal verification of regular support from others reported on the form. Eligibility will be based on documentation submitted with the form or verified during the follow-up.

For DOE only: All applicants applying for Department of Energy (DOE) services with zero income may complete a self-certification after all avenues of documenting income eligibility are exhausted. Evidence of the various attempts at proving eligibility must be contained in the applicant file, including a notarized statement signed by the applicant that they have no other proof of income. If 120 days pass and the applicant's income eligibility for DOE needs to be re-established, they will follow the same "Zero Income Notarization" rules that apply to an applicant entering through the DOE program. On an exceptional basis, if Weatherization staff cannot obtain a notarized self-certification statement, Weatherization will follow their policies and procedures for next steps.

## 6. Utility Bill

Applicants must be responsible for energy costs and provide copies of utility bills. Utility bill(s) must contain a billing period of at least 22 days and be current and within 6 weeks of the application intake date. Documentation such as a photo identification and the completion of Account Holder Authorization and Consent Form (CSD 081) is required if name on the account is different from the name on the Energy Intake Form (CSD 43). The person on the utility account must be at least 18 years of age or older. The utility bill must provide the amount of the household's current energy costs and the following:

- Service address - In rural areas, the service address can be descriptive (Example: 3rd house on the left, past the gas station, etc.)
- Account number
- Name of the utility company
- Customer's name
- The dollar amount of a full month's energy costs (at least 22 days), some exceptions may apply.
- Fast Track applications: The documentation must include the total amount due on the bill (current and past due and all other charges). Applicants must include in addition to current monthly utility bill, a past due, 15 day, 48 hour, or shut off notices.

The following are considered unacceptable utility bill verification:

- Closing bills
- Altered bills
- Service address on the utility bill does not match the applicant's service address
- Outdated utility bill
- Deposit accounts or accounts in collections
- Business / Commercial Accounts
- Bill Less than 22 days

When the applicant is attempting to establish service at a new address and changes from the old account are transferred to the new account, CSB will make an exception and accept utility bill. This will also apply when applicants are trying to re-establish services on a closed account (due to non-payment) at the same address, which has no current charges. The issue date of the bill is to be used to determine if it is current. Since the service period will not be current, the current energy charges for that utility will be set to zero on the application. When re-establishing service on a closed account, staff must correspond with the utility company to verify the applicant is re-establishing service. LIHEAP assistance can only be provided when the service is re-connected. LIHEAP cannot be used to pay for an outstanding balance on a closed account if a new account is not established.

To qualify for services when utilities are included in the rent, the applicant must submit documentation that must include the following:

- Date
- Tenant/Customer's Name
- Service Address
- The amount of rental charges covering energy expenses
- Landlord's signature
- Photocopied and faxed letters of utility cost verification

Staff must keep a dated copy with a wet signature on file for each multi-family dwelling. Letter must contain service address, date, and the location of the original signature.

This document may be photocopied for insertion into the applicant's file of other tenants in that building. A newly signed landlord letter must be obtained each program year.

Acceptable Documentation must be current to six weeks from intake date and may include one of the listed documents below:

- Original or faxed letter signed by landlord/manager
- Rental receipt that indicates utilities included in rent
- HUD statement showing zero utility allowance

## **7. Energy/Budget Counseling**

Applicants must complete Client Education Confirmation of Receipt Form (CSD 321) verifying of energy conservation education and/or budget counseling were provided by staff.

## **8. Priority Plan**

Applicants must meet CSB's priority plan (for Utility Assistance Only) or meet DCD's priority plan (for Weatherization, LIWP and DOE). CSB will make every attempt to assist the vulnerable population with the lowest income and highest energy cost.

Vulnerable population consists of:

- families in the household who have children 5 years or younger
- elderly members (60 years or older)
- have a permanent and/or temporary disability

Documentation of vulnerable population must be in applicant's file.

Please note: Staff is not required to obtain written documentation to verify disability for any disabled household members, however, it will be to the discretion of staff to request it from the applicant, should it be reasonable.

## **9. File Documentation**

All applications must have the following documents in their file:

- Energy Intake Form (CSD43)
- Statement of Citizenship or Non-Citizenship Status for Public Benefits (CSD 600)
- Provide a copy of a current monthly utility bill plus any past due notices if applicable
- Copies of the total gross monthly income for ALL household members 18 years and older
- If applicable, Certification of Income and Expenses (CSD 43B)
- Client Education Confirmation of Receipt (CSD321)
- If Applicable: Birth Certificates or documentation verifying any children ages 0-5 in the household and ID required for any household members 60 years or older.
- If Applicable: Account Holder Authorization and Consent Form (CSD 081)

## **10. Utility Bill Balances for Utility Assistance**

Applicants with a credit balance on their account that is more than double the monthly gas and electric charges must re-apply when the credit balance has been exhausted. A denial notice will be mailed to the applicant.

HEAP or Fast Track payment must bring applicants to zero balance. If payment doesn't bring the balance to zero, the applicant must first make a co-payment to their utility company before a pledge can be made. Proof of payment must be verified by our staff to the utility company prior to pledge being made. On a case by case basis for Fast Track, if the utility bill is higher than the eligible amount, but the eligible amount is sufficient to avoid services being shut off; the application will be processed. If there was an agreement made to avoid services in being shut off between the applicant and their utility company, staff must document the agreement in the applicant's file. All Fast Track applications will be pledged by staff to the utility company. A pledge is defined as a promise to pay from LIHEAP to utility company.

## **11. Incomplete Applications**

Once the application is received via fax, mail, walk-ins or email, an acknowledgement letter has to be sent within 15-days of the intake date. Review the application and if there are any missing items to complete the application process, identify the document(s) that are still missing. Staff will complete the following:

- i. Complete the Missing Documentation Letter. The letter indicates that our agency will give the applicant ten (10) working days to submit the requested missing documentation requested in order to process application. The form will have HEAP's fax number if they choose to fax it to our office. If applicant does not submit the requested documentation within the timeframe given, their application will be denied. Missing Documentation Letter will have:
  - Applicant's full name
  - Appropriate box(es) checked of the missing documents
- ii. Staff will print two (2) copies of the Missing Documentation Letter (one to be mailed to the applicant and the other to retain with the file).
- iii. Incomplete file will be placed in the file cabinet labeled Pending Files drawer.

## **12. Incomplete Fast Track Applications**

If there are any missing items to complete the application process, identify the document(s) that are still missing. Staff will do a courtesy call to applicant to discuss and request missing documentation. Staff will follow up with completing the Missing Documentation letter giving the applicant ten working days to submit the missing documentation requested in order to process application (please see steps 1-3 above).

Upon receiving missing documentation, the application will still be processed as Fast Track. If applicant makes a payment arrangement with PG&E to avoid disconnection after submitting an application, staff will honor the application as a Fast Track.

When an applicant does not submit the requested documents within the timeframe given, staff will mail a denial letter for Incomplete Applications (see procedures for Denial Letters For Incomplete Applications).

## **13. Ineligible and Denied Applications**

If an application is ineligible for HEAP or Fast Track services, notification of ineligibility will be mailed in writing. Reasons for ineligibility may include, but are not limited to:

- Agency is out of funds
- Facts concerning applicant's eligibility/income calculation are in dispute
- Household does not meet the agency's priority plan (and no disputed facts concerning applicant's eligibility could impact plan determination)

Reasons for denial may include, but are not limited to:

- Exceeds maximum income guidelines
- Missing or insufficient information
- Household already served

All “DENIED” applications shall receive written notification explaining the reason for the denial and advising the applicant of their rights to appeal. Provide the applicant 10 working days if needed and the opportunity to submit additional information needed to prove eligibility.

A letter describing the reason for their ineligibility/denial will be mailed to the applicant and one placed in their file. Denial letters will include an appeal notice (LIHEAP APPEAL FORM).

## C. Appeal Procedure

### 1. General Description

Contra Costa County residents are entitled to apply for assistance from the Low Income Home Energy Assistance Program (LIHEAP) with their energy cost. The LIHEAP program is funded by the state and federal government, and is administered by the State Community Services and Development Department in Sacramento.

Our goal at Contra Costa County Community Services Bureau is to serve the applicant, the best we can. If the applicant has provided all the necessary documentation and meets the income and program guidelines for service they will be approved for assistance.

In the event the application has been denied for assistance; the applicant has the right to appeal that decision. The applicant may complete and submit the LIHEAP APPEAL FORM that is mailed along with the denial letter. The applicant has within ten (10) working days from the date of the denial letter to complete and submit it to the office. They may provide any additional proof to determine eligibility.

Upon receiving the LIHEAP APPEAL FORM, it will then be forwarded to a staff where he/she will review the LIHEAP APPEAL FORM along with any additional proof submitted by the applicant to determine eligibility. After reviewing the information submitted, the staff will either overturn the denial and process the application or agree with the denial. If the application was approved, the applicant is notified by letter within five (5) working days of the approval of the application. However, if denial stands, the staff will forward the LIHEAP APPEAL FORM along with his/her notes of the review to the next designated staff.

The next designated staff will review the information and either overrule the staff’s decision or agree with the current decision. Applicant is notified by letter with the LIHEAP APPEAL FORM within five (5) working days of the decision. The next designated staff will scan the decision letter along with the supporting documents into the HEAPAPPs Folder under PY Appeals Folder.

If applicant does not agree with the decision made by the designated staff, the applicant may complete another LIHEAP APPEAL FORM. The LIHEAP APPEAL FORM will then be forwarded to the Program Manager where he/she will review the information and either overrule the designated staff’s decision or agree with the current decision. Then applicant is notified by letter within five (5) working days of the Program Manager’s decision after his/her review.

If satisfaction is not reached, the applicant still has the option to appeal at the State level by contacting the Department of Community Services and Development in Sacramento, CA by writing to:

California Department of Community Services and Development  
2389 Gateway Oaks Drive, Suite 100  
Sacramento, CA 94833  
(866) 675-6623

#### **D. LIHEAP/Fast Track Complaint Procedure**

- Any complaints are to be handled immediately by staff who receives the complaint.
- Any complaints that cannot be resolved by the first contact staff in a reasonable amount of time are to be passed to the next designated staff.
- If the complaint cannot be resolved at this level; it will be forwarded to the Assistant Manager or designee

Upon resolving the complaint, a written dated account is to be made and filed in the complaint log.

#### **E. Weatherization Referrals**

##### **1. General Description**

After the interview process is complete and the applicant is eligible for Utility Assistance, staff will ask and offer weatherization for the applicant's homes. Staff will ask if they are renters or homeowners. Staff will explain that weatherization will improve their home to make it more energy efficient. This could include windows, doors, caulking, weather stripping, heaters, water heaters, stoves, refrigerators and more. All work conducted by weatherization is done at NO COST to landlords with eligible tenants, or eligible property owners.

##### **2. Weatherization for Rental Units**

If the applicant is renting, they must first ask their landlord to fill out and sign the Energy Service Agreement for Rental Units and Post Weatherization Lead Forms. This is giving the weatherization program permission to go in the home and perform an assessment of the measures needed and perform the weatherization work. The Post Weatherization Lead Form is the only item not paid by the program and the cost is between \$200 and \$400. If the landlord does not wish to pay this they can select wish not to pay and sign the form.

##### **3. Weatherization for Home Owners**

If the applicant owns the home and is eligible for services the applicant can fill out and sign the Energy Service Agreement for Owner and Post Weatherization Lead forms. This is giving the weatherization program authorization to inspect and perform an assessment of the measures needed and perform the weatherization work. The Post Weatherization Lead Form is the only item not paid by the program and the cost is between \$200 and \$400. If the owner does not wish to pay this they can select 'wish not to pay and sign the form.

Staff will provide to applicant the Weatherization Forms upon applicant's interest, which includes the following:

**i. For Rental Units:**

- Weatherization Program Checklist for HEAP clients
- Energy Service Agreement for Rental Units
- Energy Service Agreement for Rental Units – Mechanical Ventilation
- Energy Service Agreement for Rental Units – Wall Insulation
- Post Weatherization Lead Presence Test
- CSD Form 081 Client/Customer Consent Form and Authorization

**ii. For Owner Occupied Units**

- Weatherization Program Checklist for HEAP clients
- Energy Service Agreement for Owner Occupied Units
- Energy Service Agreement for Owner Occupied Units – Mechanical Ventilation
- Energy Service Agreement for Owner Occupied Units – Wall Insulation
- Post Weatherization Lead Presence Test
- CSD Form 081 Client/Customer Consent Form and Authorization

After the forms are completed and signed by the applicant, the applicant must send all documents to the Weatherization office by email at [Weatheri@dcd.cccounty.us](mailto:Weatheri@dcd.cccounty.us), mail to 30 Muir Rd., Martinez, CA 94553, visit the weatherization website (<http://www.contracosta.ca.gov/4336/Weatherization>) or fax at (925) 646-9339. As soon as the Weatherization Program receives the forms, the Weatherization office will contact HEAP to request the applicant's LIHEAP application. At that time, staff will fax the documents to the Weatherization Program. As soon as the Weatherization Program has a completed application; it will then be reviewed and all eligible applicants will be contacted to start the weatherization home improvements. This will ensure the applicant's home is more energy efficient and will save money on their utility bill.

## **F. LIHEAP and DOE Deferrals**

### **1. Purpose**

Employees of the Contra Costa County LIHEAP Programs and Department of Energy (DOE) Weatherization Program have the right and responsibility to provide services in a safe and effective manner without undue hazard to intake and assessment staff, installation crews, inspectors, and the households we serve.

### **2. Scope**

Employees of the Contra Costa County LIHEAP Programs and DOE Weatherization Program are to adhere to the California Department and Development of Community Services' (CSD) Deferral Policy when determining eligibility for LIHEAP Programs or DOE Weatherization services up to and including denial of any and all services.

### 3. Description

The Contra Costa County LIHEAP Programs and DOE Weatherization Program staff will consult with the Program Manager when any of the following potential deferral conditions are created:

- Any act that that is physical or verbal abuse; or
- Any threatening behavior or action which is interpreted to carry the potential to:
  - Harm or endanger the safety of others;
  - Result in an act of aggression; or
  - Destroy or damage property.

Items to report may include, but not limited to:

- Verbal abuse/Foul Language;
- Falsification of Information;
- Harassment;
- Feeling unsafe or uneasy while working with an applicant;
- Threatening Violence
- Detection of Substance Abuse; or
- Discrimination

What should staff do if this occurs at the LIHEAP front desk or no Manager is available?

- If this situation occurs in the front desk and the applicant is not cooperating, contact the manager to calm the situation.
- If the applicant's behavior is threatening to staff or manager, LIHEAP has the right to refuse service and ask them to leave the office and close the main door for safety.
- Applicant's application will not be accepted for eligibility.
- A panic button is available under the front desk counter; it can be pressed if staff is feeling unsafe while working with an applicant. Once the button is pressed, an alert will be sent to the Sheriff Department in which they will show in approximately 15 minutes.

In addition, the Contra Costa County Weatherization Program complies with the California Department and Development of Community Services' (CSD) Deferral Policy requirements that:

- Weatherization agencies are required to take all responsible precautions against performing work on homes that could subject workers or applicants to health and safety (H&S) risks.
- Applicants must be informed about identified problems and safety concerns, and the reason why weatherization services must be deferred.
- The decision to defer work in a dwelling, or in extreme cases, to provide no weatherization services, is difficult but necessary in some cases.
- Decision to defer must take place upon discovery, or as soon as practicable. This does not mean that assistance will never be available, but that work must be postponed until the problem(s) can be resolved. Deferrals do not have an "expiration date".



The Contra Costa County Weatherization Program staff will consult with the Program Manager when any of the following potential deferral conditions are found:

- Applicant has a health condition that would be made worse by weatherization.
- Home’s mechanical, electrical, or plumbing system is in such despair that failure is imminent/not correctable within the program.
- Home is condemned, under rehabilitation, or applicant’s “hoarding” and/or structural issues make full assessment and/or diagnostic tests not feasible.
- Moisture issues are so severe that they cannot be fixed under Minor Envelope Repair.
- Combustion appliance safety or Indoor Air Quality fail exists that cannot be reasonably corrected within program parameters.
- Lead-based paint present that would create hazard if disturbed.
- Applicant is uncooperative, abusive, or threatening to weatherization team members.
- Illegal activities are taking place in the home.

The Contra Costa County LIHEAP Programs and DOE Weatherization Program has a Zero Tolerance policy that prohibits illegal activity and/or inappropriate behavior towards staff or subcontractors. Such use of abuse/foul language, intimidating actions (including belligerent emails and voicemails), physical harassment, destruction of property, threats to staff, etc., will be documented and will lead to termination from the program and future Deferral from services.

## **G. Quality Assurance:**

### **1. General Description**

To ensure quality control is being met, staff will conduct random file review of a minimum of 20 files per month.

### **2. Procedures**

Staff will use the Utility Assistance Quality Control File Review form to conduct the file reviews. Any errors found in the file, will be corrected in RED and documented on the file review form. The Utility Assistance Quality Control File Review form will be collected from staff and used as a tool for the Program Manager or designee to identify any trends or errors for training purposes.

Program Manager or designee shall update the Utility Assistance QA File Review Results. The Utility Assistance QA File Review Results shall be saved by month to monitor the progress or trends.

### **3. File Review between Community Services Bureau and Department of Conservation and Development**

To ensure quality control is being met between agencies, CSB and DCD will monitor each other’s application files at least on a quarterly basis.

## H. Confidentiality

### 1. General Description

When a Contra Costa County employee or an applicant to whom an employee has a relationship with is applying for the LIHEAP program, the application is considered Confidential.

### 2. Procedures

Applications considered Confidential will be handled by the assigned staff or designee. Assigned staff or designee will review and determine eligibility. Program Manager or designee must review and sign off on the application before application is processed by assigned staff. All confidential applications will be kept locked in a filing cabinet of which only designated staff will have access to.

## I. FRAUD

### 1. General Description

Staff who have a good reason, supported by documentary evidence or firsthand knowledge, to suspect that an applicant, utility company employee, another agency, etc, is knowingly, by means of misrepresentation, obtaining, attempting to, or assisting someone else to obtain benefits for which the applicant is ineligible, should report such concerns to an appropriate supervisor.

### 2. Procedures

Fraud is defined as a crime involving a material representation relating to a past or an existing fact which is: false; made with knowledge of its falsity; or in reckless disregard of the truth made in order to obtain a benefit or something of value. Factors to be considered may include, but not limited to:

- Whether the incorrect or unreported information affects eligibility
- Whether the correct information was, in fact, known to the applicant
- Whether the applicant fully understood the eligibility requirements and their responsibility for reporting information
- Whether material facts were deliberately/intentionally altered or withheld

Staff can evaluate the information provided by applicants and request additional information when reasonably necessary to verify income and their eligibility factors. The agency may deny services if the information appears to be insufficient or contradictory, and give the applicant an opportunity to appeal. If the applicant has a fraud case with PG&E for any illegal activity, the application will be denied. They can reapply once their PG&E account is in good standing.

CONTRA COSTA COUNTY EMPLOYMENT & HUMAN SERVICES  
DEPARTMENT COMMUNITY SERVICES BUREAU

# POLICIES AND PROCEDURES

SECTION 5-Financial &  
Administrative Requirements  
**2019-21**

Board of Supervisors Approved: 07/30/19

2019-21  
Policies and Procedures  
Section 5: Financial and Administrative Requirements

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## Part I. Financial Requirements

### A. Advance Amount for Travel

Advance amounts for travel are not allowed for County employees.

### B. Travel Reimbursement-County Employees

County employees are allowed compensation for mileage, meals and miscellaneous other travel expenses. Eligible individuals are entitled to claim reimbursement for actual, reasonable, and necessary expenses arising from the discharge of their official duties, subject to limitations established by law and policy.

#### 1. Mileage

As authorized by the department head or designee, use of private automobiles may be reimbursed for mileage between an individual's normal work location and other designated work locations. The reimbursement rate is set by the County, adjusted periodically to conform to IRS approved rates. Please see note in item #4 below for the time frame of submitting mileage reimbursements.

#### 2. Meals

Actual expenses, including tax and gratuity, for individual meals will be reimbursed. However, such reimbursement shall not exceed the following individual maximums:

- Breakfast: \$10.00
- Lunch: \$20.00
- Dinner: \$35.00

When away from the normal work area for an entire day, individuals eligible for meal reimbursement may claim reimbursement for the actual cost of each individual meal, notwithstanding the maximum per meal amounts specified above. However, the total amount claimed for the day shall not exceed \$65.00.

#### 3. Other Travel Expenses

- Bridge tolls, parking; Telephone and facsimile charges required in connection with County business; BART or bus fares; and Tips, parking, and checking fees in accordance with local custom.

See County Admin Bulletin #204.13 (02-20-08) regarding expense reimbursement and #111.8 (07-13-10) regarding travel.

### C. Travel Reimbursement-Parent Reimbursement for Policy Council Activities

Per HSPS 1304.50(f), Policy Council, Policy Committee, and Parent Committee reimbursement- Grantee and delegate agencies must enable low-income members to participate fully in their group responsibilities by providing, if necessary, reimbursements for reasonable expenses incurred by the members (i.e. childcare and transportation).

Parents requesting reimbursement should complete and submit Form CSB 325 to the Clerk of the Policy Council who will verify the request and determine the amount of reimbursement. After approval is received from the authorized CSB Manager or Supervisor responsible for Policy Council, a check will be issued, no later than 30 days after the request.

Reimbursements are given for approved Policy Council activities only (i.e. monthly PC meetings or committee meetings). Exceptions must be preapproved before reimbursements are issued. Mileage is calculated using distance from home to meeting location. Childcare hours include reasonable travel time to and from meetings and is based on reasonable arrival time to the approved activity.

Representatives from the Policy Council attending conferences and out-of-area meetings will be given a per diem allotment for meals and ground transportation, and reimbursed for childcare expenses. Representatives from community partners attending conferences and out-of-area meetings will be reimbursed for meals and ground transportation. Travel requests must be submitted a minimum of 30 days prior to the travel date to allow ample time for approval and advance processing. Upon return from the trip, Liquidation of Cash Advances requires that all receipts must be submitted to the appropriate PC staff person no more than 7 days after return from travel.

If receipts are not received within the 7 day timeframe, a verbal reminder will be given by the authorized CSB Manager or Supervisor responsible for Policy Council.

If receipts are still not received after a reasonable amount of time, a certified letter will be sent to the representative and a copy will be maintained in the CSB PC travel files.

Failure to return receipts within the allotted time will prevent the opportunity to attend future conferences and can prevent reimbursement for other PC activities.

*\*Note-Approved travel reimbursement rates are provided to parents at the beginning of each program year and prior to travel.*

### D. Using Employee's Own Funds for County Expenditures

Only in an emergency should an employee use his/her own funds or personal credit cards to purchase materials/services for a County purpose. An "emergency" is when:

- An event occurs which requires material or service to correct a safety hazard, or to prevent damage to facilities or equipment.
- A significant program need occurs which will have a significant impact on the goals of the program.
- Note: Lack of planning is not considered an emergency.

- While it is not encouraged, employees may purchase minor items that would not meet the criteria of an emergency as stated above. The purchase of minor items that are required to meet program needs must:
  - Be approved by the Assistant Director (AD) in writing if under \$100.00.
  - Anything over \$100.00 must be approved by the Director, Division Manager or designee.

## E. Reimbursement for Expenses – Employees

Employees will be reimbursed for approved, necessary eligible expenses, provided that reimbursement requests are made on the appropriate forms, in a timely manner and with receipts. When employees incur expenses for an approved purpose, one of the following procedures occurs for getting reimbursed:

### 1. Petty Cash

Most of the emergencies involving minor purchases can be met by use of the department's petty cash fund maintained in each Division Administrative Office. Normally, this fund is to be used for general office needs and for minor emergency requirements. A supervisor or employee may present a request for petty cash approved by an Assistant Director, to the Petty Cash Fund Custodian for payment.

### 2. Demand (Form D15\*)

In the event you are unable to get payment from the petty cash fund, you may use the Demand (Form D-15) to get reimbursed. This form is to be used to reimburse employees for non-travel related purchases. This form should be used for items of small value, as defined above, not related to travel or entitlements.

\*See EHSD Intranet> Community Services> CSB Forms > Fiscal > Demand D15)

### 3. Employee Travel Demands\*

This form is designed for reporting an employee's expenses relating to travel, mileage, or for other employee benefits or entitlements such as training costs. It will normally not be used for any other purpose. The purpose for each expense must be shown; for example, mileage should show the destination, and the reason for the trip (See Employee Handbook).

Note: County regulations allow you to include expenses for only one month on a single Travel Demand. For example, if you have expenses for May and June, you may not combine expenses on one form, but must submit two separate forms - one for May and one for June. Demands are to be submitted to your immediate supervisor for approval. Claims should be submitted within one month of completion of travel. The Bureau has no obligation to pay travel expense reimbursement submitted more than three months following completion of the travel. If an employee has over three months of mileage reimbursement to claim, the employee must submit a request letter, stating the reason for submitting a late claim, to Bureau Director or designee for approval.

\*See EHSD Intranet> Community Services> CSB Forms > Fiscal > Travel Demand (Form M8154 Rev. 11/09)



## F. Use of Procurement Cards

County Procurement Cards are assigned to an employee at the discretion of the EHSD Director and CSB Director. Card holders must abide by all policies as stated in the Procurement Card Manual, County Administrative Bulletin 111.8, and County Administrative Bulletin 204.13.

CSB card holders must obtain written approval from a Senior Administrative Manager prior to making a purchase to ensure that all expenditures are known about at the time the Approving Official is reviewing and approving the monthly Statement of Account.

- The Procurement Card is to be used for official County business purposes only and may not be used for any personal transactions.
- Card holders are responsible for adherence to all County Policies and Procedures regardless of whether a transaction is allowed at the point of sale.
- The Procurement Card is not intended to avoid or bypass appropriate purchasing procedures.
- Each card has a preset transaction, 24 hour, and billing cycle spending limit which varies by card. Employees are not authorized to exceed their spending limits.
- Disputes to charges must be made as quickly as possible per County Procurement Card manual.
- Authorized Purchases include:
  - Small Tools/ Computer supplies
  - Safety/ First Aid
  - Books/Subscriptions
  - Office Supplies (If not available through our office supply contractor)
  - Conference Registration/ Travel ( an approved travel request is still required)
- Unauthorized Purchases include:
  - Repetitive purchases better served under a blanket purchase order
  - Meals/ Alcohol /Entertainment
  - Local/ Long distance telephone charges/Internet connection costs
  - Parking/Fuel
  - Committee membership/Professional Membership Dues
  - Services of any kind
  - Items to be reimbursed through a travel demand
  - Items available under a County Contract
  - Cash/ Gift Card/ Gift Certificate/ Money Order, etc.
  - Fines/Donations
  - Any expense prohibited under County Administrative Bulletins.
- A log must be kept of all purchases which includes:

- Charges split between the appropriate org codes
- Original sales receipt/ credit or return receipts/packing slips

## G. Other Compensation

Refer to Contra Costa County Personnel Policies and Procedures.

## H. Salary

Employee salaries are set according to procedures established by the County Board of Supervisors and the Memorandum of Understanding as agreed to by the Board and collective bargaining units.

The Salary schedule and range of steps for Community Services Bureau classifications is available in each work location.

New employees generally are appointed at the minimum step of the salary range established for the particular class of positions to which the appointment is made. The appointing authority, however, may fill a particular position at a step above the minimum of the range.

Upon satisfactory completion of the probationary period, employees receive a salary increase to the next step.

The performance of each employee, except those employees already at the maximum salary step of the appropriate salary range, is reviewed on the employee's anniversary date to determine whether the salary of the employee is to be advanced to the next higher step in the salary range. Advancement is granted on the affirmative recommendation of the appointing authority, based on satisfactory performance by the employee. The appointing authority may recommend denial of the increment or denial subject to one additional review at some specified date before the next anniversary, with the date set at the time the original report is returned. This decision may be appealed through the Grievance Procedure.

Except as provided by County procedures, increments within range shall not be granted more frequently than once per year, nor shall more than one step within range increment be granted at one time, except as otherwise provided in deep class resolutions. Nothing may be construed to make the granting of increments mandatory on the County.

If an operating department verifies in writing that an administrative or clerical error was made in failing to submit the documents needed to advance an employee to the next salary step on the first of the month when eligible, the advancement will be made retroactive to the first of the month when eligible.

A part-time employee is paid a monthly salary (in the same ratio to the full-time monthly rate to which the employee would be entitled as a full-time employee) as the number of hours per week in the employee's part-time work schedule bears to the number of hours in the full-time work schedule of the department.

Any employee who is appointed to a position of a class allocated to a higher salary range than the class previously occupied - except as provided by County procedures - receives the salary in the new salary

range, which is next higher than the rate received before promotion. If this increase is less than five percent, the employee's salary is adjusted (to the step in the new range which is at least five percent greater than the next higher step), provided that the next step does not exceed the maximum salary for the higher class.

Any employee who is demoted (except as provided under Contra Costa County procedures) will have the salary reduced to the monthly salary step in the range for the class of positions to which he or she has been demoted next lower than the salary received before demotion. If this decrease is less than five percent, the employee's salary will be adjusted to the step in the new range which is five percent less than the next lower step provided that the next step is not less than the minimum salary for the lower class.

Whenever a demotion is the result of layoff, cancellation of position, or displacement by another employee with greater seniority rights, the salary of the demoted employee will be the step on the salary range which would have been achieved if the employee had been continuously in the position to which he/she has been demoted, all within range increments being granted.

Whenever any employee voluntarily demotes to a position in a class having a salary range lower than that of the class from which he/she demotes, the salary remains the same if the steps in the new demoted salary range permit. If not, the new salary is set at the step next below the former salary.

#### **I. Bilingual Pay Differential**

A salary differential of one hundred dollars (\$100) per month is paid to incumbents of positions requiring bilingual proficiency as designated by the appointing authority and the Bureau Director of Human Resources.

The bilingual salary differential is prorated for employees working less than full-time and/or who are on an unpaid leave of absence for a portion of any given month. (Refer to Contra Costa County Management Handbook.)

#### **J. Accounting Certificate Differential**

Incumbents of Management professional accounting, auditing or fiscal officer positions who are duly qualified as a CPA, CIA, CMA or CGFM shall receive a positive differential of five percent (5%) of base monthly salary. (Refer to Contra Costa County Management Handbook.)

#### **K. Management Longevity Pay**

Employees who have completed ten (10) years of appointed service for the County shall receive a two and one-half percent (2.5%) longevity differential.

Employees who have completed fifteen (15) years of appointed service for the County shall receive an additional two and one-half percent (2.5%) longevity differential. (Refer to Contra Costa County Management Handbook.)

#### L. Management Paid Personal Leave (Admin Leave)

Un-represented management employees (exempt from payment of overtime) receive paid administrative leave (94 hours per year) annually.

All management employees exempt from payment of overtime are authorized paid administrative leave credit for each year, in accordance with current Contra Costa County policies.

Use of administrative leave credits may be requested whenever desired by the employee; however, approval of requests is subject to the same department process as used for vacation requests.

All unused paid administrative leave will be canceled on December 31 of each year. For further information on management paid administrative leave, see Contra Costa County Admin Bulletin #423.3 (06-23-98).

#### M. Unemployment Compensation

Employees of Contra Costa County may be eligible for unemployment compensation. The cost of unemployment compensation is borne by the County. To qualify for unemployment compensation, an employee must:

- Be unemployed and registered with the State Employment Development Department for work
- Have separated for good cause
- Have received minimum base-period wages as currently established by State law or regulation
- Comply with regulations in regard to filing claims
- Be available to immediately accept suitable work
- Be actively seeking work
- Be physically able to work

On all voluntary resignations, a Notice of Voluntary Termination of Employment (AK-219) must accompany the Notice of Separation (AK-16), and must be immediately forwarded to the

Personnel Office, Records Division.

On non-voluntary separations, complete details must be attached to the separation notice (with the exception of rejection of probation separation). Refer to County Admin Bulletin #420.1 (01-19-81) for further information.

#### N. Vehicle Use

The County establishes policies on the use and operation of vehicles, both County-owned and privately owned, on County business.

Please see County Admin Bulletins #507.8 (02-20-08), County Vehicle Operation, and #535 (05-20-10), Use of Private Vehicles, for further information.

NOTE: For Contra Costa County's Policies and Procedures, please refer to the Contra Costa County's Administrative Bulletins and Management Handbook.

## O. In-Kind (Non-Federal Share)

### 1. Background

The Head Start Act stipulates that the Federal share of the total costs of the Head Start program will not exceed 80 percent of the total grantee budget unless a waiver has been granted (Head Start Act Section 640(b)). If the grantee agency fails to obtain and document the required 20 percent, or other approved match, a disallowance of Federal funds may be taken. Non-Federal share must meet the same criteria for allowability as other costs incurred and paid with Federal funds.

### 2. Definitions

- Allowable Cost: Third party in-kind contributions shall count toward satisfying a cost-sharing or matching requirement only where, if the party receiving the contribution were to pay for them, they would be an allowable cost. Allowable costs are determined by the tests of reasonableness, necessity and allocability as defined in Office of Management and Budget (OMB) Circulars A-21, A-87 and A-122.
- In-Kind: Property or services that benefit a grant supported project or program and are contributed by non-Federal third parties without charge to the grantee. In-kind contributions may consist of the value of real property and equipment and the value of goods and services directly benefiting the grant program and specifically identifiable to it. In-kind match is counted for the period when the services are provided or when the donated goods are received and used.
- Volunteer: An individual providing a service that is necessary to the operation of the Head Start program at no cost to a grantee agency.
- CSB Categories for third party in-kind contributions:
  - Classroom Help (CH): In-Kind to assist in the classroom.
  - Field Trip Help (FT): In-Kind to assist supervising children and their activities during a field trip.
  - Home Visits (HV): Volunteer at Home visits where parent is involved in child-directed activities.
  - Parent Meetings/Family Events (PM): Volunteer at Parent Meetings: Participating in site based events.
  - Policy Council Meetings/Subcommittees (PC): Volunteer at Policy Council and approved related events.
  - Home Activities (HA): Volunteer working on educational goals with child at home.
  - Donated Goods (DG): Materials donated directly to HS including land, buildings, or space that offset normal operating expenses.
  - Donated Services (DS): Time provided by professionals within the community on a professional level; i.e. Fire person, fence builder, mechanic, library aide, doctor, dentist, counselor and other professions.

**3. Values of third party in-kind contributions** will be determined and computed by CSB Fiscal Unit for the following contributions:

- Classroom Help
- Field Trip Help
- Home Visit Volunteer
- Site Meeting/Family Events Volunteer
- Policy Council Meetings/Subcommittee Volunteer
- Home Activities Volunteer

**4. Donated Goods and Services** (professional) will be determined by the community member or professional delivering the contribution within the standards of reason for the value and goods of the service.

**5-CSB Staff will adhere to the following procedures** for collection, documentation, calculation and record keeping of Third Party In-Kind contributions:

- Head/Lead Teachers: Daily/Monthly
  - Prepares CSB320 (CSB-320), in-kind form for classroom
  - Ensures proper completion of in-kind form-Full Name, Type of in-kind contribution, Service Time, signature of volunteer
  - Submit the CSB320 to Site Supervisor by 1st of each month with the 9400 sign-in sheets
  
- Site Supervisor Monthly
  - Ensures collection of in-kind forms from every classroom by the 1st of each month
  - Reviews and monitors forms for completion and accuracy
  - Sign form indicating review and approval
  - Follows up with any classrooms submitting zero or low in-kind
  - Submits the in-kind form to the Cluster Clerk by the 5th of each month with the 9400s
  
- Assistant Director Monthly
  - Reviews in-kind sheets and signs off
  - Follows-up with any sites submitting zero or low in-kind
  - Submits to Cluster Clerk for data entry
  
- Cluster Clerk Monthly
  - Calculates the total number of in-kind hours per activity for each site
  - Calculate EHS and, HS separately as directed by CSB fiscal unit
  - Inputs data into COPA/CLOUDS by the 20th of each month
  - If a cluster clerk receives in-kind forms after the 15th, hold for next month tracking
  - Maintains original documents
  
- Fiscal Annually
  - Determines the in-kind rate calculation for volunteer contributions (Non-professional)

- Monitor volunteer in-kind hours once a month Monthly
- Ensure proper value of in-kind rates and calculations
  
- CSM in charge of Parent Involvement / PC Clerk: Monthly
  - Reviews monthly in-kind data entered by Cluster Clerks
  - Reports in-kind hours by site as reported to CSM in charge of Parent Involvement
  - Reports in-kind hours by cluster as reported to Assistant Directors
  - Provides training and support, as needed, to teachers and/or Site Supervisors
  - Provides total in-kind contributions as needed or requested

## P. Reduced Days of Attendance Due to Emergency Conditions

### 1. Background

California Department of Education (CDE) Management Bulletin 10-09 which reminds Agencies that Education Code (EC) 8271 provides against loss of funds due to the circumstances that are beyond the control of the contractor.

It states that in the event that operating agencies are unable to operate due to incomplete renovations authorized by administering state agencies, or due to circumstances beyond the control of the operating agency, including earthquakes, floods, or fires, such programs shall not be penalized for incurred program expenses nor in subsequent annual budget allocations.

Circumstances beyond the control of operating contractors include, but are not necessarily limited to:

- Earthquakes
- Floods
- Fires
- Epidemics
- Impassable roads
- The imminence of a major health or safety hazard, as determined by the local health department or law enforcement agency
- A strike affecting transportation services for children provided by a non-agency entity
- Incomplete facility renovations authorized by the California Department of Education, pursuant to California *Education Code* sections 8277.1 and 8277.2
- State of California budget impasse

### 2. Policy

Whenever a contractor's days of operation are reduced for any of the above reasons, and the reduction in days of operation did not require the contractor to reduce staff through layoffs or unpaid furloughs, the contractor's governing board, or the executive office for contractors not having a governing board, must adopt a resolution that clearly and fully describes the nature of the emergency condition as well as the specific effect on program operations. The resolution should include:

- Dates program operation was necessarily suspended or substantially reduced
- Daily attendance for both certified and non-certified children for the week prior to the date operation was suspended or reduce

Whenever the contractor's days of operation are reduced because of a state budget impasse and this reduction requires the contractor to reduce staff through layoffs or unpaid furloughs, the contractor may request reimbursement for ongoing administrative and operational expenses that occurred during the emergency closure. The contractor's governing board, or the executive office for contractors not having a governing board, must adopt a resolution that clearly and fully describes the nature of the emergency condition as well as the specific effect on program operation. The resolution should include:

- Dates program operation was suspended
- A detailed list of actual program expenses incurred during the period of closure

### **3. Application Submission Requirements**

- Whenever an emergency closure happens at any of the CSB or Partner sites that meets the definition of Management Bulletin 10-09 as mentioned above, the Assistant Director (AD) with the responsibility for that site/ASA III (Partner Sites) will:
  - Inform their Division Manager, Child Development Accountant and State Liaison ASA III of such occurrence as soon as possible.
  - Obtain a copy of the verification for the emergency closure. This could be in the form of a utility notice, damage assessment report, unusual Incident/injury report etc.
  - Mark "Non Class Day" for all children affect by the emergency closure for all closure days on CLOUDS via the classroom wall pads or CLOUDS Manual Attendance module.
  - Obtain the daily attendance for both certified and non-certified children of the impacted classroom/site for the whole week prior to date of emergency closure. The attendance sheet should indicate site, classroom, number of children in that classroom, contract type(s) and date. Please use CLOUDS Manual Attendance Module to print the Attendance for the entire week.
  - Submit the closure verification and the attendance to the State liaison ASA III.
  - The State Liaison ASA III will use the above data, verify the attendance and contract types on CLOUDS/CDFS 8501, and submit a request for a board resolution to the Contracts Unit.
  - Once the board resolution is obtained, the State Liaison ASA III will submit the application to our Early Learning and Care Division (ELCD) consultant for approval in accordance with the Management Bulletin 10-09.
  - The ELCD and the Child Development Fiscal Services (CDFS) will jointly review



- and determine the actual program expenses incurred during the period of closure/reduced operations.
- The approval will be submitted to CSB Business System Unit and Fiscal Unit for processing of CDE's in CLOUDS System and reporting to CA Department of Education respectively.
    - Business Systems Unit will mark all children's Attendance as "Excused" for those closure days which were approved by CDE.
    - Business Systems Unit will update the affected 9400s
    - Business Systems Unit will provide a new CD 9500/8501 report to Fiscal Unit for processing.

## Part II. Administrative Requirements

### Subpart I. Monitoring

#### A. Purpose

CSB Ongoing Monitoring is a key management system for ensuring program quality and compliance with Head Start/Early Head Start Performance Standards, California Child Development Title V Regulations, California Desired Results and Environment Rating Scales, NAEYC Standards and Title XXII Child Care General Licensing requirements. Ongoing Monitoring ensures that the program is moving toward achieving its goals and objectives while providing high quality, comprehensive services to the ever-changing needs of the children and families served. CSB is committed to the continuous improvement of our programs through regular and ongoing monitoring of all aspects of our operations.

#### B. Methodology

The ongoing monitoring process is comprehensive in scope. The system provides a method to examine service delivery including the tracking of child and family outcomes on an ongoing basis and incorporates a process to connect the results to management systems. Staff at all operational levels participate in the ongoing monitoring process and any identified concerns are communicated in writing to the appropriate staff responsible. Corrections are validated according to specific timelines.

Ongoing monitoring occurs on a regular and routine basis to assess systems and program operations for evaluation and continuous improvement of our programs. It includes the review and evaluation of services and systems, documentation of results, tracking and analyzing areas of concern and correction, and validation that correction has been completed. Results of monitoring and completion of corrective actions for findings are shared by the Bureau Director or designee with: EHSD Director, Board of Supervisors, Policy Council, Assistant Directors, Site Supervisors and their staff. Results are used to conduct root cause analysis and develop plans for improvement and program planning.

### C. Multi-Level Monitoring

**1. Center-Level Monitoring** is conducted by Site Supervisors, Comprehensive Services Assistant Managers, Clerks, and Teachers for the purpose of monitoring day-to-day center operations, delivery of services, and overall health and safety of internal and external environments of children at the center for which they are assigned. Assistant Directors receive monthly reports from Site Supervisors that provide an overview of each of the centers they are assigned to track any concerns as well as highlight strengths and special activities occurring each month.

For partner centers, the CSB Partners Unit visits subcontracted centers weekly to monitor the delivery of services and health and safety to ensure ongoing communication. The delegate agency provides monthly communication reports to the Analyst responsible for partners and the delegate agency.

**2. Cluster and Content Area Monitoring** is conducted by Site Supervisors, Comprehensive Services Managers and Analysts responsible for a specific content or service area to ensure that staff are trained and comply with funding requirements and regulations around a specific content or service. CSMs and Analysts review trends across centers and services and identify risks or concerns and provide ongoing training as well as targeted training when needed.

For partner agencies, the designated Analyst reviews monthly reports and monitoring performed by the agencies and provides support and training as needs are identified. The delegate agency completes its own internal ongoing monitoring. Monthly reports on these activities, including corrective actions, will be submitted to the Analyst overseeing the Partner Unit.

**3. Agency-level monitoring** is conducted by the CSB Quality Management Unit (QMU). This unit is responsible for conducting compliance and quality monitoring of directly operated, partner and delegate agency centers in six key areas: center monitoring, comprehensive services compliance, need and eligibility, education file monitoring, curriculum fidelity, and Classroom Assessment Scoring System (CLASS™) observations. Corrections for non-compliances are completed by the responsible person at the center and are validated by QMU Comprehensive Services Assistant Manager(s) or designee. The members of QMU or designee will select a random sample of 50% of the non-compliant files and conduct a final review of correction and validation.

**4. File Monitoring:** Each directly operated; partner and delegate agency center is monitored once per year (July-June). A random sample of 30% of files is reviewed in the areas of need and eligibility, education and comprehensive services compliance. Areas of strengths and non-compliances are documented on CLOUDS. For centers that do not utilize CLOUDS, information will be extracted to communicate the findings on a Microsoft document version of the tool and feedback form. The site has seven business day to review non-compliances and send questions, concerns, and items that may be considered false non-compliances to the QMU. The monitors will be responsible for reviewing, investigating, and correcting any false non-compliance items on the tools as mentioned by the site, revise and communicate changes to tools if applicable. Four weeks after the 7 business day period, QMU staff will revisit the center to validate 50 percent of the files that had been flagged with items of concerns to ensure that they have been corrected, if applicable. Once validation is completed, QMU staff will send center the Quality Management Unit Feedback Form (CSB 791) to inform whether validation passed or failed. If the files do not pass the 50 percent validation review, a corrective action plan is required. Within eight weeks from validation results, a designee will complete the Quality Management Unit Feedback

Form (CSB 791) addressing a corrective action plan. A CSM or designee will validate the corrective action plan and verify that all corrections have been made. The Quality Management Unit Feedback Form whether center passed or failed validation, must be submitted to CSB-Monitoring@ehsd.cccounty.us within eight weeks from the date QMU staff sent validation results.

- i. **Center Monitoring:** Thirty percent sample of classrooms in the center receives a center monitoring. Areas of strengths and non-compliances are documented on CLOUDS forms. For centers that do not utilize CLOUDS, information will be extracted to communicate the findings on a Microsoft document version of the tool and feedback form. The site has seven days to send questions, concerns, and items that are considered false non-compliances to the QMU. The monitors will be responsible for reviewing, investigating, and correcting any false non-compliance items on the tools as mentioned by the site, revise and communicate changes to tools if applicable. Center based staff will correct non-compliances and document it on CLOUDS forms or Microsoft documents. QMU clerk will monitor to ensure that all corrections are documented within 5 weeks, or notify the Assistant Director or designee to follow-up, as applicable.
  
- ii. **Curriculum Fidelity Monitoring:** All directly operated, partner, and delegate agency classrooms are monitored for curriculum fidelity. QMU monitors the classroom using the Creative Curriculum Fidelity Checklist. Classroom must receive a score in fidelity of medium or better to be compliant. Non-compliant items are marked on the tools and the findings are documented on the feedback forms. After completing the observation period, the monitor will meet with the lead teacher and share observations and ask any questions as needed. Within three days, QMU staff will send the reports to the responsible persons. It is the expectation that all monitoring reports, regardless of type of findings, are shared with the team whose work was reviewed. The site has seven days to send questions, concerns, and items that are considered false non-compliances to the QMU. The monitors will be responsible for reviewing, investigating, and correcting any false non-compliance items on the tools as mentioned by the site, revise and communicate changes to tools if applicable.  
If there are no non-compliances, the feedback form is signed by the Assistant Director or designee and submitted to CSB-Monitoring@ehsd.cccounty.us within five weeks of monitoring.  
If there are non-compliances, with five weeks from the monitoring, the Site Supervisors will complete and sign a corrective action plan and submit it to the Cluster's Comprehensive Services Education Manager for approval. The Site Supervisor or designee will submit the signed Corrective Action Plan to CSB-Monitoring@ehsd.cccounty.us. An additional five weeks to have the Comprehensive Services Education Manager validate that the corrective action plan has been implemented and submits it to CSB-Monitoring@ehsd.cccounty.us.
  
- iii. **CLASS Monitoring:** CLASS™ Observations are conducted by a trained CLASS™ reliable observer working with the QMU. Fifty percent of the eligible preschool classrooms will be selected. Selected classrooms receive CLASS™ observations twice in the year. The following year, CLASS™ will be completed for the remaining classrooms that did not receive observations. Ratings below cut-off scores require a corrective action. CSB's CLASS™ cut-off scores for corrective action may vary from year-to-year as they are established after the National Designation Renewal System trigger scores have been made available. Teachers must receive a score of 6 or better in the domains of Emotional Support and Classroom Organization and a score of 3 or better in the Instructional Support domain. Classrooms review

two twenty-minute observations, twice per year. Within three days, QMU staff will send the reports to the responsible persons. It is the expectation that all monitoring reports, regardless of type of findings, are shared with the team whose work was reviewed. The site has seven days to send questions, concerns, and items that are considered false non-compliances to the QMU. The monitors will be responsible for reviewing, investigating, and correcting any false non-compliance items on the tools as mentioned by the site, revise and communicate changes to tools if applicable.

If there are no non-compliances, the feedback form is signed by the Assistant Director or designee and submitted to CSB-Monitoring@ehsd.cccounty.us within five weeks of monitoring.

If there are non-compliances, with five weeks from the monitoring, the Site Supervisors will complete and sign a corrective action plan and submit it to the Cluster's Comprehensive Services Education Manager for approval. The Site Supervisor or designee will submit the signed Corrective Action Plan to CSB-Monitoring@ehsd.cccounty.us. An additional five weeks to have the Comprehensive Services Education Manager validate that the corrective action plan has been implemented and submits it to CSB-Monitoring@ehsd.cccounty.us.

Data collected from monitoring is compiled into agency reports for review by staff, managers, the Policy Council and Board of Supervisors to inform of agency trends, strengths and areas in need of improvement. All reports and findings are shared with the partner and delegate agencies.

The Analyst overseeing the QMU compiles results and findings and distributes reports to senior management, Comprehensive Services Managers, Site Supervisors, center staff, Board of Supervisors, and the Policy Council twice per year. These reports are a high-level representation of the agency's compliance and non-compliance concerns in the five areas monitored by QMU. Comprehensive Services Managers and senior managers responsible for a content or service area review these bi-annual reports to identify trends and develop staff training.

The Bureau Director or her designees will monitor all administrative internal team members with responsibility over service areas. This may include periodic walk-through activities or unannounced visits to sites.

Additional information on multi-level monitoring is available in the Appendix of the Policies and Procedures.

#### **D. Fiscal Monitoring of the Delegate Agency by the Grantee**

The Grantee certifies that the Delegate Agency is complying with regulations and generally accepted accounting principles. Monitoring is conducted using the following format:

- Monthly Reports: Delegate Agency shall submit monthly financial reports that record cumulative and accrued expenditures and obligations through the end of the contract year. Monthly reports are due on the 20th of each month for the preceding month. Reports shall be submitted on Form M2092 (Monthly Financial Report) and shall include, at a minimum:
- Separate reports for Program Accounts 20 and 22

- Reimbursement reports for the Child Food Program
- Line item documentation of administrative expenditures
- Copies of contractor's monthly financial statement and payroll reports
- A separate monthly report summarizing the local share reported in the financial report.

#### **E. Fiscal Officer or his/her Designee Reviews the Financial Information for Content and Consistency Before Reimbursing Monthly Expenditures**

Annual On-Site Monitoring: After the annual audit by a Certified Independent Accountant, the Grantee performs an on-site review of the Delegate Agency records using the OHS Monitoring Protocol. This procedure is performed no later than May of each year for the prior award year.

The following is monitored:

- **Accounting Records:** Records are reviewed to assure that they adequately identify the source and application of funds for contract-supported activities, and that they are maintained. Records are reviewed to make sure that they contain information pertaining to contract awards, authorizations, obligations, unobligated balances, assets, outlays, income, and liabilities.
- **Internal Controls:** Controls are reviewed for effectiveness, and that accountability is maintained for all contract cash, real and personal property, and all other assets. Contractor is reviewed for adequately safeguarding all such property and that property is used solely for contract purposes.
- **Budgetary Controls:** The actual and budgeted amounts for each contract allocation are compared. The grantee will conduct regular and routine monitoring including delegate agency annual management and fiscal systems review.

#### **F. Center Visit Documentation**

The CSB Director, Assistant Directors, or other Administrative Managers may conduct unscheduled/unannounced monitoring visits at directly operated or partner agency sites. These visits are documented on the Center Visit Documentation form. Any issue requiring a corrective action is documented and validation of correction is assigned and verified upon completion.

#### **G. Client Concern Tracking**

CSB maintains a log to record and track customer concerns/complaints.

##### **1. Site Supervisor and Comprehensive Services Manager Responsibility:**

- Site Supervisors and CSMs will document all customer complaints on the monthly log and submit to their AD or ASAIII monthly.
- A new sheet or document will be used each month. Do not combine months when submitting to AD/ASAIII. At this time this log is not yet posted on CSB Forms or Intranet and

so each SS/CSM should keep a blank template of this log on hand to start a new one each month.

- Complaints to be documented include all complaints from the public, enrolled families or families attempting to be enrolled.
- The completed monthly log shall be maintained by the SS/CSM.

**2. Assistant Director/ASA III Responsibility:**

Upon receipt of the monthly client concern tracking log, AD or ASAIII will combine all reports onto the Quarterly Complaint Log and submit to their supervisor quarterly.

**3. Division Manager/Business Systems Manager Responsibility:** The DM or BSM will provide the report quarterly to the Director.

#### H. Procedures for Review, Analysis and Reporting

The monitoring analyst will ensure that the data is entered into the Monitoring database and that reports are distributed to all stakeholders, including the Bureau Director, Assistant Director, and Comprehensive Services Managers and site staff. A monitoring results report is also prepared for the Delegate Agency. All monitoring results will be formally submitted to the delegate agency. Issues or corrections cited will be communicated with corrective action requirements as part of the notification.

**1. Monitoring Database**

- The program uses databases designed in-house to track monitoring findings and areas of strength to inform the reporting process and ensure the system is working effectively and efficiently. The analyst responsible for the ongoing monitoring system uses the database to track completion of corrective actions to ensure that closure is established for any item found to be non-compliant.
- The databases allow program managers to view trends and isolated incidences and assist them in conducting root cause analysis and plans for improvement as appropriate in a timely fashion.
- Non-compliances will be utilized by all staff to: to identify program weaknesses; to correct identified non-compliance issues; and to seek continuous improvement.

**2. Monitoring Reports**

- Monitoring analyst compiles results and findings such as: program strengths, areas of improvement, site performance reports and other reports as needed.
- Reports are disseminated to: senior management, comprehensive services unit, site supervisors, and site staff, Board of Supervisors, and Policy Council.
- Monitoring Analyst will complete a semi-annual Root Cause Analysis report and provide roll up summaries within 4 weeks of completion of Period 1 (July-December) and Period 2 (January-June).

**3. Root Cause Analysis**

Content Area Managers will review semi-annual monitoring reports for trends across their service area and complete a Root Cause Analysis and provide an Ongoing Monitoring Corrective Action Plan in response to areas identified as needing improvement within 4 weeks of report distribution.

- Review the monitoring reports for areas needing improvement to address and identify root causes for non-compliances (tangible, materials items failed, something was done incorrectly, system or process to do work requires revision).
- Define the problem, collect data, identify possible causal factors surrounding the problem, and identify the root cause.
- Submit an action plan to the Assistant Director to recommend and implement solutions, identify responsible persons.
- Effectiveness of action plan will be reviewed at the release of the following semi-annual monitoring report.

### I. The Ongoing Monitoring Plan

For more detailed description of the ongoing monitoring system, refer to the Ongoing Monitoring Plan located in the CSB Intranet.

## Subpart II. Self-Assessment

### A. Self-Assessment Team

The Grantee and the Delegate Agency conduct a joint Self-Assessment each year. The role of the Bureau Director and Delegate Director and/or their designees in the self-assessment process are as “advisor” to team. The analyst responsible for the Self-Assessment is the Team Leader and may be supported by a consultant. Small teams are comprised of grantee and delegate agency management and non-management staff, parents, community partners, and representatives of the Board of Supervisors. A cross-section of staff is represented on each team. Teams are formed beginning in November of each year and finalized in January.

### B. Methodology

1. Components of the self-assessment monitoring may differ year to year. The team leader and consultant, if applicable, identify sites and classrooms for the self-assessment. The following factors are considered in site selection:

- Monitoring results, including recent Federal Review, licensing visits, and assessment Findings
- History of site inclusion in last three years of self-assessment
- Program options and funding models to ensure all variations are assessed
- Representation of Supervisory Districts

- Site based special initiatives and projects
- Operational days

2. The current Office of Head Start (OHS) Program Monitoring Instrument and the Classroom Assessment Scoring System (CLASS™) are the tools used for the self-assessment each year. Slight modifications may be made to the tool by the team leader to streamline it for ease of use by community partners, parents, and board representatives. Other tools may be introduced as needed.

3. A timeline is established which includes ample time for site visits and report writing, scheduled team check-in sessions, and ongoing training and technical assistance.

4. Training is provided to all team members in January of each year and addresses the following items:

- Purpose and Approach
- Self-assessment process
- Methods of collecting applicable data
- Timelines
- Confidentiality
- Reporting procedure used in the “non-compliant” portion of each review team’s report
- Report writing format and techniques

### C. Parent Involvement

The Policy Council has a Self-Assessment sub-committee, which forms in November of each year after being provided with a description of the work of the committee. The Policy Council is oriented to the self-assessment process and timeline in November, at which time additional members of the sub-committee are recruited. These parents are trained fully with the rest of the team in January and are paired with an experienced manager to mentor them through the process, if necessary. The varying availability of parents is accommodated to maximize the involvement of all parents who express an interest in participating. Non-English speaking parents are encouraged to get involved and are paired with a staff person who speaks their language.

### D. Process of Self-Assessment of Agency’s Program Services

The Self-Assessment is conducted in February of each year. Each team is assigned specific service areas and several sites to assess and determine compliance. Examples of tasks of the various teams include:

- Interviewing appropriate staff, community partners, and parents
- Observing the classroom environment
- Reviewing documents such as policies, procedures, and service plans
- Observing procedures as they are implemented in the field
- Completing checklists for health and safety and eligibility



Teams check in regularly to report progress, problem solve questionable compliance areas, and plan their next day. At the conclusion of the data-collecting process, individual teams meet and review their findings, and determine the following:

- Program strengths and compliances
- Non-compliances
- Recommendation of a plan of action to meet compliance
- Evaluate the process using a plus/delta approach which is used to inform the process for the next year.

### **E. Self-Assessment Results**

Individual results of the self-assessment teams are submitted to the Analyst, who consults with the Bureau Director and Delegate Agency Director, and then compiles a complete report of the self-assessment.

The written report is sent out to staff, and if non-compliances are found, content area experts are assigned to develop a corrective action plan. Once the corrections are validated (immediately for health and safety items and within 30 days for all other items), the self-assessment report and plan of action are submitted to the Policy Council and Board of Supervisors in March. An approval is obtained for any corrective action plan involved. The final report, inclusive of the validation of submission and/or approval by the Policy Council and Board of Supervisors, is then submitted to the Administration for Children and families (ACF).

The results of the self-assessment are to be used in the planning process, in developing and improving program services, and in formulating the program approach, service plans, and goals and objectives for the program.

### **F. Monitoring the Plan of Action Resulting from Self-Assessment**

Throughout the year, management staff responsible for any areas of non-compliance identified in the self-assessment process shall continue to monitor the status of the corrective action, using the results of ongoing monitoring efforts, to ensure the issue is resolved and continues to remain compliant.

## **Part III. Record Keeping and Reporting**

### **A. General Description**

#### Record-Keeping and Reporting Systems

The effective and efficient reporting system used in CSB meets federal guidelines as spelled out in the Performance Standards Record-Keeping Instruction and the state guidelines as required by state contract and licensing requirements.

The system provides for accurate and timely information regarding children, families and staff and

meets the Confidentiality Policy of the bureau.

Each area of program services maintains the appropriate record-keeping and reporting systems according to the above mentioned federal and state guidelines to include: child and family records, site safety records, child records, child health records, family records, and personnel records. Systems for maintaining the records, specific to a program service area, are described in each section of these policies and procedures.

A file and records system is established/maintained by the Contra Costa County Community Services Bureau personnel office. In addition, copies of certain personnel records pertaining to all permanent staff, including Teacher Assistant Trainees job qualifications are kept at each child care center as required by state licensing.

Confidential files and records system shall be maintained in a locked cabinet to include official documents for each staff member.

- Procedure for File Transfers: When staff transfers to another site, it is the responsibility of the Site Supervisor at the new site to assure all required personnel files are sent to the new site by communicating with the Site Supervisor of the site from which the employee is transferring.
- The following procedures are in place to protect confidentiality of all sensitive material:  
If files are faxed by CSB Personnel to the employee's new location, CSB Personnel will contact the site supervisor and request the site supervisor to oversee the fax machine to verify all confidential information is transmitted to the site supervisor only, protecting the employee's HIPAA rights to privacy.
- After the Personnel Staff receives a confirmation from the fax machine, the Personnel Staff will call or e-mail the Site Supervisor to ensure that all the documents sent to that site have been received.
- The site supervisor at the employee's previous location will shred all documents pertaining to the transferred employee, and will send email verification to CSB Personnel when shredding is complete.
- Employees have the option of personally transporting their files to their new site. The employee must sign for the file material, and immediately transfer the file contents to their new site supervisor. The site supervisor must send verification to CSB Personnel when proper filing procedures have been completed.
- Under no circumstances may files be transmitted by interoffice or pony mail.

## B. Personnel Files

All personnel files are stored in the Personnel Unit in a locked cabinet and in a locked office. The access to the personnel files is granted only to the authorized personnel. An employee's union representative must have a written authorization from the employee to obtain access to his/her personnel file. When reviewing a personnel file, a member from the personnel staff must accompany the authorized personnel at all times in the closed door office. The authorized personnel must sign, date and write the reasons on the "Access to File" card located in front of each personnel file.

## C. Family Files

### 1. Center Based

The Site Supervisor, comprehensive service staff or the head teacher at each site is responsible for maintaining the family's basic data file at each site. All children's files must be kept in a locked file cabinet. Access to files is permitted only by authorized personnel. When authorized personnel must access a child's file, the protocol must be adhered to. Two types of access and removal of a file from the cabinet can take place.

- The file is taken off site for audit or review:  
Authorized staff must record the removal of the file off the site premises on the "Record Keeping Log" located at the site; He/she must log: "check in/out status" by completing the required information on the template.
- The file is accessed on site:  
Authorized staff needing to work on a file on site must pull the file and in its place insert the file check-out card indicating: date, name and signature of staff pulling file. Upon return of the file, staff must sign in verifying the return of the file, and the check-out Card is removed.

In both of the above situations, an "Access to File" form must also be completed by the authorized person accessing the file. This is located on the right hand side of the first section of the child's file. One must indicate date, name, and purpose for accessing the file.

Files are kept on site for the current enrollment year until after the annual audit is complete. After the audit, files are prepared to be archived, and sent to a warehouse for storage. Children's files are kept for five years after our services to the family ends. Files are then shredded.

Effective January 1<sup>st</sup> 2014, any document or record may be maintained on electronic format if it was originally created in an electronic format and kept in its original unconverted electronic format. Documents or records created in paper form cannot be scanned and stored electronically alone. These records must be stored in their original paper format. Independently of being hard copy or electronic format, all records must be kept for at least five years

### 2. Alternate Payment Program:

All family files must be kept in a locked file cabinet. Access to files is permitted only by authorized personnel.

Any document or record may be maintained on electronic format if it was originally created in an electronic format and kept in its original unconverted electronic format. Documents or records created in paper form cannot be scanned and stored electronically alone. These records must be stored in their original paper format. Independently of being hard copy or electronic format, all records must be kept for at least five years. After this period, hard copy files will be shredded.

### D. Client Files for Low Income Home Energy Assistance Program

All Client records and documents must be scanned in a secure folder. All scanned and hard copy client records are retained for three years from the contract close out. After three years from the contract close out date, the hard copies are then shredded.

## E. Contract Files

Contract files are stored in designated cabinets in the Contract & Grants Administration office. Contract staff is required to maintain current and accurate records of contract activity. This includes contracts, board orders, insurance verifications, required clearances and Internal Revenue Service (IRS) documentation. The documents are kept in individual contract files, labeled by contractor name and contract number. Board orders are kept with each corresponding contract and in a general board order file, organized by month and year. EHSD Contracts and Grants Unit will maintain a record of all contractors' files and will include all licensing and program mandated forms. The following documents are maintained by the Contracts & Grants Unit:

- Independent Contractor contract files
- County Administrator Office Questionnaire for determining Independent Contractor status
- Corporation (non-profit and for-profit) Contractor contract files
- Contract files for contracts with other legal status, such as general partnership
- Contra Costa County Small Business Enterprise award forms (where applicable)
- Board of Supervisors board orders
- IRS W-9s and IRS W-4s (where applicable)
- Certificate of Liability Insurance
- Fingerprint clearance form (where applicable)
- Current Health Screening Form or proof of current physical exam and TB clearance (where applicable)
- Contra Costa County Auditor-Controller Insurance clearance
- CSB Contract Request forms, with authorizing signatures

## F. Public Access to County Records

In accordance with the California Public Records Act and the Better Government Ordinance, any person is entitled to inspect and to receive copies of the public records of the County, including records of individual departments. Upon a request for a copy of public records, county staff is to make the requested records available to any person upon payment of applicable fees. Disclosable county records may be inspected anytime during regular business hours. Every attempt should be made to allow prompt inspection of the requested disclosable records. If copies are requested, they should be provided no later than the next business day if possible to do so.

### i. Disclosable Records:

Any existing writings containing information relating to the conduct of the public's business prepared, owned, used or retained by the County regardless of physical form or characteristics are considered public records and should be disclosed by request. These include, but are not limited to, papers, books, maps, charts, photographs, audio tapes, and video tapes, information stored in non-paper form on a computer or other electronic media and other material. Additionally, writings that are not, in whole or in part, exempt from disclosure under the Public Records Act and the Better Government Ordinance.

**ii. Exempt from Disclosure Records:**

Personnel, medical or similar records which cover intimate and personal information such as: employee performance evaluations, employee home address, home telephone number and all personal information are exempt from disclosure. Certain other public employee information may be released: (1) amount of an employee's gross salary and benefits, job classification, and job duties; (2) Merit board and arbitration disciplinary proceedings and writings submitted in such proceedings; (3) information in case of emergency or need when such disclosure appears reasonable to protect any person's health or welfare; (4) information for authorized criminal law enforcement purposes; (5) information required by subpoena, testimony or other legal process; (6) information authorized to be released to third parties by the written consent of the effected employee; and (7) any other information, when reviewed and approved by CC County Counsel prior to release.

- Investigatory records compiled for correctional or law enforcement purposes such as: records of complaints, preliminary inquiries if a crime or violation has been committed, full investigations, and memoranda "closing" an investigation.
- Examination data such as questions, scoring keys, examination data used to administer a licensing, employment or academic examination.
- Confidential legal writings such as writings to or from the CC County Counsel to an attorney who represents the County or writings especially prepared for or by the County Counsel providing legal advice, analysis of proposed legislative actions or positions, terms of settlement of litigation, post-negotiation reports.
- Health Services contracts between the County and the State and writings related to those contracts.
- Particular statutory exemptions related to specific situations such as information about health facilities, assessment records, agricultural information, etc.
- Real estate appraisals or engineering studies relating to the acquisition of properties or to prospective construction contracts.
- Preliminary drafts, notes, memoranda and "deliberative process".

CSB employees are encouraged to contact Personnel when approached with requests for disclosure of documents by the public. Personnel staff will provide advice or contact County Counsel for additional clarification. In such cases, the employees are expected to provide the requestor/s with timelines in which the requested information will be provided to them.

## **Part IV. Business Systems**

### **A. Overview**

The Business Systems Unit supports the operation of CSB programs by ensuring that CSB has:

- Safe, secure facilities.
- Technology and related services to effectively manage work.
- Safe transportation for travel as necessary and available.
- Grant writing leadership and support.

- Ongoing monitoring, planning, and communication systems.
- Equipment and supplies necessary to operate a quality program; and
- Forums for sharing ideas and implementing continuous improvement.

## B. Facilities

### 1. Physical Environment and Facilities

- Both CSB and their designated contractors shall endeavor to operate offices and childcare centers that are free of exposure from toxins such as cigarette smoke, pesticides, herbicides, lead, and other air pollutants as well as contaminants from the soil and the water.
- Smoking is not permitted under any circumstances on the premises of the centers and is posted as such. Anyone found bringing in a lit cigarette, electronic cigarette, or cigar shall be directed to immediately leave the office/center until the item has been safely extinguished outside of the building.
- No center or office shall be sprayed with herbicides or pesticides when children or staff is present.
- Each center has a thermostat that must maintain a minimum of 68 degrees F. and a maximum of 85 degrees F.
- All plumbing fixtures must be sanitary, safe and in working condition at all times, including hot and cold water availability (a minimum of 105 degrees F. and not to exceed 120 degrees F) and may not serve more than 15 children.

#### i. Children's Centers-Outdoor Environment

The outdoor space must be safe and free from hazards at all times. Each morning, before the children go outside, the Site Supervisor or designee must assess the entire outside area including the sandbox, climbing area, playground surfacing, fences and any other area in use by the children to ensure compliance with state and federal health and safety requirements. This is done by using the "Outdoor Health and Safety Checklist".

If there are hazards on the playground, the Site Supervisor must:

- Assess what needs to be done immediately to fix the hazard. If he/she is unable to fix the situation immediately, he/she must make alternate space for the children until the situation is fixed.
- Report the hazard to his/her immediate supervisor.
- Complete a Facility Work Request after receiving approval from the Site Supervisor.

- In centers with infants, toddlers and preschoolers, the age groups must be kept separated at all times.

## **ii. Children Centers-Indoor Environment**

The indoor space must meet applicable state and federal regulations at all times. Each morning, the opening staff member(s) must conduct an indoor health and safety check to ensure the facility is ready for children.

## **iii. Infants Environment**

The indoor and outdoor spaces for infants must be separate from areas for children of differing ages. Inside it can be a separate room or separated by moveable walls or partitions that have correct square footage in each area. The moveable walls or partitions must be at least four feet high, made of sound absorbing material and designed to minimize injury to infants.

The calculation of the indoor space does not include the space used by cribs. The sleeping area must be physically separate from the activity area. This can be accomplished by having a separate room or with the partitions described above.

## **2. Building Security/Alarms and Maintenance**

### **i. Building Closure**

Procedures are established at each site based on the whether they have an Electronic Access System and/or Building Security Alarm. Each site and the administrative office is responsible for developing and enforcing a building opening and closing procedure. The Site Supervisor or senior staff member is responsible to see that all appropriate staff are informed and trained on the procedure of locking the building and arming the alarm (if applicable). Information on how to contact the alarm company and who to contact for after hour emergencies is posted on the alarm panel.

### **ii. Building Security Alarms**

Building security alarms are turned on by assigned staff when leaving the site at the end of the day and turned off at the beginning of the day. Assigned staff may not share individually assigned alarm codes unless it's an emergency situation. If there are problems with arming or disarming the system, staff must call the alarm monitoring company at the phone number shown at the arming station. If assistance cannot be provided over the phone, an alarm technician will be sent to the site. If error codes are present but the system is functioning, staff should submit an electronic work order to Facilities stating the error code.

The Security system performs a self-test and displays a trouble code for any required maintenance on a daily basis. An emergency contact list is provided to the alarm monitoring company of staff to contact in case of an alarm being triggered after hours.

### **iii. Fire and carbon monoxide monitoring systems**

Fire and carbon monoxide monitoring systems are tested annually by the Public Works staff and inspection reports are kept on site. Any identified deficiencies must be repaired and pass re-inspection. Repair work orders are submitted electronically to Facilities by the Site Supervisor along with a copy of the Fire Inspection Report on the day of the inspection.

Trouble codes are sent from the alarm system to the monitoring company which alerts the fire department. When the alarm sounds, staff must evacuate the building to the designated evacuation area and wait for emergency personnel.

### **iv. Exterior door alarms**

Exterior door alarms are located at the top of the door(s) and are to remain active in the “On” position at all times. Alarms can be over-ridden by the use of a key that turns the alarm to the “Off” position and allows access to and from a classroom.

The Site Supervisor will submit a work order to Facilities the same day as problems occur, for example the alarm not sounding when the door is opened without turning the key to the “Off” position. The exterior doors alarms are battery operated and beep when a battery becomes weak. Facilities Building Services Workers will replace batteries within 24-hours of receiving a work order request notifying them of a low battery alert.

The Safety Officer performs a test of exterior door alarms as part of the monthly health and safety checklist and all problems are reported to Facilities immediately through submission of an electronic work order request.

### **v. Alarmed Push Bars on Half-doors**

Alarmed push bars on half-doors are located in building entrances and must be armed at all times. The Safety Officer tests all half-doors in the facility as part of the monthly health and safety checklist and all problems are reported to Facilities immediately through submission of an electronic work order request. The Site Supervisor will submit a work order the same day as problems occur, for example when the alarm doesn’t make a sound when opening the door and pressing on the bar, or if the alarm does not reset after the door is closed. A half door that is armed will show a red light on the alarm panel. No light or a green light indicates the alarm is not set.

To activate the alarm: the key is turned to the off/green light position, staff waits 30 seconds, and then turns to the on/red light position. Keys to the doors are to be kept out of the reach of children at all times and in a discrete location from visitors. Staff is to demonstrate proficiency in arming the system. Facilities staff will review and provide training on arming the doors upon request.

Centers with alarmed push bars on playground gates are to include the testing of the gates in the monthly Health and Safety checklist. Playground gates do not have alarm panels with lights and are armed at all times.

### **vi. Electronic Access Card Systems**

Electronic access card systems on exterior entry doors maintain the security of the facilities by



limiting access. Staff is issued electronic access cards to sites that work like electronic keys. Exterior doors remain locked from the outside while allowing staff access with their electronic card. The cards are also printed with staff names and photos to be used as identification cards. If an electronic access card is lost or stolen it will be promptly deactivated to maintain the security of the facility. Repairs to access card systems are rarely needed and are made when issues are reported by the Site Supervisor to the Facilities unit through an electronic work order request.

#### **vii. Keys**

Keys for entry to the Community Services Bureau buildings will be furnished by Business Systems per the request of the Site Supervisor or employee's supervisor.

At the time of the issuance of keys, the employee will be requested to sign the Portable Media/Access Policy and key sign out sheet.

Upon receiving access to any of the site keys, the staff member is responsible for safe keeping the key and its use as well as to ensure that all building doors are secured prior to leaving the building. Keys are not to be loaned or made available to others and any lost or stolen keys should be reported to Business Systems immediately. For more information, refer to the Portable Media/Access Device Policy.

#### **viii. AiPhone (Video/intercom) Systems**

AiPhone systems are used at some sites to allow staff to easily allow access to families while keeping the facility secure. Visitors to a center press the buzzer outside the entrance and are greeted over the intercom, when they are visually identified the door is unlocked.

#### **ix. Video Surveillance Systems**

Video surveillance systems operate 24 hours a day 7 days a week. The Site Supervisor monitors the surveillance cameras daily and confirms cameras are directed to show a clear unobstructed view of the classrooms, entrances and playgrounds. Any obstructions to the view or misdirected cameras are reported to Facilities through an electronic work order request by the site supervisor the same day as they occur. The Facilities staff will check the video feed from their location and report the problem immediately to Public Works. The facilities unit will work with Public Works to make any necessary repairs within 24 hours of the reported problem.

Requests for video footage are made to Facilities by the Site Supervisor or senior management staff through an electronic work order request. Requests must be made as soon as possible as the system only retains footage for up to a week.

### **3. Acquiring Space**

The Policy Council must be consulted on the location of space acquired for the program's use. The space acquired must meet all applicable local ordinances for both classroom and office use. Additionally, all space acquired for classroom use must meet all the state and federal regulations. Negotiation of leases is delegated to Contra Costa County Lease Management and lease costs must be within budgeted amounts designated for such expenditures. Lease Management prepares/finalizes all leases for the Assistant Director's signature. In addition, the Business Systems

Manager or Division Manager must approve/sign all the leases negotiated for CSB.

#### **4. Use of County Facilities**

The use of county facilities is covered by the following regulations:

- County Property shall be used only for official business. No employee of the Department shall use any County Property for his or her own personal benefit.
- Use of County building space by private organizations is regulated by inter-agency agreement.
- Departmental officials may make arrangements for posting official announcements on County bulletin boards through the General Services Department. Use of County bulletin boards by private organizations for advertising, except as provided by ordinance for employee organizations, is prohibited.
- CSB program managers are responsible for County facilities and property used by employees under their jurisdiction. While controlling and administering use of space/facilities, managers must see that employees do not introduce material which others would find objectionable / offensive for reasons such as different social, political, religious, or moral beliefs.
- Solicitation of contributions and sale of merchandise within County buildings except for purposes authorized by the Board of Supervisors is prohibited.
- Restrooms and lounge facilities are provided for employee use.
- CSB classrooms and offices are not to be used as lunch or coffee rooms.
- All facilities serving children must meet applicable state and federal regulations pertaining to health, safety, and developmentally appropriate practice.

#### **5. Document Posting**

Before classes begin each program year, the Site Supervisor obtains and assures the proper posting or filing of the following documents at each facility and/or classroom:

- Evacuation Plan
- Fire / Earthquake Drill Schedule
- Emergency Guidelines for Illness and Accident First Aid Manual
- Emergency phone numbers for fire, police, paramedics, nearest emergency hospital, poison control center, physician, and administrative office
- Parents' Rights Form
- Children's Rights Form
- No Smoking signs
- Employee Safety Policy Statement
- Current license
- Any other document mandated by the state or federal government.

Note: Children's contact numbers are never to be posted.

#### **6. Safety Officer**

For each building which houses CSB personnel, a safety officer has been designated. General responsibilities of safety officers are to:

- Complete a monthly health and safety checklist.
- Instruct co-workers in emergency procedures.
- Assist the Supervisor/Manager in charge during an emergency.
- Keep track of persons assigned to each building.
- Know the conditions under which a building should be evacuated.
- Know what procedures/equipment is available for the evacuation of handicapped persons.
- Know the location of all primary and alternate building exits and know direct routes to each exit.
- After evacuating a building, search to make certain all individuals have left.
- When emergency responders arrive, report to them any injured person requiring special attention.
- Call roll at the evacuation assembly area and report missing persons to emergency responders.
- Know the location of all fire alarms and fire extinguishers.
- Know how to operate fire extinguishers.
- Know the location of all the first aid and emergency kits.
- Know first aid and CPR.

### C. Use of Technology

CSB utilizes a variety of technology throughout the bureau and is supported by the Contra Costa County Department of Information Technology.

#### 1. Child Location Observation Utilization Data System (CLOUDS)

CSB uses CLOUDS as its management information system. Staff are required to keep the system up-to-date in accordance with their respective roles in the organization. These roles are detailed in these policies and procedures in each service area. In addition, teachers are responsible for ensuring that parents sign their child in and out electronically. Manual systems are in place for back-up purposes.

##### i. User Support

CLOUDS user manuals are posted on the CSB intranet and in the Shared Drive (x:\CLOUDS) that details how to use the system. In addition, training is provided in an ongoing fashion via user groups. New staff is assigned a mentor user to orient them to the system.

##### ii. Ongoing System Enhancements

All system enhancements must be requested via the content area expert for the respective portion of the system. Content area experts formally request the enhancement to be placed in the project queue via the CSB Help-Desk System (Track-It). Enhancement requests must include attachments with screen shots and indicate the level of priority with a justification for the priority level. The Business Systems Manager will evaluate all requests and notify requestor of the final decision regarding placement in the project queue. As enhancements are developed, content area experts are required to test them and then to inform staff regarding proper usage of enhancement. User manuals will be updated with finalized enhancements by the vendor.

### D. Equipment and Supplies

County property, equipment and supplies shall be used for official business purposes only. No employee of the Department shall use any county property for his or her own personal benefit.

## **1. Procedures for Ordering Materials - Employees and Supervisors**

### **i. General Description**

An employee or supervisor has alternatives for obtaining non-emergency material or services:

- Office Supplies - Approved ordering staff at each location prepare an on-line order form. CSB has an approved shopping list of discounted items that should be utilized whenever possible. Items can be added from the general catalog if they are not on the approved list. The completed order is sent electronically to the Assistant Director/Program Manager for approval and submission to the office supply company. Ordering staff can track their order progress online.
- Classroom Supplies – Requests for classroom supplies are sent from the Site Supervisor to their Assistant Director for approval. The designated Assistant Director orders classroom supplies for all sites.
- Health / Janitorial Supplies – All health and janitorial supplies may be ordered on an online Supply Order Form. Supply orders should be completed on a monthly basis by the Site Supervisor and are approved by the Assistant Director. The order is then sent electronically to the Purchasing Unit for processing.
- Open Purchase Order - The County has established a number of Open Purchase Orders (POs) with vendors in the area authorizing certain persons to pick up material and charge it to the CSB account.
  - If you wish to order materials from these vendors, submit a purchase requisition to your supervisor for approval of the Assistant Director. If approved, it will be forwarded to a person authorized to purchase material under the Open PO by credit card or other arrangement. If an order is over \$5,000 it must be signed by the Division Manager.
  - After the purchase is made, the requisition and the vendor's receipt will be forwarded to the CSB Accounts Payable Unit. When the bill is received, the Accounts Payable Clerk will match it to the approved requisition and receipt prior to payment. CSB has established Open Purchase Orders with many vendors. A current list can be obtained from Fiscal. If you are making a large number of purchases from a vendor that does not have an Open PO you may request that one be established by contacting the purchasing clerk.

CSB Requisition: If there is no Open PO available for the material required, you must submit an approved CSB purchase requisition to your division's purchasing clerk. After a purchase is made, the requisition and packing receipt must be forwarded as soon as possible to CSB Accounts Payable Unit. When the bill is received the Accounts Payable Clerk will match it to the approved requisition and receipt for payment.

### **ii. Purchasing Procedures - Purchasing Clerks**

Purchasing clerks are located in the CSB Administrative Office and are responsible for processing

all department requisitions. Once the purchasing clerk receives a CSB requisition he/she has several options of procurement methods depending on the situation. Below is a description of the methods available to the purchasing clerk.

- Warrant Request - CSB can normally use a Warrant Request to purchase items with a total cost under \$500. This form needs to be signed by the requester and an authorized manager. This procedure is faster than a purchase order as it does not need to be processed by County Purchasing.
- CSB cannot use a Warrant Request to purchase any item that can be purchased using an open purchase agreement. In addition, the following items cannot be purchased using a warrant request:
  - Furniture
  - Printing Services
  - Appliances
  - Professional Services
  - Cellular Telephones
  - Building Related Charges
- County Requisition (Form REQ) - For vendors not having an Open PO, or not qualifying for a Warrant Request, items are purchased using an approved Purchase Order. The purchasing clerk completes a County Requisition form based on the submitted requisition form and forwards it to the General Services Purchasing Division for preparation of a Purchase Order.

There is no dollar limit for a Purchase Order however it can be an extensive process as it may have to go through the County's procurement process and involve soliciting competitive bids and awarding of the contract to the lowest qualified bidder depending on the dollar amount of the proposed contract. It should be noted that, when time is critical, CSB might ask the Purchasing Division for a PO number. If they agree, CSB is allowed to make the purchase without the normal process.

- Equipment Definition: purchase of equipment must adhere to both Grantee policies and guidelines outline in the Contra Costa County Head Start Administrative Manual. (For local purposes, "equipment" is defined as any purchase costing \$5,000 or more.) Any equipment/equipment purchase not identified in the annual grant (or subsequent applications) must receive Policy Council, Regional, and Executive Director's approval. Such requests must be made prior to the end of the Head Start fiscal year (by December 31<sup>st</sup> of each year). Equipment funded in part or wholly through CA Department of Education must have prior approval on any single item of \$5,000.
- Supplies: Supplies purchased for CSB programs must be deemed necessary and appropriate by the Bureau Director. (The process for expenditures of funds for supplies is outlined in the procurement procedure on file in the fiscal office. It must be followed.) All expenditures of funds must be approved by the Program Director.

## **2. CSB Equipment, Toys, Materials, and Furniture**

### **i. General Description**

CSB sites must provide clean sheets and blankets for children's use at naptime and they are to be washed each week or as needed. If there are not sufficient sheets and blankets, the Site Supervisor must notify the Assistant Director immediately.

All play structures and equipment used by the children must meet the following requirements:

- Age and developmentally appropriate.
- Maintained in good condition.
- In sufficient quantity to allow full participation.
- Free of health and safety hazards.
- Free of toxic substances.
- If any material in the environment does not meet the above standards, it must be removed immediately or deemed off limits to the children until it can be safely removed.

**ii. Infant Furniture**

- The infant equipment and furniture, inside and outside, must be developmentally appropriate and includes cribs, cots or mats, changing tables and other necessary equipment. The type, height, and size of all furniture and equipment must be age appropriate. There must be a variety of age appropriate washable toys and equipment.
- CSB does not use swings, playpens, walkers or high chairs. Walkers may not be kept on the premises. Equipment that is assembled when purchased must not be modified, and if assembly is needed, it must be assembled according to the manufacturer's instructions.
- Supplies containing toxic materials or substances shall not be purchased and used on the centers.
- All equipment and furniture must be maintained in good repair, safe condition and disinfected after each use. Equipment must be safe and must not have sharp points or edges or splinters, or be made of small parts that can be swallowed.
- Toilets and hand washing sinks must be in close proximity to the activity areas.

Infant changing tables must:

- Have a padded surface no less than one-inch thick and be covered with washable vinyl or plastic
- Have raised sides at least three inches high
- Be maintained in good repair and safe condition
- While in use, be placed within arm's reach of a sink
- Not be located in the kitchen/food-preparation area

Toy storage containers must meet the following requirements:

- Lids and the hardware used to hinge lids on boxes or chests must be removed
- All edges and corners must be rounded and padded

- The container must be well ventilated
- The container must be lockable
- The container must be maintained in good repair and safe condition
- Metal and wood boxes must not have sharp or splintery surfaces

Pacifiers must have a shield or guard large enough that the child cannot choke. Rattles must be large enough that they cannot become lodged in the infant's throat and constructed so that they will not separate into small pieces.

It is recommended that all infant sites comply with the US Consumer Product Safety Commission advice for the selection and safe use of children's toys. Avoid toys with small parts. Look for the age recommendation on labels. Toys should be suited to the skills, abilities and interests of children.

### **iii. Infant Napping Equipment**

Each crib, mat or cot must be occupied by no more than one infant at a time.

For each infant who is unable to climb out of a crib, a standard size crib meeting the following requirements is provided:

- Slats must be no more than 2 and 3/8 inches apart.
- Tiered cribs are not allowed.
- Cribs must not limit the ability of the staff to see the infant.
- Cribs must not limit the infant's ability to stand upright.
- The mattress must be at its lowest position.
- Cribs will have stationary sides.

Crib mattresses must be:

- Covered with vinyl or similar moisture resistant material.
  - Wiped with disinfectant daily when soiled or wet.
  - Maintained in a safe condition with no exposed foam, batting or coils.
  - Bumper pads must not be used at CSB facilities.
- 
- Each infant must have his/her own bedding used solely for him/her. It must be replaced when wet or soiled or when it is to be occupied by another infant.
  - Bedding must be changed daily or more often if required, and placed in a container that is inaccessible to children.
  - Floor mats or cots must be provided for all infants who have the ability to climb out of a crib.

- Cribs, mats or cots must be arranged so that the staff can reach each infant without having to step over or reach over any other infant. Placement must not hinder going in and out of the nap area.

### **3. Use of County Communication Services**

#### **i. General Description**

Communication services are provided for the use of County employees for work-related communications. For example:

- The telephone system is provided for the use of Contra Costa County employees in the conduct of their assigned duties. (See EHSD & CSB Internet/Email/IT Standard Usage Policies)
- Contra Costa County provides a message service (to forward written material and small packages among various County facilities on a regular route and time schedule). Each work site served posts the time of pickup and delivery; this service is to be used where available (Supervisors have further information regarding this program).
- The Contra Costa County Public Works Department provides a centralized United States Postal Service operation. All mail must be processed through this Center (except for emergency situations). Materials to be mailed may be submitted through Messenger Service.
- The department pays for all postage charges, but receives reduced costs for bulk and ZIP code mailings. Contra Costa County's Postal Service is provided for office use of County staff. It is not to be used for personal benefit of employees or the public (Supervisors may be contacted for rules and Regulations regarding United States Postal Services).
- Fax machines are available for Contra Costa County use. Telephone numbers for fax machines are listed in the Inter-Office Telephone Directory. CSB implemented the use of E-fax, faxes received and sent by email, and paperless faxing through copiers to switch to paperless faxing.

#### **ii. Portable Communication Devices**

Smart phones, two-way radios, tablets, laptops and wireless modems (collectively referred to as portable communication devices) are utilized by CSB to allow management personnel to stay in communication when away from their primary office, when traveling on business, and in emergency situations. Portable communication devices are county property and are covered under the same requirements as other county property.

Employees are responsible for the security of communication devices and are to report lost, damaged or malfunctioning devices to their supervisor as soon as possible after discovery.



- Employees are responsible to ensure the confidentiality and security of information contained on or obtained through communication devices.
- All communication on the device is considered county business and as such is not considered personal or private.
- Voice messages, text messages, e-mails, photos and other methods of communication or storage of information can be reviewed at any time by appropriate county personnel. This includes call, data and text logs.
- Communication devices are to be used for county business only. Inappropriate use of county property, including the personal use of communication devices that cause excess use charges to be incurred whether reimbursed or not, can result in loss of privileges to use county property.
- Communication devices are to be used only by the county employee they are assigned to. If devices are to be used by more than one authorized employee they will be assigned to specified employees for a defined time period before reassignment to other employees. (Sites make assignments on the Equipment Check-out Log).
- Use of a device for texting while driving, whether in a county vehicle or personal vehicle on county business, is prohibited by state law. Phone calls made or received while driving are strongly discouraged, but are allowed only if possible with the safe use of hands-free devices.
- CSB is required to submit reports on the use of the devices to DoIT and the CAO. The reports will contain information specific to each device, including any use of a device that caused additional charges to be incurred, and confirmation of reimbursement of those charges.
- As with all county property, each communication device (including accessories) is to be returned upon change of position or separation of employment.

Two-Way Radio: In the event of an emergency such as natural disasters, storms and other emergency situations where normal methods of communication are disconnected and all else fails, the use of the two-way portable radios as a primary communication option is a must. Two-way radios have played a vital role as the most reliable form of communication, which is why it is primarily used by the military, law enforcement and other emergency personnel.

In the event of an emergency, a transmission will be relayed county wide to all centers from the Administrative office at Civic Court. A "roll call" will be conducted along with center status checks. In some cases, there could be an emergency/event only affecting one particular area of the county. If this is the case, certain centers may be directed to switch to a secondary channel to transmit (our radios have a primary and secondary channel).

Please refer to the "Two-Way Radio Guideline" on the CSB Intranet Resource Center under the "Facility Guidelines" folder for information on how to utilize the radios.

### E. Vehicle Usage Policy

## 1. General Procedures

CSB maintains vehicles for use by authorized personnel in order to conduct official County business. Policies on the use and operation of vehicles on County business also apply to driving personal vehicles while on County business. Vehicles are reserved through designated clerical staff or vehicle reservation calendars. In an effort to ensure that CSB vehicles are kept in top condition, the following procedures must be followed.

- County vehicles can only be used by authorized employees while conducting county official business.
- Authorized drivers must have a valid California Driver's license.
- Authorized drivers are to immediately notify their supervisor of any change in the status of their California Driver's license.
- County vehicles are to be used only for authorized county business.
- Drivers are responsible for safe driving, including parking in a well-lit area, and locking the vehicle at all times.
- Drivers are to be courteous and practice defensive driving and fuel conserving practices.
- Authorized drivers are to observe all traffic rules and regulations.
- Carpooling in county vehicles is strongly encouraged when multiple employees are attending the same business function.
- Employees are prohibited from carrying unauthorized riders while on county business.
- Moving, parking and toll violations are the personal responsibility of the driver.
- No smoking is allowed in county vehicles.
- While the vehicle is in operation no eating or drinking is allowed.
- Cell phones and other hand held devices are not to be used while operating a vehicle, unless:
  - The device is secured in a mounting system to the dashboard (including air vents) or windshield (placed in one of two positions on the windshield - in the lower left or right hand corner).
  - Can be operated by tapping or swiping the screen with one finger.
- All persons driving or riding in a vehicle are to be properly secured with the use of seat belts or other approved restraint systems.
- Vehicles are to be returned free of trash or other debris.
- Car seats and other cargo should be secured in the cargo area of the vehicle so that they will not become projectiles in case of a sudden stop or accident.
- Drivers are to wear appropriate footwear, no backless or loose sandals.
- Vehicles are to be returned with a minimum of a half tank of fuel.
- County vehicles are to be fueled regularly at the County Fleet station or other approved facilities.
- The County credit card is to be used exclusively for purchasing gasoline at authorized fueling centers. (See list of centers and addresses in the vehicle binder fuel tab.)
- If the credit card is lost it must be reported immediately to avoid fraudulent use.
- County vehicles will be serviced at the Fleet Service Center on Waterbird Way, except in after-hour emergencies.
- CSB does not use Fleet loaner vehicles. Contact the Facilities clerk for possible temporary use of another CSB vehicle if necessary.
- County vehicles are not to be taken to a personal residence without Sr. Management approval.

- Vehicle binders and keys are to be returned punctually after vehicle use.

It is CSB policy to use a county vehicle when one is available in lieu of using a personal vehicle. If a county vehicle is available it must be utilized unless a supervisor determines that the use of a personal vehicle is justified. Justification for the use of a personal vehicle is documented by the supervisor's signature on the request for reimbursement of travel expenses.

## **2. Accident and Maintenance/Repair Reporting**

Drivers are to report any accident or service need the same day as the occurrence. All accidents must be reported and the proper paperwork to be completed and submitted to Risk Management within 24 hours of the accident. Any unusual sound, odor, low fuel, maintenance light or other indication that the vehicle is malfunctioning or may need service is to be reported to the clerk when returning the vehicle binder.

## **3. Child Passenger Safety Procedures**

A child will be transported in county vehicles only if the child is fastened in an approved developmentally appropriate safety seat, seat belt, or harness appropriate to the child's weight, and the restraint is installed and used in accordance with the manufacturers' instructions for the car seat and the motor vehicle. Each child must have an individual seat belt and be positioned in the vehicle in accordance with the requirements for the safe use of air bags.

Age and size appropriate vehicle child restraint systems shall be used for children under 8 years of age, less than 80 pounds or under 4'9" tall. Vehicle restraint systems should be secured in the back seats only. Children shall ride facing the back of the car until they have reached two years of age or weigh over 40 pounds or are 40 or more inches tall. A booster child safety seat shall be used when the child has outgrown the convertible child safety seat. A vehicle seat belt can only be used when the child is 8 years of age or older, 80 pounds or 4'9" in height. The seat belt only fits properly when the lap belt lies low and tight across the child's hips (not the abdomen), touching the upper thighs and the shoulder belt lies flat across the shoulder, snugly across the mid chest, away from the neck and face. Never tuck the shoulder belt under the child's arm or behind the child's back. The child's knees should bend easily over the edge of the vehicle seat.

Staff transporting children must be aware of the following:

- The rear of the vehicle is the only place for a child to ride.
- Staff should use the diagram of the seating plan when placing children in a vehicle.
- Lap-belt only positions can only use the 5-point harness car seats.
- Shoulder and lap belt positions close to the sliding door should be last position to seat a child.
- The car seat and seat belts should be checked before each use to make sure they are installed correctly and that the belt straps are not twisted.
- Empty car or booster seats should be strapped in with the seat belt system or stowed in the cargo area away from the passengers.
- No loose items should be on the floor.

The following are child passenger safety basics for each type of car seat:

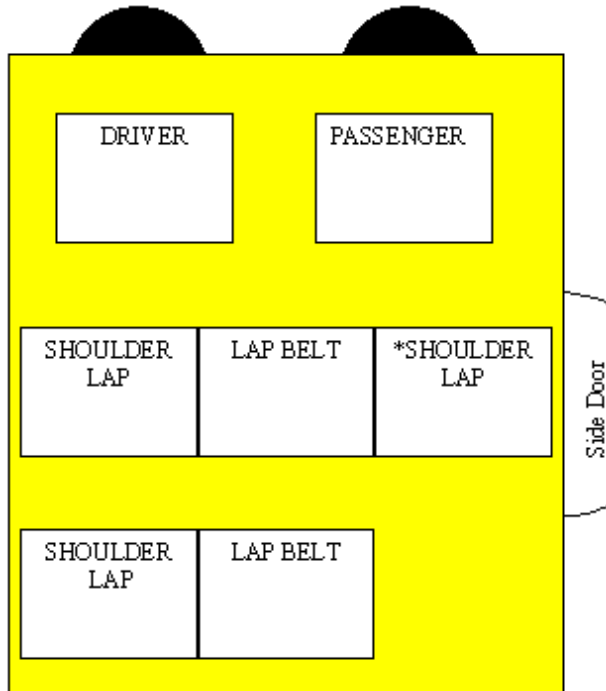
- Rear-Facing
  - Must ride rear facing until at least 2 years of age, weighs 40 pounds or is 40" tall
  - Do not bundle or swaddle; no heavy clothing
  - Harnesses at or below shoulder level
  - Harnesses snug and flat across infant
  - Retainer clip at armpit level
  - Must ride at a 45 degree angle
  - Seat secured tightly to vehicle with less than 1 inch of movement side-to-side and forward
  
- Forward-Facing
  - Children 2 years of age and 40 pounds but weighing less than 80 pounds or under 4'9" tall, ride either in a convertible or forward facing seat in the forward facing position
  - No heavy clothing
  - Harnesses above shoulder level and in reinforced slots
  - Harnesses snug and flat across infant
  - Retainer clip at armpit level
  - Generally ride fully upright
  - Seat secured tightly to vehicle with less than 1" of movement side-to-side and forward
  - Top tether in use when available and appropriate
  
- Belt Positioning Boosters
  - For children who have outgrown the car seat but do not yet fit the adult lap/shoulder belt
  - Lap belt crosses pelvis or top of thighs
  - Shoulder belt crosses chest
  - Middle of child's head is below the top of the vehicle seat or booster

## F. Transportation

While CSB does not provide direct transportation services to and from the centers each day, the Site Supervisor or Comprehensive Services team member must assess the needs of each family upon enrollment and attempt to make reasonable effort to assist if the family is in need of transportation services to the center.

Transportation services are offered for the following:

- To / from socialization activities
- To / from Policy Council Meetings
- To / from field trip locations



- Lap Belts – use only 5-point Harness Seats. No Boosters
- Shoulder Lap with Star (\*) is the last Shoulder Harness to fill
- No loose items in the vehicle
- Unused car or booster seats are strapped in or removed from the passenger area of the vehicle.

## G. Emergency Procedures

### 1. Gas Leak/Power Outage

#### i. If you detect an odor of natural gas:

- Determine where the odor of gas is emanating from.
- Contact PG&E at (800)743-5000.
- Contact the local Fire Department.
- Evacuate the building (if you feel there is an immediate threat to children and staff).
- If the gas odor emanates from outside the building, close all windows and doors and remain inside.
- Contact your Supervisor and Facilities.

#### ii. Power Outage:

- Have your flashlight ready to move through darkened areas.
- Contact PG&E at (800)743-5001.
- Contact your Supervisor and Facilities.

### 2. Shelter in Place

In the event of a chemical release, safety sirens in Contra Costa County's industrial corridor will sound to alert the public. If you hear the sirens, or are told to Shelter-in-Place, emergency officials recommend that you Shelter, Shut and Listen:

- Stay inside.
- Close all windows and secure doors (locking provides a tighter seal).
- Close the center.
- Post the Shelter-In-Place notification sign on the front of the building or Suite doors.
- Children, staff and any visitors are to remain inside the building\*.
- Turn off all ventilation systems such as heating or air conditioning.
- If there are gaps in windows or doors, seal with tape or damp towels.
- Have an AM radio for emergencies and tune to KCBS, 740 AM for more information.

\*No one (with the exception of First Responders) will be allowed to enter or exit the building until the Shelter-in-Place is lifted

### 3. Earthquake

You cannot tell from the initial shaking if an earthquake will suddenly become intense, so always Drop, Cover and Hold On immediately (Center staff must assist children first)!

- DROP to the ground (before the earthquake drops you!).
- COVER your head and neck with your arms and seek shelter by getting under a sturdy desk or table, if nearby.
- HOLD ON to your shelter and be prepared to move with it until the shaking stops.

i. **Indoors:** Drop Cover and Hold On. Avoid exterior walls, windows, hanging objects, mirrors, tall furniture, large appliances, and kitchen cabinets with heavy objects or glass. However, do not try to move more than 5-7 feet before getting on the ground. Do not go outside during shaking! The area near the exterior walls of a building is the most dangerous place to be. Windows, facades, and architectural details are often the first parts of the building to break away.

- If you are unable to Drop, Cover, and Hold on: If you have difficulty getting safely to the floor on your own, get as low as possible, protect your head and neck, and move away from windows or other items that can fall on you.
- In a wheelchair: Lock your wheels and remain seated until the shaking stops. Always protect your head and neck with your arms, a pillow, a book, or whatever is available.

ii. **Outdoors:** Move to a clear area if you can safely do so; avoid power lines, trees, signs, buildings, vehicles, and other hazards.

### 4. Fire

i. **If a fire occurs, GET OUT, STAY OUT, and CALL FOR HELP:**

- Remain calm.
- If you smell smoke, activate a fire alarm.
- Follow exit route and evacuation procedures for your center/office. Make sure to feel the door before opening it. If it is hot, do not open it, look for an alternate exit. If there is none, remain in the room and call for help. Close the door on your way out to help isolate the fire.
- Center staff must sweep the area and ensure all children are evacuated.
- Assist all children and those who are unable to exit the building on their own if it will not put yourself at additional risk.
- Do not use elevators.
- If the area you are in fills with smoke, drop to the floor and crawl to the nearest exit or smoke-free area.
- If your clothes catch on fire, immediately STOP, DROP, and ROLL.
- Once you are in a safe area, call for help

**i. You should only attempt to fight a fire if the following conditions exist:**

- If the fire is small and contained.
- You are safe from toxic smoke.
- You have a means of escape.
- Your instincts tell you it is safe.

**ii. You should flee a fire if:**

- If the fire is spreading rapidly or is a large fire.
- You are unsure of how to operate the extinguisher.
- The extinguisher runs out of agent.
- The fire could block your escape route.

## **5. Severe Weather**

**i. Heat Wave Safety Tip:**

Elderly persons, small children, chronic invalids, those on certain medications or drugs (especially tranquilizers and anticholinergics) and persons with weight and alcohol problems are particularly susceptible to heat reactions, especially during heat waves in areas where a moderate climate usually prevails. The following safety tips are recommended:

- Slow Down, strenuous activities should be reduced, eliminated, or rescheduled to the coolest time of the day.
- Individuals at risk should stay in the coolest available place, not necessarily indoors.
- Limit sun exposure between 10am and 4pm. Play in the shade, if at all possible. Keep babies under six (6) months of age out of direct sunlight.
- Dress for summer. Lightweight light colored clothing reflects heat and sunlight, and helps your body maintain normal temperatures.

- Drink plenty of water or other non-alcohol fluids. Your body needs water to keep cool. Drink plenty of fluids even if you don't feel thirsty. Persons who (1) have epilepsy, or heart, kidney, or liver disease, (2) are on fluid restrictive diets or (3) have a problem with fluid retention, should consult a physician before increasing their consumption of fluids.
- Spend more time in air-conditioned places. Air conditioning in a home and other buildings significantly reduces danger from the heat.
- Don't get too much sun. Sunburn makes the job of heat dissipation that much more difficult. Wear sunscreen and reapply per the manufacturer's directions.

**ii. Lightning Storms:**

- When thunder roars, go indoors!
- Stay away from windows and doors.
- Avoid water, high ground, trees, open spaces, metal objects and find shelter in a building.
- Avoid electronic equipment of all types; lightning can travel through electrical systems.
- Avoid corded phones, however, cordless or cellular phones are safe to use during a storm.
- Avoid concrete floors and walls.
- Wait at least 30 minutes after hearing the last clap of thunder before leaving your shelter.
- Call 9-11 if a person has been struck by lightning.

**iii. Flood:**

- Do not walk through moving water. Six inches of moving water can make you fall.
- Never try to walk, swim, drive or play in flood water. You may not be able to see how fast the flood water is moving, see holes or submerged debris.
- Beware of low spots, such as underpasses, underground parking garages, and basements as they can become death traps.
- Beware that flash flooding can occur. If there is any possibility of a flash flood, move immediately to higher ground. Do not wait for instructions to move.
- Beware of streams, drainage channels, canyons, and other areas known to suddenly flood

**6. Active Shooter:**

**i. Administration Office:**

- Be aware of your environment and any possible dangers.
- Take note of the two nearest exits in any facility you visit.
- If you are in an office, stay there and secure the door.
- If you are in a hallway, get into a room and secure the door.
- As a last resort, attempt to take the active shooter down.
- CALL 9+911 or 911 WHEN IT IS SAFE TO DO SO!
- Quickly determine the most reasonable way to protect your own life. Remember that customers and clients are likely to follow the lead of employees and managers during an active shooter situation.



- RUN/ESCAPE: If there is an accessible escape path, attempt to evacuate the premises.
- HIDE OUT: If evacuation is not possible, find a hiding place.
- TAKE ACTION/FIGHT: As a last resort, and only when your life is in imminent danger, attempt to disrupt and/or incapacitate the active shooter.

## ii. Childcare Centers:

Initiate a lockdown: The purpose of a lock down is to keep children and staff inside the building, by securing them inside a classroom or other secure safe are, due to an immediate threat in or around the center.

- Remain in the classroom, locking all entry doors if you have the ability to do so
- Tie down the door handle(s), if possible, using belts, purse straps, shoe laces, etc.
- Turn off all lights
- Cover the windows if possible
- Create a barricade at the main entry door with anything available (desks, chairs, rolling cabinets, etc.)
- Stay clear of any doorways and windows
- Try and keep as many barriers between you and any doors and windows
- Move children to the safest location in the room
- Drop and Cover (Lay as flat as you can, while covering your head)
- Silence or place your cell phones on vibrate
- No one is allowed to enter or exit any safe areas, until the “all clear” is issued by the Site Supervisor or law enforcement

## 7. Acts of Violence

If you witness an employee or customer threatening violence or becoming overly agitated because of a problem, alert a supervisor immediately. If the person becomes physically menacing, call 9+911/911 or signal for a coworker to make the call.

- Remain calm
- If someone threatens you with a weapon, remember that the person hasn't decided to use it yet. They are probably as scared as you are. Remain clam. You might look like the person that is in control. If you panic it might aggravate the situation.
- Be courteous and patient
- Listen attentively and follow the instructions of the person with the weapon.
- Plan an escape route
- Try to stay as far away from the person as possible. Pay close attention to your surroundings. Plan an escape route in case the situation becomes more serious.

## 8. Serious Injury & Illness at work

All serious injuries\* and illnesses incurred by a County employee or a contractor while on a County site or work assignment, must be reported to Cal/OSHA. (\*This includes illnesses that may not be work-related)

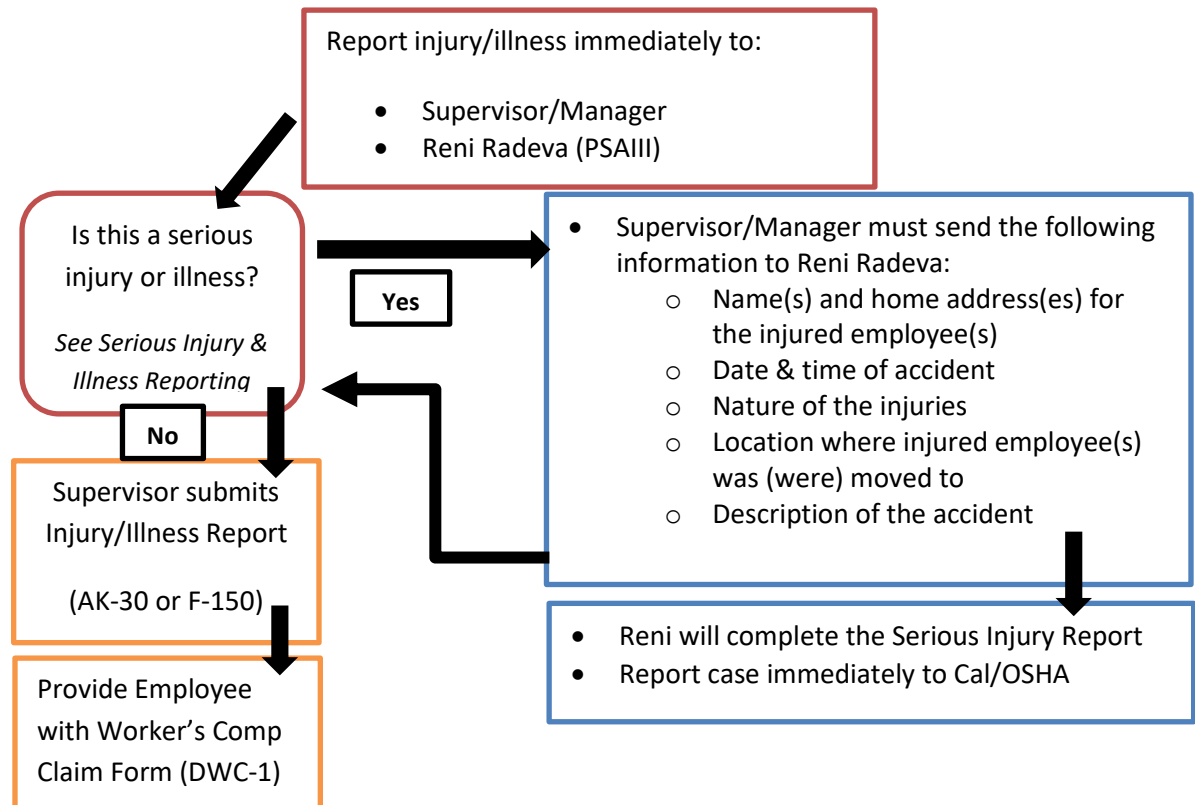
Follow the Injury and Illness Reporting Procedure below. Notify your Supervisor and Reni Radeva, PSA III. Immediately means as soon as practically possible, but no longer than eight (8) hours after the employer learns of the incident.

Serious Injury or Illness includes:

- Fatality, the loss of any member of the body, or any serious degree of physical disfigurement.
- Any injury or illness which requires inpatient hospitalization for a period in excess of twenty-four (24) hours for treatment other than medical observation.
- Any minor injury or illness which becomes a serious injury.

Note: If an employee goes to the hospital directly from work or an AMBULANCE responds to the site, closely monitor the situation and use the Serious Injury Decision Tree to see if a Cal/OSHA report is needed.

Injury and Illness Reporting Procedure



**9. Dental Emergency:**

i. In the event of an accident to the tongue, lips, cheek or teeth:

- Attempt to calm the child.

- All incidents should be handled quietly and calmly; a panicky child may cause further trauma.
- Check for bleeding. If the child is bleeding:
  - Stop bleeding by applying pressure to area;
  - Wash affected area with clean water;
  - Apply ice for swelling.

If tooth is knocked out, fractured, chipped, broken or loose:

- Staff should calm the child;
- If injured area is dirty, clean gently;
- Place cold compresses on the face in the injured area to limit swelling;
- Take the child to a dentist immediately for treatment.

If a tooth or teeth are loosened in an accident:

- Rinse out child's mouth;
- Do not attempt to move teeth or jaw;
- Take the child to the dentist immediately.

If tooth is knocked into gums (intruded):

- Do not attempt to free or pull on the tooth;
- Rinse out the child's mouth;
- Take the child to the dentist immediately.

If injury to tongue, cheek, or lips occurs:

- Rinse affected area;
- Apply ice to control swelling;
- Place cold compresses on the face in the injured area to limit swelling;
- Take the child to a dentist or physician if bleeding continues or wound is large.

ii. Miscellaneous: In the event of any other soft tissue injury, as in the case where the tongue or lips become stuck to an object and the tissue tears:

- Stop the bleeding;
- Cover the area with sterile petroleum jelly;
- Take the child to a dentist or physician.

## 10. Adult or Child Choking

### i. Mild Obstruction

- With a mild airway obstruction, the person is able to cough forcefully or even speak. Do not interfere. If the person can speak, he/she can breathe.
- Treatment:
  - Ask the person, "Are you choking?"
  - If the person can cough forcefully or speak, do not interfere.
  - Encourage coughing until the obstruction is relieved.
  - Monitor for progression to a severe obstruction.

**ii. Severe Obstruction**

- A person with a severe obstruction cannot breathe, cough effectively, or speak. He/she may make a high-pitched sound when inhaling or turn blue around the lips and face. Act quickly to remove the obstruction, or the person will soon become unresponsive and die.
- Ask the person, “Are you choking?”
- If he nods “yes” or is unable to speak, tell him you are going to help. Do not leave the person.
- Stand behind him and reach under his arms.
- Make a fist with one hand and place it just above the navel, thumb side in. Grasp the fist with your other hand.
- Perform quick, forceful inward and upward abdominal thrusts until the object is expelled or he becomes unresponsive.

**iii. Unresponsive Choking Person**

When a choking person becomes unresponsive, carefully lower the person to the ground. Use CPR to relieve the obstruction.

- Send a bystander to call 9-1-1.
- If alone with an adult victim, go call 9-1-1 yourself, then return to perform CPR.
- If alone with a child victim, call 9-1-1 after 2 minutes of CPR.
- Perform CPR with the added step of looking in the mouth after each set of compressions. If you see the obstruction, remove it and continue CPR.
- Continue CPR until the person begins to breathe normally.

**Chest Thrusts:**

- Chest Thrusts – Large or Pregnant Person
- If a rescuer cannot reach around the waist of a large person, or the victim is obviously pregnant, use chest thrusts to relieve the obstruction.
- Place one fist in the middle of the chest on the lower half of the breastbone, with your thumb against the chest.
- Grasp the fist with your other hand.
- Pull straight back on the chest quickly and forcefully.
- Continue until the object is expelled or the victim becomes unresponsive.

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## I. GENERAL

- A. Purpose: Disputes can and do arise between various parties in relation to any and all of EHSD's programs. The EHSD Ombudsman is a role created to provide customers with a place to seek solutions or an independent explanation of an issue that the customer cannot satisfactorily resolve. There are two procedures for Ombudsman: one for referrals related to Medi-Cal, CalFresh, CalWORKs, Welfare-to-Work, General Assistance, In-Home Supportive Services (IHSS); Adult Protective Services (APS) and Community Services Bureau; and one for Children & Family Services (CFS).

The Ombudsman is not an advocate of the customer nor is s/he an advocate of the department. The Ombudsman's role is to collect and evaluate all of the facts regarding a matter as a neutral investigator. The Ombudsman provides a direct and informal avenue for the mediation of grievances which, in turn, can enhance the relationship between EHSD and the customers/providers/partners/community served, ultimately improving service delivery overall. It is the goal of the Ombudsman to bring about resolution of each situation brought to his/her attention.

The Ombudsman process is informal and is not intended to take the place of a state hearing relating to any childcare or benefits programs.

### **Customer/EHSD Issues:**

The Ombudsman will work with all parties to determine if there was an error or misunderstanding by the Program or the customer, or if there is found to be no basis to the complaint. EHSD confidentiality policies will be maintained at all times.

When the Ombudsman receives complaints from EHSD customers/clients/community partners/the public et al, s/he is not an advocate of the complainant or of EHSD. The Ombudsman's role is to collect and evaluate all of the facts regarding a matter as a neutral investigator. The Ombudsman determines if there is an error, unfairness or harm by the program involved, or insufficient or lack of basis for the complaint. The Ombudsman can make recommendations to correct wrongdoing as a means of improving the service delivery of the program/agency.

The Ombudsman will give complainants a place to seek solutions, independent explanations, investigations and recommendations. The process of arriving at resolution of the issue being investigated may involve talking with a worker and/or a supervisor; however, there is no focus in the process of placing blame on either the customer or the employee. The Ombudsman comes from a place of neutrality, with the end point being resolution of an

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issue, with a “win-win” for the customer and the department.

The main purpose of the Ombudsman is to resolve identified issues and promote and maintain good working relationships between all involved parties. Part of this role is to help customers understand the process and their rights and responsibilities. As systemic issues are identified, the Ombudsman will make formal recommendations to the Director of EHSD.

**II. EHSD REFERRALS: Medi-Cal, CalFresh, CalWORKs, Welfare-to-Work, General Assistance, In-Home Supportive Services (IHSS); Adult Protective Services (APS) and Community Services Bureau.**

**A. Customer Referrals.** The following types of customer referrals are appropriate for the Ombudsman:

1. Customers who are having issues with their benefits, such as eligibility issues, benefits were discontinued, overpayment issues, transfer of case to/from another county, receipt of renewal documents in question.
2. Customers who are dissatisfied with an outcome involving his/her case; for example, a reduction in IHSS hours or CalFresh benefit amount.
3. Customer wants to file an appeal but does not know how to go about it. (Note: contacting the Ombudsman does not impact the time to file an appeal through the state process.)
4. Customers who are upset about system issues such as long wait lines, long phone wait times, information submitted but not in the system.
5. Customers who want to make a complaint. Customer may be upset about his/her case, or agitated and being disruptive with staff or causing a scene in the lobby and in need of “supportive listening.”
6. Authorized representatives (AR) of customers call on customer’s behalf with questions about benefits, renewals, overpayment issues.
7. A customer who is difficult to deal with (verbal harassment of worker) may be in need of an intermediary, and Ombudsman can play this role.

**B. Sources of Referrals.** Referrals to the Ombudsman may come from the following sources:

1. EHSD Director and Bureau Directors
2. Direct referrals from Board of Supervisors, legislative offices
3. EHSD Website
4. Workforce Services, Aging & Adult Services and other bureau Managers
5. Ombudsman posters are displayed at each EHSD site

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6. Ombudsman fliers are available to pick up at information kiosk at each site
7. Reception at each site will provide Ombudsman fliers to customers
8. Contra Costa Health Plan (CCHP) Liaison
9. Direct call from EHSD customers

### C. Procedure

1. A referral to the Ombudsman can be made via a telephone call to (925) 788-1722 or an e-mail to [advocacyandresolution@gmail.com](mailto:advocacyandresolution@gmail.com).
2. The Ombudsman will send a telephone or e-mail confirmation to the referent within 24 hours of receipt of referral. The confirmation will inform the referent of the grievance or appeals process.
3. Ombudsman will contact the EHSD customer within 24 hours of receipt of referral. (Note: The Ombudsman uses [advocacyandresolution@gmail.com](mailto:advocacyandresolution@gmail.com) only to communicate with customers and uses EHSD e-mail to communicate with staff).
4. Ombudsman will work with all parties involved to assure best possible outcome. Ombudsman will consult with EHSD bureau management and staff to resolve issues of concern and complaints, and to ensure the proposed resolution is within legal and regulatory requirements.
5. Once issue identified has been resolved, Ombudsman will contact the referent via e-mail or phone to let referent know issue has been resolved.
6. A completed Ombudsman Intake Form that outlines the activities involved in the resolution of each referral as well as final resolution is submitted to the Department Director and Bureau Director.
7. Resolution forms are logged. An annual data report is prepared by administrative staff in the Executive Office and provided to the EHSD Director.

### III. EHSD REFERRALS: Children & Family Services (CFS)

**A. Client Referrals.** The following types of client referrals are appropriate for the Ombudsman:

1. Clients or providers who are dissatisfied with an outcome involving a case; for example, removal of a child or placement of a child
2. Client or provider wants to file an appeal but doesn't know how to go about it. (Note: contacting the Ombudsman does not impact the time to file an appeal through the state process.)
3. Clients or providers who are upset about system issues (such as a limitation on visitation or contact).
4. Clients or providers who want to make a complaint. Client may be upset about his/her

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- case, or agitated and being disruptive with staff or causing a scene in the lobby and in need of “supportive listening.”
5. Authorized representatives (AR) of clients call on clients’ behalf with questions about departmental decisions.
  6. A client who is difficult to deal with (verbal harassment of worker) may be in need of an intermediary, and Ombudsman can play this role.

**B. Sources of Referrals.** Referrals to the Ombudsman may come from the following sources:

1. EHSD Director and Bureau Directors
2. Direct referrals from Board of Supervisors, legislative offices
3. EHSD Website
4. Children & Family Services and other bureau Managers
5. Ombudsman posters are displayed at each EHSD site
6. Ombudsman fliers are available to pick up at information kiosk at each site
7. Reception at each site will provide Ombudsman fliers to clients
8. Direct call from EHSD clients or providers

**C. Procedure**

1. A referral to the Ombudsman can be made via a telephone call to (925) 334-0698 or an e-mail to [cfsombudsman@ehsd.cccounty.us](mailto:cfsombudsman@ehsd.cccounty.us).
2. The Ombudsman will send a telephone or e-mail confirmation to the referent within 24 hours of receipt of referral. The confirmation will inform the referent of the grievance or appeals process.
3. Ombudsman will contact the EHSD client within 24 hours of receipt of referral. (Note: The Ombudsman uses [cfsombudsman@ehsd.cccounty.us](mailto:cfsombudsman@ehsd.cccounty.us) only to communicate with clients and uses EHSD e-mail to communicate with staff).
4. Ombudsman will work with all parties involved to assure best possible outcome. This may include meeting at EHSD offices and designated/approved community locations, as necessary to provide information, make referrals and conduct complaint intakes. Ombudsman will not engage in case management with staff or clients.
5. Ombudsman will consult with EHSD CFS bureau management and staff to resolve issues of concern and complaints, and to ensure the proposed resolution is within legal and regulatory requirements.
6. Once issue identified has been resolved, Ombudsman will contact the referent via e-mail or phone to let referent know issue has been resolved. [Note: Due to their nature and Court oversight, some resolutions may not be the outcome desired by the complainant.] A completed Ombudsman Intake Form that outlines the activities involved in the resolution of each referral as well as final resolution is submitted to the Department Director and Bureau Director from which the referral came.

DMCL # 19-68

REPLACES:

SECTION:  
PAGE NO.: 6  
ISSUED/REVISED:

EHSD OMBUDSMAN  
POLICY

SECTION: 23-150  
PAGE NO.: 6  
EFFECTIVE: 09-30-2019

7. Resolution forms are logged in by the CFS Admin Secretary. An annual data report is prepared by administrative staff in the Executive Office and provided to the EHSD Director.

DMCL # 19-68

**BOARD OF SUPERVISORS OF CONTRA COSTA COUNTY, CALIFORNIA**

Adopted this Order on July 13, 2023 by the following vote:

AYES:

NOES:

ABSENT:

ABSTAIN:

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**RESOLUTION NO. 2023/499**

**RESOLUTION OF THE BOARD OF SUPERVISORS ESTABLISHING THE INTERNAL CONTROLS THAT APPLY TO CONTRA COSTA COUNTY HEAD STRART PROGRAM FUNDS, ASSETS, AND EQUIPMENT**

The Contra Costa County Board of Supervisors resolves as follows:

**I. GENERAL**

This policy of the Board of Supervisors establishes and describes the internal controls that apply to Contra Costa County Head Start program funds, assets, and equipment. These internal controls conform to the internal control guidelines applicable to local agencies as established by the Controller of the State of California in accordance with California Government Code section 12422.5, and are in compliance with the Head Start Act's Post Federal Award Requirements regarding internal controls, as set forth in 45 Code of Federal Regulations (CFR) section 75.303 (Internal Controls). These policies and procedures also document how Contra Costa County complies with the Committee on Sponsoring Organizations (COSO) framework.

**II. INTERNAL CONTROLS THAT APPLY TO CONTRA COSTA COUNTY HEAD START PROGRAM FUNDS, ASSETS, AND EQUIPMENT**

A. The Contra Costa County Head Start program (Program) will maintain fiscal integrity through implementation of internal controls. This involves a financial system that ensures budget management, maintains control over current operations, and provides a complete and accurate record of fiscal management. The Program is governed by the Contra Costa County Board of Supervisors and operates within the financial information system of the County of Contra Costa. The Program operates under the County of Contra Costa's fiscal accountability rules, policies, and procedures, including the following:

1. Contra Costa County Administrative Bulletin 200.8 – Capital Asset Accounting and Budgeting Policy (Attachment A).

2. Contra Costa County Administrative Bulletin 205.1 – Cash-Receiving, Safeguarding and Depositing (Attachment B).
3. Contra Costa County Administrative Bulletin 212.1 – Internal Audit of County Departments and Offices (Attachment C).
4. Contra Costa County Administrative Bulletin 215.1 – Petty Cash Funds (Attachment D).
5. Contra Costa County Administrative Bulletin 600.3 – Purchasing Policies and Procedures (Attachment E). In accordance with 45 CFR 75.327, these procurement procedures reflect applicable State and local laws and regulations, conform to applicable Federal law and the standards identified in 45 CFR Part 75, require the County to maintain oversight to ensure that contractors perform in accordance with the terms, conditions, and specifications of their contracts or purchase orders, and include written standards of conduct covering conflicts of interest and governing the actions of its employees engaged in the selection, award and administration of contracts. Specifically, ethical standards mandated for County procurement activities include the following:
  - Avoiding activities which would compromise or give the perception of compromising the best interests of the County;
  - Actively promoting the concept of competition through bid solicitation consistent with this policy; and
  - Refraining from engagement in any procurement activity in which an employee may have a personal or indirect financial interest in accordance with Government Code sections 87100 and 81703.

In addition, the following procurement standards apply to the Program pursuant to 45 CFR 75.327:

- a) No employee, officer, or agent may participate in the selection, award, or administration of a contract supported by a Federal award if he or she has a real or apparent conflict of interest. Such a conflict of interest would arise when the employee, officer, or agent, any member of his or her immediate family, his or her partner, or an organization which employs or is about to employ any of the parties indicated herein, has a financial or other interest in or a tangible personal benefit from a firm considered for a contract. The officers, employees, and agents of the County may neither solicit nor accept gratuities, favors, or anything of monetary value from contractors or parties to subcontracts. Appropriate disciplinary actions will be applied for violations of such standards by officers, employees, or agents of the County.

- b) The County will avoid acquisition of unnecessary or duplicative items. Consideration will be given to consolidating or breaking out procurements to obtain a more economical purchase. Where appropriate, an analysis will be made of lease versus purchase alternatives, and any other appropriate analysis to determine the most economical approach.
- c) To foster greater economy and efficiency, and in accordance with efforts to promote cost-effective use of shared services across the Federal Government, the County is encouraged to enter into state and local intergovernmental agreements or inter-entity agreements where appropriate for procurement or use of common or shared goods and services.
- d) The County is encouraged to use Federal excess and surplus property in lieu of purchasing new equipment and property whenever such use is feasible and reduces project costs.
- e) The County is encouraged to use value engineering clauses in contracts for construction projects of sufficient size to offer reasonable opportunities for cost reductions. Value engineering is a systematic and creative analysis of each contract item or task to ensure that its essential function is provided at the overall lower cost.
- f) The County will award contracts only to responsible contractors possessing the ability to perform successfully under the terms and conditions of a proposed procurement. Consideration will be given to such matters as contractor integrity, compliance with public policy, record of past performance, and financial and technical resources. See also 45 CFR 75.213.
- g) The County will maintain records sufficient to detail the history of procurement. These records will include, but are not necessarily limited to, the following: rationale for the method of procurement, selection of contract type, contractor selection or rejection, and the basis for the contract price.
- h) The following provision will be included in all contracts entered into by the County on behalf of the Program: “Contractor shall establish safeguards to prohibit employees or officers from using their positions for a purpose which could result in private gain, or gives the appearance of being motivated for private gain for themselves or others, particularly those with whom they have family, business or other ties. Contractor shall maintain a code or standard of conduct that governs the performance of its officers,

employees or agents in the award and administration of contracts, and provides for appropriate disciplinary actions for noncompliance. The standards shall include, but not be limited to, prohibition against soliciting or accepting gratuities, favors or anything of monetary value from subcontractors or potential subcontractors. Per 45 CFR 75.113, Contractor shall disclose, in a timely manner, in writing to County all violations of Federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the Contract. Contractor may be required to report certain civil, criminal, or administrative proceedings to the System for Award Management SAM. Failure to make required disclosures can result in any of the remedies described in 45 CFR 75.371, including suspension or debarment.”

6. [California State Controller’s Office 2023 Edition – Accounting Standards and Procedures for Counties.](#)
7. [California State Controller’s Office - 2015 Internal Control Guidelines for California Local Agencies.](#)

B. The Program also operates under the following policies:

1. Contra Costa County, EHSD, Community Services Bureau – Fixed Assets, Information Technology, Low-Value Inventory and Clouds Data System Policies and Procedures (Attachment F), and the Equipment Inventory form attached thereto (see [45 CFR section 75.320\(d\)\(1\)](#)).
2. Contra Costa County, EHSD, Departmental Fiscal Policy – Fiscal Monitoring of Subrecipient (Attachment G) (see [45 CFR 75.303\(c\)](#)).
3. Contra Costa County, EHSD, Community Services Bureau – Cost Allocation Plan (Attachment H).

C. Monitoring. In addition to the monitoring provisions contained in the above policies, the Program will be monitored as follows:

1. Monthly Reports to Governing Board. The Head Start Executive Director and the Head Start Director will present a fiscal report to the Board as part of the monthly report required by Section III.A.2 of the Contra Costa County Head Start Program Formal Governance Policy adopted by the Board of Supervisors. At a minimum, the fiscal report will contain the following:
  - Summaries of Program financial statements, including total expenditures and revenue received to date;
  - Results of Sub-Recipient monitoring activities, including information related corrective actions plans entered into with delegate agencies, if any; and

- Results of self-monitoring activities, including information related to corrective action plans implemented within the County’s Head Start program, if any.
2. Bi-Monthly Reports to the Head Start Oversight Committee. The Head Start Executive Director and the Head Start Director will present a fiscal report to the Head Start Oversight Committee on a bi-monthly (every other month) basis. At a minimum, the fiscal report will contain the following:
- Detailed Program financial statements, including expenditure information by recipient and sub-recipient at the object level (i.e., Salaries & Benefits, Services and Supplies, Other Charges, Fixed Assets, and Expenditure Transfers) and revenue by major federal and state grant type;
  - Details about Sub-Recipient monitoring activities, including schedules for planned monitoring activities, updates of ongoing monitoring activities, final results of monitoring activities and status of monitoring of corrective action plans entered into with sub-recipients; and
  - Details about self-monitoring activities, including schedules for planned monitoring activities, updates of ongoing monitoring activities, final results of monitoring activities and status of internal monitoring of corrective action plans.
3. Self-monitoring. The self-monitoring required by 45 CFR 75.303(c) is set forth in Appendix 15 of Contra Costa County, EHSD, Departmental Fiscal Policy – Fiscal Monitoring of Subrecipient. Initial self-monitoring (in 2023) will take place quarterly, and will take place semi-annually thereafter. Compliance assessments will be conducted to ensure:
- Compliance with statutory requirements.
  - Review of internal checks/controls.
  - Review of financial documents.
  - Review of business practices, processes and policies.
- D. Training. In addition to the training provisions contained in the above policies, the Head Start Executive Director and the Head Start Director will cause to be provided fiscal training on a regular basis to employees on the above policies and ensure the following:
1. Agendas. Training agendas will explicitly identify each of the fiscal policies applicable to the County Head Start Program.

2. **Materials.** Copies of the policies and internal procedures to ensure compliance with the policies will be distributed in the training materials.
3. **Attendance.** Employee training attendance records will be maintained in a dedicated training file.
4. **Head Start Committee Oversight.** At the next regular meeting of the Head Start Standing Committee following a training event, the Head Start Executive Director and the Head Start Director will provide an update on training to the Committee, including:
  - All of the materials in Section II(D)(1-2) above will be included as attachments to the staff report; and
  - A listing of how many employees have not yet received training with a plan for when those employees are to receive training.
5. **Governing Board Oversight.** In the next regular, monthly Head Start Program report to the Board of Supervisors following a training event, the Head Start Executive Director and the Head Start Director will provide an update on training to the Board, including:
  - Date of the most recent fiscal training provided;
  - Summary of the fiscal training agenda;
  - Number of employees receiving fiscal training
  - Number of employees who still need fiscal training; and
  - Date of next fiscal training event.



## **ATTACHMENTS**

**CONTRA COSTA COUNTY**  
**Office of the County Administrator**

**ADMINISTRATIVE BULLETIN**

Number: 200.8

Date: 5-27-10

Section: Budget & Fiscal

**SUBJECT: Capital Asset Accounting and Budgeting Policy**

The County policy for capital asset accounting and budgeting must conform to State definitions and regulations as set forth in the manual of Accounting Procedures for Counties and reflect current values. This policy establishes the basis for financial classification and does not affect the program of physical inventory control and accountability.

Capital assets are assets of significant value having a utility that extends beyond the current year. An improvement is a replacement of a component part of a capital asset by an improved or superior part, an addition of new parts, or an alteration or a structural change to a capital asset that results in a functional improvement over its original state that materially adds to the value of the asset or appreciably extends its life.

Land improvements enhance the value of the land itself (such as grading, filling, and sloping or ditching for drainage) and are charged to the land account. Ground improvements add other items to the basic land and are charged to the Buildings and Improvements fixed asset category. Examples of grounds improvements are lawns, trees and shrubs, sprinkler systems, fences and walls, and paving.

The following capital assets are to be capitalized and individually budgeted and controlled:

- I Land. All land acquisitions and land improvements, without regard to cost.
- II Structures and Improvements.
  - a Permanent structures costing \$100,000 or more.
  - b Additions, structural betterments and ground improvements that cost \$100,000 or more.
- III Equipment.
  - a Equipment includes movable personal property with a unit cost of \$5,000 or more, including sales tax, and delivery and installation charges.
  - b Additions to capitalized equipment costing \$5,000 or more per item.

IV Infrastructure.

- a Infrastructure assets are long-lived assets that normally are stationary in nature and can be preserved for a significantly greater number of years than other capital assets.
- b Infrastructure assets include roads, bridges, tunnels, drainage systems, water and sewer systems, dams, and lighting systems.

V Intangibles.

- a Intangible assets lack physical substance, have a non-financial nature, and have a useful life that extends beyond a single reporting period.
- b Examples of intangible assets include: easements, water rights, timber rights, patents, trademarks, computer software, including internally generated software.
- c Capitalization thresholds for intangible assets are as follows:
  - \$100,000 for all intangibles assets acquired after June 30, 2009 - excluding internally developed or modified software and other internally developed intangibles.
  - \$1,000,000 for all internally developed intangible assets acquired after June 30, 2009.
  - \$1,000,000 for retroactive reported intangible assets.

Orig. Dept.: County Administrator, Auditor-Controller  
Reference: Resolution No. 84/620



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David J. Twa  
County Administrator

CONTRA COSTA COUNTY  
Office of the County Administrator

## ADMINISTRATIVE BULLETIN

Number: 205.1  
Date: February 20, 2008  
Section: Budget & Fiscal

SUBJECT: CASH – RECEIVING, SAFEGUARDING AND DEPOSITING

This bulletin establishes uniform procedures and standards for receiving, safeguarding and depositing cash.

- I. **APPLICABILITY.** This bulletin applies to all employees (including contractors, temporary, agents or others) receiving or processing cash; their supervisors and their managers.
- II. **DELEGATION OF AUTHORITY.** All department heads, including elected officials, are responsible for implementation of this bulletin. Any deviation requires prior approval, in writing, from the County Auditor-Controller.
- III. **DEFINITION – CASH.** Cash includes coins, currency, checks, postal and express cash orders, traveler checks, bankers drafts, wire transfers, debit and credit cards and any other payment device.
- IV. **GENERAL REQUIREMENTS.** Every employee receiving cash is accountable for all cash that he or she receives and such cash must be kept intact, secure, and separate from other cash in the office. Receipts shall be prepared for all accepted cash using one of the receipt forms approved by the County Auditor-Controller. All customers must receive a receipt for their payment unless the payment is received by mail and a receipt was not requested.

All cash received shall be delivered in a timely manner to the County Treasurer or deposited to a bank account maintained by the County Treasurer with a corresponding County deposit permit to the Treasury.

**No County cash is to be maintained in an account in any financial institution, bank, credit union or other depository without the knowledge and written permission of the Auditor-Controller.**

**[Internal Control Checklist for Cash](#) details best practices on receiving, safeguarding and depositing cash. Employees should periodically compare their own practices to those detailed in the Checklist. Management must also complete and submit the Checklist to the Auditor-Controller no later than June 1<sup>st</sup> of every year.**

- V. RECEIVING CASH.** Cash may be received over the counter in the office or through the mail.
- A. Over the Counter Payments**
1. Approved receipts must be issued for all payments.
  2. Restrictive Endorsement – All negotiable instruments (non-cash form of payment such as checks) must be restrictively endorsed immediately upon acceptance using a stamp, which restricts payment for deposit only to the County Treasury.
  3. Payments must be deposited intact. Customers' checks should be written for the correct amount (no "cash back"). Employees may not cash personal checks or exchange personal funds from the cash drawer.
  4. Second party checks are not to be accepted.
  5. No post-dated checks are to be accepted without a supervisor's approval.
- B. Through the Mail Payments**
1. Restrictive Endorsement – All negotiable instruments (non-cash form of payment such as checks) must be restrictively endorsed immediately upon receipt using a stamp, which restricts payment for deposit only to the County Treasury.
  2. Second party checks are not to be accepted.
  3. All checks received through the mail shall be recorded by the Mail Clerks (team of two Clerks recommended) on a [Mail List/Transfer Record](#) showing all relevant information, including the date, name of payer, amount, client account to be credited, and the general ledger account to be credited (if known). Photocopies of the checks received through the mail may be made in place of separately listing each check. Mail Clerks must retain a copy of the Mail List, including check photocopies, if the original is transferred to another person for preparation of receipts.
  4. Issuing Receipts - The person preparing receipts shall mail the original receipt to the payer, if a receipt has been requested. The receipt number(s), receipt date(s) and Deposit Permit (DP) number(s) shall be recorded on the *original* Mail List. A copy of the completed Mail List shall be kept on file.
  5. Transfer Record – If the Mail Clerk does not prepare receipts, each person handling cash must sign the *original* of the [Mail List/Transfer Record](#) until it reaches the person designated to issue receipts. After issuing receipts, that person shall make a copy to file and return the original Mail List to the Mail Clerk. Note that *each time* the original Mail List changes hands, the Transfer Record must be signed.
  6. The mail clerk will retain the original Mail List at the work location until the next Internal Audit Division audit.

7. A department may establish an alternate procedure for cash received by mail if approved in writing by the Auditor-Controller.

**C. Recordkeeping.**

1. One copy of the receipt shall be retained in the receipt book. Any receipts not used (original or accounting copy) also shall be retained in the receipt book.
2. Daily, every cashier shall count cash collected and document the reconciliation of the count to the receipt records to identify any overage or shortage. An employee not performing the receipting function shall review reconciliations.
3. Cash collections shall be summarized daily on a cash receipt journal showing receipt numbers issued, date receipted, amount receipted, and revenue or other accounts to be credited. When the receipts are deposited, the cash receipt journal shall show the deposit date and Deposit Permit number.
4. Records Retention – Records substantiating cash receipts must be retained at least until audited by the Internal Audit Division of the Office of the Auditor-Controller.

Dependent upon the underlying type of transaction for the cash receipt, there may be additional retention requirements.

**D. Receipt Forms.** Generally, receipts are issued on the County's General Receipts "F" (Form D-58) or "G" (Form D-57). However, cash register receipts, computer-generated receipts, or other receipts may be used if pre-approved in writing by the Auditor-Controller (stationary store receipts are not authorized). Alternate forms will be considered for approval only if they meet the following criteria:

1. Receipts are sequentially press or machine numbered.
2. Each receipt copy contains at least the following information:
  - a) Date of receipt.
  - b) Name of the person or institution from which the cash was received, a reference to the specific county case, and account to which the payment is applied. If no specific reference is applicable, then a reference to a class of payment type is permissible (e.g. sale of forms, copy charges, etc.).
  - c) Amount of payment.
  - d) Form of payment (cash, check, cash order, credit card, wire transfer, etc.).
  - e) Name or identification code of the person receiving the cash.

3. The issuing department must retain at least one duplicate copy of each receipt. In lieu of a receipt, a report may be retained that is (or can be) generated by the approved cash register or computer system that lists all the above information.
4. Any voids must be authorized by a second person (preferably a manager).

#### **E. Voided Receipts**

1. The following information shall be recorded either in a voided receipt register or on the voided receipt:
  - i. Reason for the void
  - ii. Replacement receipt number (if applicable)
  - iii. Supervisor's signature
2. All copies of voided receipts shall be marked "voided" and retained in or with the book and accounting copies. If the receipt is voided after the payee has left with the original receipt, the original replacement receipt shall be retained in or with the book and accounting copies of the voided receipt.
3. Accountability must be established for all used and unused receipts.

#### **VI. SAFEGUARDING CASH.** All departments are responsible for providing sufficient safeguards to prevent the loss of cash collected by the department as well as customers' financial information.

- A. Each department is responsible for safeguarding sensitive information, such as checking account numbers that may provide access to a customer's financial assets. Any officer or employee, who in the course of his or her employment of duties has or has had access to credit card or payment device information, shall not use, disclose or make known, in any manner, information provided by customers for any unauthorized purpose.
- B. Cash maintained at department offices must be kept in a locked and secure location with access limited to authorized personnel only. If there is more than one fund, the funds shall be secured in separate bags or lock-boxes. Cash funds shall never be combined and monies from one fund shall not be loaned to or used by another fund.
- C. Management shall periodically conduct unannounced cash counts of revolving funds (petty cash fund, change fund, cash difference fund) to verify the amount of cash on hand and to ensure that the funds are being used for authorized purposes. Also, management shall periodically verify the validated Deposit Permit or bank deposit slip to the day's receipts.
- D. For proper separation of duties, the person having physical custody and control of the cash shall not be authorized to approve expenditures.
- E. [Transfer of Accountability Record](#) – When *any* cash is transferred from one custodian to another custodian prior to deposit of the cash, the Transfer of Accountability Record must be completed.

**VII. DEPOSITING CASH.** Departments receiving cash shall deposit it in the County Treasury in the manner described below, unless the department has made a special arrangement with the County Treasurer for depositing the cash in a bank account of the County Treasurer.

- A. Deposit Requirements - If practical, daily depositing is preferred. If deposits are not made daily, they shall be made when coin and currency exceed \$250 or the total collections exceed \$500. Deposits shall be made at least once a month. All payments received shall be deposited in their entirety. Partial deposits shall not be made. Any deviation from this practice must be approved by the Auditor-Controller in writing.
- B. Deposit Procedures -
1. Prepare a Deposit Permit Form D-34
  2. Present the Deposit Permit to the counter clerk in the General Accounting Division of the Auditor-Controller who will assign a deposit permit number. The Deposit Permit, together with authenticated bank deposit slips, may be mailed. Do not send cash through the mail. Employees may not trade personal checks for cash. The General Accounting Division of the Auditor-Controller will retain a copy of the Deposit Permit.
  3. Take the copies of the Deposit Permit and the collections to the Office of the County Treasurer for deposit.
  4. The department keeps a copy of the Deposit Permit after endorsement by the Auditor-Controller and the Treasurer. The copy is to be retained in the department files. The Treasurer retains the original and a copy of the Deposit Permit. After processing, the original is filed with the Auditor-Controller.
- C. For departments with County Treasurer-approved deposit arrangements.
1. Deposits made to a bank account of the County Treasurer shall be prepared with a triplicate bank deposit ticket.
  2. Copies of the bank-validated deposit ticket shall be distributed as follows:
    - original to bank
    - duplicate or second copy retained in office's files
    - triplicate copy attached to Deposit Permit which is sent to the Office of the County Auditor-Controller.Note: Deposit Permit numbers are available from the General Accounting Division of the Auditor-Controller Office.
  3. The Treasurer will notify the department of any returned checks. It is the responsibility of the department to follow-up and collect on returned bank checks.



**VIII. CREDIT CARD PAYMENTS.** Accepting payments by credit card increases the number of payment options and gives the customer greater flexibility. However, the Department incurs additional expenses with credit card collections. Departments accepting credit card payment must also conform to the Payment Card Industry (PCI) Data Security standards for merchants.

- A. Deposit Permits must be submitted to the Treasury for all credit card deposits.
  - 1. A "Host Totals" tape should be submitted to the Treasury with the Deposit Permit. The detail for individual transactions should be kept within the department to resolve any problems that may occur with individual transactions.
  - 2. Credit card fees cannot be netted against the revenue.
- B. The full cost of the credit card program is the responsibility of the accepting department. The costs include:
  - 1. Start-up costs, including equipment, paper, and telephone lines.
  - 2. Monthly fees.
  - 3. Charges for invalid credit card transactions. This includes the principal credit card amount charged as well as any fees and penalties charged by the bank.
- C. Payments for credit card program costs must be sent to the Treasury monthly in a warrant or journal. Program costs should not exceed the value of credit card payment deposits.

**IX WIRE TRANSFERS.** All wire transfers of funds into County bank accounts should have a corresponding Deposit Permit submitted to the Treasury within 24 hours.

**X. MANAGEMENT ACCOUNTABILITY.** [The Internal Control Checklist](#) is an internal control review to ensure accountability for cash in County departments. County employees with oversight responsibility for cash in a department shall complete the checklists no later than June 1<sup>st</sup> of every year. A current copy must be maintained on file by the Department until the next audit. When completed a copy shall be sent to the Chief Auditor, Internal Audit Division, Auditor-Controller's Office.

**XI. REFERENCES**

Payment Card Industry (PCI) Data Security Standards  
County e-Commerce Requirements

**Originating Department:** Office of the Auditor-Controller

**Contact:** Chief Auditor 925-646-2233

/s/ \_\_\_\_\_  
JOHN CULLEN,  
County Administrator

CONTRA COSTA COUNTY  
Office of the County Administrator

ADMINISTRATIVE BULLETIN

Number: 212.1

Date: 10-24-75

Section: Budget & Fiscal

SUBJECT: Internal Audit of County Departments and Offices

Various California state codes require or authorize the County Auditor-Controller to perform audits of the accounts and records of specific County departments, offices and operations. In addition, under the provisions of Section 26883 of the Government Code, the County Auditor-Controller is an agent of the Board of Supervisors in fulfilling its statutory responsibilities for audits of County operations. The internal auditing function is performed by a staff of professional auditors employed in the Internal Auditing Division of the Office of the County Auditor-Controller.

PURPOSE

The objective of the County internal auditing function is to assist County management in the proper and effective discharge of its responsibilities by reviewing and evaluating financial records and procedures and by providing reports to management containing objective analyses, appraisals, comments and recommendations concerning the activities reviewed.

The Internal Auditing Division has authority to review and appraise such policies, plans, procedures and records as are necessary to carry out its objective. This authority gives the Internal Auditor full access to all pertinent County records, property, and personnel except as limited by policy of the Board of Supervisors and statutory requirements. As a staff function Internal Auditors have no direct supervisory authority over those persons whose work they review, nor does their review in any way relieve those persons of the responsibilities assigned to them.

SCOPE

All County operations and activities are subject to internal audit unless specifically exempted by statute or County policy. Examinations are primarily financial in nature; however, the Internal Auditor is concerned with all phases of County operations wherein he can be of service to County management. Among the activities of the Internal Auditing Division are the following:

1. Reviewing and appraising the soundness, adequacy and application of accounting, financial and operating controls.

2. Examining accounting and related records maintained to account for County revenues, expenditures, assets and liabilities, and evaluating the reliability and adequacy of those records.
3. Determining the extent of compliance with statutory requirements and with established policies and procedures (particularly those relating to financial matters).
4. Ascertaining the extent to which County assets are accounted for and the extent to which they are protected from losses of all kinds.
5. Appraising the effectiveness of accounting and related procedures and making recommendations for improvements.
6. Preparing audited financial statements for special County operations. Special studies and financial analyses are also performed from time to time.

## PROCEDURES

Audits of most County departments are made on an annual basis at about the same time each year. In certain circumstances, however, audits may be performed more or less frequently than once a year. Department officials are normally contacted by the Internal Auditing Division in advance of the commencement of the audit to arrange a mutually convenient time schedule and to discuss problem areas and changes in department operations. In special circumstances audits are sometimes made without advance notice. Requests from departments for special reviews and analyses are scheduled according to the urgency of their nature and the availability of staff.

Upon completion of the audit a discussion draft of the report is reviewed with the department. This is to assure agreement on factual matters and give the department an opportunity for early corrective action when required. The final written report is directed to the responsible official with information copies to others who are affected.

It is the responsibility of the official to whom the report is directed to send a written reply to the County Auditor-Controller within 30 days of the receipt of the report. When audit comments or recommendations indicate that some specific action should be taken, the reply must state what action has been or will be taken, or the reason such action should not be taken.

Upon receipt of the reply, the County Auditor-Controller will transmit an information copy of both the report and the reply to the County Administrator for his review and desired action.

If no response is received within the 30-day time limit, the information copy of the report alone will be sent to the County Administrator with the notation that there has been no reply from the responsible official. Subsequent replies will be sent to the

County Administrator separately, upon receipt.

### CONCLUSION

Internal auditing is essential for proper management and control purposes. All personnel should assist when contacted by the internal audit staff in the performance of their studies and analyses.

Orig. Dept.: County Auditor-Controller

Reference: California Government Code Section 26883

/s/ Arthur G. Will

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County Administrator

CONTRA COSTA COUNTY  
Office of the County Administrator

ADMINISTRATIVE BULLETIN

Number: 215.1  
Date: March 24, 2008  
Section: Budget & Fiscal

SUBJECT: PETTY CASH FUNDS

This bulletin establishes uniform procedures and standards for establishment, making expenditures, replenishment and safeguarding of petty cash funds.

- I. **APPLICABILITY.** This bulletin applies to all employees (including contractors, temporary, agents or others) who are petty cash custodians and their supervisor.
- II. **DELEGATION OF AUTHORITY.** All department heads, including elected officials, are responsible for implementation of this bulletin. Any deviation requires prior approval, in writing, from the County Auditor-Controller.
- III. **DEFINITION – PETTY CASH FUND.** A small pool of coins and currency used to make payment for small expenditures that cannot be made cost effectively through other means. The petty cash fund may be a separate fund or a sub-fund within a larger revolving fund (which may have multiple petty cash funds).
- IV. **GENERAL REQUIREMENTS.**  
All requests for new Petty cash funds or for increasing, reducing or abolishing existing Petty cash funds must be directed to the Auditor-Controller in writing by the department head or authorized representative requesting the change.  
  
Requests for new Petty cash funds should describe the purpose(s) for which the fund is needed, state the estimated size of fund required for such purpose(s), and specify the means that will be used to protect the fund against loss or misuse.  
  
Requests for changes in existing Petty cash funds should explain the need for the change and contain documentation supporting the requested amount of the change.
- V. **ACCOUNTABILITY.** A custodian shall be appointed for each Petty cash fund that is responsible for the operation of the Petty cash fund. Alternate custodians may be appointed, but the number should be limited. Operational and security considerations should be evaluated when determining the number of alternate custodians.  
  
Management shall periodically conduct unannounced cash counts of Petty cash fund to verify the amount of cash on hand and to ensure that the funds are being used for authorized purposes.

[Appendix A – Internal Control Checklist](#) (Petty cash) details best practices on receiving, safeguarding and depositing Petty cash. Custodians should periodically compare their own practices to those detailed in the Checklist. The Custodian's supervisor must also complete and submit the Checklist to the Auditor-Controller annually by June 1.

## **VI. ESTABLISHMENT OF THE PETTY CASH FUND.**

Upon approval of a petty cash fund, a warrant will be issued to the petty cash custodian for the approved dollar amount. Petty cash funds are assigned a Vendor number and name in the Accounts Payable section of the Office of the Auditor-Controller. The initial check is issued under the vendor name (e.g. Rev Fnd – Dept X) and not the name of the custodian. The custodian will need to take the warrant to the bank or Treasurer and cash it. The custodian is the one responsible for safeguarding the cash.

## **VII. EXPENDITURE PROCESS**

Petty cash disbursements should be used for small incidental expenditures where it would not be practical to make the disbursement by warrant. Each petty cash transaction must be supported by an original voucher, receipt or invoice and signed for by the recipient. If the original receipt is not available a memo explaining why it is not available is required.

At all times the vouchers, receipts, and invoices plus the cash on hand should equal the total amount of the Petty cash fund.

[Appendix B – Petty Cash Log Form](#). All disbursements need to be logged on the combination Demand and Cash Disbursement Voucher, form D15.11 or an alternate form approved in advance by the Auditor-Controller. If there are not sufficient lines on the D-15 form for the accounting information for all the transactions, record all the accounting information on a separate TC 52 form and attach it to the D-15.

Petty cash may not be used for the following:

- a) Cashing of personal or other checks
- b) Personal loans or salary advances
- c) Professional services
- d) Employee meals
- e) Gifts or gift cards
- f) Alcohol

There may be operational considerations that require special handling of petty cash expenditures. These must be approved in advance by the Auditor-Controller.

**VII. REPLENISHMENT**

The Petty cash fund should be replenished as needed, usually monthly but at least annually (before close of the County’s books on June 30). All replenishment requests, form D15.11 must be accompanied by the original vouchers, receipts and/or invoices. Receipts must be taped to an 8 ½ x 11 sheet of blank paper when submitted. The D15.11 form and the related documentation is to be submitted to the Accounts Payable unit of the Auditor-Controller for replenishment. The Accounts Payable unit will then issue a warrant for the replenishment. Replenishment checks are issued under the vendor name (e.g. Rev Fnd – Dept X) and not the name of the custodian.

**IX. SHORTAGES/OVERAGES**

Shortages must be reported when discovered in accordance with the procedures in Administrative Bulletin 207.7.

Overages must be reported when discovered. The overage is deposited to Fund 8109 for disposition.

**Originating Department:** Office of the Auditor-Controller

**Contact:** Chief Auditor 925-646-2233

/s/ \_\_\_\_\_  
JOHN CULLEN,  
County Administrator

**CONTRA COSTA COUNTY**  
**Office of the County Administrator**

**ADMINISTRATIVE BULLETIN**

Number: 600.3  
Date: 6/27/23  
Section: Purchasing

**SUBJECT: Purchasing Policy and Procedures**

**Contents:**

- I. DEFINITIONS
- II. PURCHASE OF MATERIALS AND SUPPLIES
- III. PURCHASE OF SERVICES CONTRACTS
- IV. DIGITAL SIGNATURES
- V. OTHER PROCUREMENT POLICIES
- VI. OTHER ADMINISTRATIVE BULLETINS

The purpose of this bulletin is to set forth purchasing policies and requirements to achieve minimum standards for the purchase of services, materials, supplies, equipment, furnishings, and other personal property of any kind and nature for the benefit of County departments. More information about compliance with this policy, including process, procedures and forms can be found in the resources included in the “References” section at the conclusion of this policy.

**I. DEFINITIONS**

- A. “Blanket Purchase Order”** is an authorization to purchase developed by the Purchasing Agent and issued on an annual or multi-year basis, that permits the procurement of materials, supplies, equipment, furnishings, and other personal property of any kind and nature on an as-needed basis with a stipulated maximum amount for a fixed period of time and is used when there will be on-going activity with a vendor. A blanket purchase order allows departments to order a variety of goods from a single source as needed.
- B. “Capital Outlay Item”** is a piece of equipment including moveable personal property with a unit cost of \$5,000 or more, including sales tax, and delivery and installation charges. It also includes additions to capitalized equipment costing \$5,000 or more per item<sup>1</sup>.
- C. “Cooperative Purchasing Contract”** is a contract for goods or services between a vendor and another public agency, awarded following a competitive solicitation, and made available to other public agencies. Examples of agencies that administer such Cooperative Purchasing Contracts include the National Intergovernmental Purchasing Alliance (National IPA), the State of California, Department of General Services, the U.S. General Services Administration, U.S. Communities Government Purchasing Alliance sponsored by the National Association of Counties, or similar entity. The County may participate in a Cooperative Purchasing Contract by entering into a Participating Agreement with the vendor

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<sup>1</sup> [See Administrative Bulletin No. 200, “Capital Asset Accounting and Budgeting Policy”](#)



that is party to the Cooperative Purchasing Contract.

- D. **“Equipment Capital Asset Code”** is an expenditure account within the chart of accounts reserved for purchase of certain Capital Outlay Items equal to or above \$5,000.
- E. **“Informal Bid”** is a written or oral quotation obtained from an approved vendor but not required to be opened publicly at a specified day, place and time.
- F. **“Invitation for Bid”** (IFB) is a solicitation method by which awards are made to the lowest bid. The winning bid must be responsive (conforms to bid requirements) and responsible (competent and qualified to perform under the contract).
- G. **“Lease Purchase Agreement”** is an agreement to rent equipment or property for a period of time with the promise or option to acquire title at the end of the lease term.
- H. **“Participating Agreement”** means an agreement between the County and a vendor that incorporates by reference, with or without modifications, the terms of a Cooperative Purchasing Contract that the vendor has entered into with another public agency.
- I. **“Procurement Card”** is form of credit card issued in an individual employee’s name for use in making eligible purchases authorized by the Board of Supervisors by Resolution on behalf of the County in compliance with [County Ordinance Code section 1108-2.224](#) and pursuant to regulations established in the Procurement Card Manual authorized in Section II(B)(3)(b) of this policy.
- J. **“Purchasing Agent”** is the office established pursuant to [Article 1108-2.202 of the County Ordinance Code](#).
- K. **“Purchasing Services”** is the [Purchasing Services division](#) of the Public Works department.
- L. **“Request for Information”** (RFI) is a process to separate those vendors who intend to participate in an upcoming solicitation from those who have no interest in participating. An RFI is typically used when there is an excessively large pool of interested vendors and to identify qualified suppliers capable of providing a certain product or service. If an RFI is issued for an upcoming solicitation and a single, qualified vendor responds to the RFI, then it is not necessary to conduct any further Solicitation.
- M. **“Request for Proposal”** (RFP) is a formal competitive procurement process and is the most flexible method for obtaining contracted services and certain types of goods. Responders to an RFP submit proposals detailing their technical and business experience, capabilities, and specific approach to achieve the requirements for the services or goods requested. An RFP includes evaluation factors and criteria, and their relative importance for award selection. An RFP may establish minimum or pre-qualification requirements to be eligible for consideration.
- N. **“Request for Qualifications/Quote”** (RFQ) is a process to establish a pre-qualified list of potential vendors by allowing interested parties to demonstrate compliance with minimum qualifications or requirements to provide a material,

product, or service. An RFQ may be used to initiate a formal procurement process or to establish a pool of qualified vendors and may be released for a specific amount of time or on a continuous basis to maintain a current qualified list of vendors at all times.

- O. **“Requisition”** is a request made by a County department head or designee to the Purchasing Agent to order equipment and supplies.
- P. **“Single Source”** is a procurement decision whereby purchases are directed to one vendor because of standardization, warranty, or other factors, even though other competitive sources may be available.
- Q. **“Special Services,”** as defined in Government Code section [31000](#), are “services, advice, education or training” in the following areas: “financial, economic, accounting, engineering, legal, medical, therapeutic, administrative, architectural, airport or building security matters, laundry services or linen services.” Special services may include maintenance or custodial matters under certain circumstances. For purposes of this bulletin, whether services contracted for are “special services” requires consideration of factors such as the nature of the services, qualifications of the person furnishing them, and their availability from public sources. For example, services may be special because of the outstanding skill or expertise of the person furnishing them.
- R. **“Sole Source”** is a procurement decision created due to the inability to obtain competition due to one vendor or supplier possessing the unique ability to meet the particular requirements of the solicitation.
- S. **“Solicitation”** is a purchasing entity’s request for offers to provide goods or services, including an Informal Bid request for price quotations, an Invitation for Bids (IFB), Request for Qualifications/Quote (RFQ), Request for Information (RFI) or a Request for Proposals (RFP).
- T. **“Standard Purchase Order”** is a document issued by the Purchasing Agent that uses information from the Requisition to procure equipment and supplies at terms and conditions most advantageous to the County.

## II. PURCHASE OF MATERIALS AND SUPPLIES

### A. Applicability.

This section establishes procedures for the Purchasing Agent to purchase materials, supplies, equipment, furnishings, and other personal property of any kind and nature and execute lease-purchase agreements on behalf of the County.

### B. Procedures.

#### 1. Purchase Orders.

- a. Purpose. A Standard Purchase Order, Blanket Purchase Order, or Participating Agreement may be used to purchase materials, supplies, equipment, furnishings, and other personal property of any kind and

nature.

- b. General Terms and Conditions. All Standard Purchase Orders and Blanket Purchase Orders (collectively “Purchase Orders”) shall include the County’s [“Purchase Order General Terms and Conditions,”](#) which are promulgated and updated from time to time by the Purchasing Agent in consultation with County Counsel. By executing a Standard Purchase Order or Blanket Purchase Order, a vendor agrees to abide by those terms and conditions unless both the Purchasing Agent and vendor agree in writing to amend any of those terms and conditions on behalf of the County.

2. Requisitions.

- a. Purpose: A Requisition is filed with the Purchasing Agent to order materials, supplies, equipment, furnishings, and other personal property of any kind and nature.
- b. Submission. A Requisition must be submitted to the Purchasing Agent to request the issuance of a Standard Purchase Order, Blanket Purchase Order or Lease-Purchase Agreement.
- c. Electronic Procurement System. The Purchasing Services division of the Public Works department (“Purchasing Services”) shall provide an electronic system to track the submission and processing of Requisitions by departments and other purchasing logistics to comply with any federal, state and local procurement requirements, including this policy<sup>2</sup>
- d. Department Submission Authority. Department Heads are authorized to prepare Requisitions on behalf of their respective departments and may authorize designees to prepare Requisitions by submitting a written authorization to the Purchasing Agent.
- e. Fixed Asset Purchases. The appropriate Equipment Capital Asset Code from the Chart of Accounts maintained and updated from time-to-time by the Auditor-Controller must be applied to a Requisition for the purchase of a Capital Outlay Item equal to or above \$5,000.

When an Equipment Capital Asset Code is applied for a Capital Outlay Item acquisition, the Requisition shall automatically route to the Auditor-Controller to ensure that the requesting department has adequate expenditure appropriations for the purchase. The Purchasing Agent shall not proceed with the procurement of a Capital Outlay Item until the availability of expenditure appropriations has been verified by the Auditor- Controller. If expenditure appropriations are not available, the Requisition will be returned to the requesting department. Capital Outlay Item purchases shall be in compliance with [Administrative Bulletin No. 200, “Fixed Asset Accounting and Budgeting Policy”](#).

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<sup>2</sup> The current electronic procurement system is the “Purchasing Portal”, which is accessible at the following link: <https://purchasing.cccounty.us/bsa/view/login/login.xhtml>

f. Emergency Purchase Orders. If a department needs to make an emergency purchase pursuant to [County Ordinance Code section 1108-2.220](#), the “[Emergency Purchase Form](#)” must be signed by the department head, or designee, and submitted to Purchasing Services electronically with the invoice attached to initiate a purchase order to pay the invoice.

3. Procurement Cards.

a. Purpose. [County Ordinance Code section 1108-2.224](#) authorizes the Board of Supervisors, by resolution, to authorize county departments to purchase supplies, equipment, materials, goods and other personal property without using the Purchasing Agent if a Procurement Card authorized by the county Public Works department is used.

b. Manual. Resolution No. 2023/259 requires the Purchasing Agent to establish a [Procurement Card Manual](#) outlining requirements for use of procurement cards and identifying eligible purchases.

4. Warrant Requests.

a. Purpose. [County Ordinance Code section 1108-2.222](#) authorizes the Board of Supervisors, by resolution, to authorize county departments to purchase services, supplies, equipment, materials, goods and other personal property, regardless of cost, without using the Purchasing Agent. Resolution No. 2023/260 outlines the process for making such purchases and states that this Administrative Bulletin No. 600 establishes the list of eligible purchases.

b. Eligible Purchases. The following purchases may be made without utilizing the Purchasing Agent regardless of dollar amount, unless otherwise noted:

- association dues and membership fees;
- postage, including Federal Express (FedEx) and UPS;
- lodging;
- registration, including fees for conference booths;
- facility rental and food (subject to [Administrative Bulletin No. 614, “Food and Beverage Policy”](#))
- advertising;
- legal process service fees;
- public transportation fares and bridge tolls for employees;
- permits, fees, and licenses paid to governmental agencies;
- utility installation fees (Public Works department only);
- books, subscriptions and publications;
- legal notices;
- professional medical services payable by the Health Services department based upon a specified fee schedule;
- expenditures mandated by the Court for the benefit of Wards of the Court;

- Other items below \$5,000<sup>3</sup>, including:
    - Computer hardware and software;
    - commodities; and
    - one-time services that are not covered under a service contract and are authorized by the Purchasing Agent.
5. Receipt of Shipments. Departments are responsible for receiving shipments of materials, supplies, equipment, furnishings, and other personal property. To ensure that receipt of items is validated appropriately, each department shall ensure the following:
- a. Preparing for Receipt. Each department shall have a physical location and identify specific staff members responsible for receiving and inspecting shipments and establish procedures for receiving shipments and verifying shipment contents.
  - b. Physical Inspection. Shipments should be physically inspected by department staff upon arrival to ensure the contents match the original order specifications. Contents should be inspected for damage and completeness with any issues documented.
  - c. Documentation. Records of essential information related to receipt of shipments should be maintained such as date and time of inspection, shipment details, including the supplier's name, Purchase Order number, accompanying documentation such as packing slip or invoice and whether any items were damaged, not received or failed a quality control test. In addition, any communication with the supplier related to incomplete or damaged items should be maintained.
6. Solicitations Required. The following solicitations are required for purchases of materials, supplies, equipment, furnishings, and other personal property of any kind and nature in the following amounts.
- a. Purchases Equal to or Below \$25,000.
    1. A department may request a Purchase Order for a purchase equal to or below \$25,000 without providing evidence of solicitation. Departments are encouraged to purchase from local businesses, small businesses, women-owned businesses, disabled-owned businesses, veteran-owned businesses, and other disadvantaged business enterprises for a purchase equal to or below \$25,000.
  - b. Purchases Above \$25,000 and Equal to or Below \$100,000.
    1. A department shall request a Purchase Order for a purchase above \$25,000 and equal to or below \$100,000 after securing a minimum of three (3) price quotes, with at least one (1) price quote from a [Small Business Enterprise \(SBE\)](#) provider, through an Informal Bid.

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<sup>3</sup> Items costing \$5,000 or above are not eligible to be processed on a Warrant Request.

2. If three (3) price quotes cannot be secured, or an SBE provider cannot be identified, the Purchasing Agent shall determine whether to proceed with the purchase by taking into consideration the vendor that provides the best value to the County.

c. Purchases Above \$100,000.

1. A department shall conduct an open and competitive solicitation for a purchase above \$100,000. The form of solicitation may be an Invitation for Bid (IFB), a Request for Qualifications/Quote (RFQ), Request for Information (RFI) or a Request for Proposals (RFP).
2. A department shall submit a Requisition that includes detailed specifications of the materials or supplies being requested.
3. Purchasing Services shall work with the requesting department to secure a minimum of three (3) solicitation responses in writing before selecting a vendor. Purchasing Services shall post the solicitation online to comply with the fair and open competition requirements of this policy for a minimum of fourteen (14) calendar days.

d. Exemption from Solicitation Requirements.

1. Sole/Single Source Justification. A department may submit a Requisition with a completed [Sole Source Justification Form](#) for consideration by the Purchasing Agent to seek exemption from solicitation requirements in the following specific cases:
  - A. *Sole Source.* One vendor or supplier possessing the unique ability to meet the particular requirements; or
  - B. *Single Source.* One vendor because of standardization, warranty, or other factors, even though other competitive sources may be available.

The Purchasing Agent has the sole discretion to approve or reject single/sole source exemption requests.

2. Cooperative Purchasing Contracts. In lieu of a bid solicitation process, a department may request that Purchasing Services initiate a Cooperative Purchasing Contract for goods that the County requires and that the County may procure under a Participating Agreement. Purchasing Services will initiate County Counsel review of Cooperative Purchasing Contracts, with the exception of those related to the Health Services Department, which initiates County Counsel review directly.

7. Approvals. The following approvals are required for each purchase category below.

- a. Purchases Equal to or Below \$200,000. The department requesting a purchase equal to or below \$200,000 shall file a Requisition that

complies with this policy for review and approval by the Purchasing Agent.

b. Purchases Above \$200,000. A purchase above \$200,000 complying with this policy requires approval by the Board of Supervisors. The requesting department shall draft a Board Order seeking approval of the purchase above \$200,000 and submit to the County Administrator's Office via the Board of Supervisors' electronic agenda management system for placement on the Board of Supervisors' agenda for review and final approval.

8. Participating Agreements. A Participating Agreement must be approved by the Board of Supervisors, subject to review by County Counsel, if the payment limit exceeds \$200,000, or if the Participating Agreement and/or underlying contract includes any term requiring the County to indemnify the vendor, or any term that limits the vendor's liability.

9. Documentation. All solicitation and approval documents required by this policy must be submitted electronically to Purchasing Services with the Requisition for purchase.

**C. Services Included Under a Purchase Order**. In certain circumstances, the Purchasing Agent may determine that services provided by a vendor in conjunction with the purchase or lease of materials, supplies, equipment, furnishings, and other personal property of any kind and nature from the same vendor is appropriate. The Purchasing Agent is authorized to execute a Purchase Order that authorizes the vendor to provide services if:

1. The Purchase Order includes all contract development and monitoring procedures specified in Section III(B)(7) of this policy;
2. The department requesting the Purchase Order complies with all contract development procedures specified in Section III(B)(7) of this policy; and
3. Service agreements submitted on a vendor standard form must be reviewed by County Counsel.

**D. Ethical Standards**. It is the obligation and the responsibility of every County employee to represent the County in a professional and ethical manner. Any procurement related matter shall be handled in a professional manner with the interest of the County taking precedent, including, but not limited to:

1. Avoiding activities which would compromise or give the perception of compromising the best interests of the County;
2. Actively promoting the concept of competition through bid solicitation consistent with this policy; and
3. Refraining from engagement in any procurement activity in which an employee may have a personal or indirect financial interest in accordance with Government Code sections [87100](#) and [81703](#).

- E. Legal Authority.** The legal authority for the Purchasing Agent to purchase materials, supplies, equipment, furnishings, and other personal property of any kind and nature on behalf of the County is set forth in the following statutes and County codes: Government Code sections [25500- 25509](#), [31000](#); Public Contract Code sections [22002\(d\)](#) and [22032](#); and County Ordinance Code chapter [1108-2](#).

### III. PURCHASE OF SERVICES CONTRACTS

**A. Applicability.**

This section establishes procedures for the purchase of services required by the County. State law provides that the Board of Supervisors may contract for services on behalf of the County or any County officer or department under certain circumstances. The Board of Supervisors has authorized the Purchasing Agent to enter into service contracts costing not more than \$200,000. Service contracts exceeding \$200,000 require approval by the Board of Supervisors, following review by the Office of County Counsel and the County Administrator.

**B. Procedures for Service Contracts.**

1. Mandated Findings. Before a contractor for services is engaged, all of the following findings must be made and documented by the department.
  - a. A statute authorizes the contract for the desired services. For example, Government Code section [31000](#) authorizes the Board of Supervisors to enter into a service contract for Special Services;
  - b. County staff is not available or qualified to perform the services; and
  - c. In the case of facilities maintenance or custodial matters, the site is remote from available County employee resources and the County's economic interests are served by contracting for such services rather than by paying additional travel and subsistence expenses to existing County employees.
2. Solicitations Required. The following solicitations are required for purchase of services in the following amounts.
  - a. Service Contracts Equal to or Below \$25,000.
    1. A department may enter into service contracts equal to or below \$25,000 without providing evidence of solicitation.
    2. Departments are strongly encouraged to purchase from local businesses, small businesses, women-owned businesses, disabled-owned businesses, veteran-owned businesses, and other disadvantaged business enterprises consistent with the [County's Outreach and SBE program](#) goals so they may achieve the County's objective of awarding 50% of total eligible dollar base amounts to SBEs.



b. Service Contracts Above \$25,000 and Equal to or Below \$100,000.

1. A department may enter into a service contract above \$25,000 and equal to or below \$100,000 after securing a minimum of three (3) proposals through an Informal Bid.
2. If three (3) proposals cannot be secured, the Purchasing Agent, or designee, shall determine whether to proceed with the service contract taking into consideration the vendor that provides the best value to the County.
3. Departments are strongly encouraged to purchase from local businesses, small businesses, women-owned businesses, disabled-owned businesses, veteran-owned businesses, and other disadvantaged business enterprises consistent with the [County's Outreach and SBE program](#) goals so they may achieve the County's objective of awarding 50% of total eligible dollar base amounts to SBEs.

c. Service Contracts Above \$100,000.

1. A department may enter into a service contract above \$100,000 after providing for open and competitive solicitation.
2. The form of solicitation may be an Invitation for Bid (IFB), Request for Qualifications/Quote (RFQ) or a Request for Proposals (RFP); however, a department should consider initially issuing a Request for Information (RFI) to generate a list of potential vendors to provide the services required. If a department receives a single response to the RFI from a qualified bidder, then no further solicitation is required.
3. Departments are strongly encouraged to purchase from local businesses, small businesses, women-owned businesses, disabled-owned businesses, veteran-owned businesses, and other disadvantaged business enterprises consistent with the [County's Outreach and SBE program](#) goals so they may achieve the County's objective of awarding 50% of total eligible dollar base amounts to SBEs.

3. Solicitation Compliance Procedure.

- a. The department shall draft and Purchasing Services may provide counsel on an IFB, RFQ, RFI or RFP seeking qualified vendors to provide the desired services.
- b. Purchasing Services shall post the solicitation online to comply with the fair and open competition requirement of this policy for a minimum of fourteen (14) calendar days.
- c. Purchasing Services shall work with the requesting department to secure

a minimum of three (3) solicitation responses in writing before selecting a vendor.

- d. Purchasing Services shall retain solicitation records for the duration of each contract term.

4. Exemption from Solicitation Requirements.

- a. Service Types. The following are service contract types that are exempt from bid solicitation requirements:

- utility services;
- educational services;
- intergovernmental agreements;
- newspaper and publication services;
- law firms, subject to approval by the County Counsel's Office;
- print legal briefs or legal notices;
- reporters services or transcripts;
- expert witnesses, consultants, and investigators hired through the County Counsel's Office to assist in legal matters;
- election supplies;
- expert services to be rendered to the offices of the District Attorney or Sheriff-Coroner;
- physician services at the Contra Costa Regional Medical Center (CCRMC) or the Contra Costa Health Plan (CCHP);
- appraiser services;
- consultants and other experts employed directly by the Board of Supervisors; and
- other services that, by law, some other officer or body is specifically charged with obtaining.

- b. Cooperative Purchasing Contracts. A department may submit a Requisition identifying a Cooperative Purchasing Contract for services that County requires and that the County may procure under a Participating Agreement.

5. Ethical Standards. It is the obligation and the responsibility of every County employee to represent the County in a professional and ethical manner. Any procurement related matter shall be handled in a professional manner with the interest of the County taking precedent, including, but not limited to:

- a. Avoiding activities which would compromise or give the perception of compromising the best interests of the County;
- b. Actively promoting the concept of competition through bid solicitation consistent with this policy; and
- c. Refraining from engagement in any procurement activity in which an employee may have a personal or indirect financial interest in accordance with Government Code sections [87100](#) and [81703](#).

6. Outreach and SBE Program Compliance. Additional thresholds and goals under the [County Outreach and SBE \(Small Business Enterprise\) programs](#) apply to and are required for service contract solicitations. These thresholds and goals may be updated from time to time and departments must ensure compliance with the latest Outreach and SBE Program construct.
7. Contract Development and Monitoring. Department Heads are responsible for the development and monitoring of service contracts entered into on behalf of each County department, including negotiation of service plans and/or scopes of work.
  - a. Performance Metrics Required. Departments are responsible for negotiating service contracts that identify specific performance outputs and/or outcomes to be achieved during the contract term. These performance outputs and/or outcomes include contract deliverables (e.g., produce a final written report by a date specified) and/or service tasks (e.g., conduct three one-hour training sessions within a specified date range). Contracting departments shall review contracts at least once per year to ensure compliance with output/outcome requirements. The review should identify reason(s) for any noncompliance, including whether or not the outputs/outcomes will be achievable during the remainder of the contract term.
  - b. Payment Provisions. Vendor payment terms shall correlate with the performance outputs/outcomes negotiated as part of a service plan or scope of work for each service contract. Types of payment terms include fixed price (where deliverables are produced by the contractor and payment is due upon completion of each deliverable) and rate (where services are provided by the contractor and the contractor is reimbursed at an hourly or other periodic rate). Departments shall avoid contract payment terms that are not typical of the service type being procured. For example, legal service providers may require payment of an advance, or “retainer”, upon execution of a service contract, which is typical of that industry. However, a financial consultant requesting a monthly, fixed payment as a “retainer,” whether or not the County uses the contracted services, is not a typical financial industry practice and must be avoided. Other negative payment terms, such as late payment penalties, should not be entertained as part of the negotiation of payment terms.
  - c. Vendor Noncompliance. Failure of a vendor to achieve contracted performance output and/or outcome requirements may be grounds for contract termination.
  - d. Corrective Action Plan. For contracts determined to be out of compliance with performance outputs and/or outcomes during an annual review process, and for which a department does not recommend terminating the contract, the department shall work with the vendor on a corrective action plan to ensure contracted services are delivered during the term of the contract.
  - e. Documentation. Departments shall immediately notify a vendor if a

determination of non-compliance is reached. Including whether or not the contract will be recommended for termination, with a copy to Purchasing Services. In cases where a Corrective Action Plan is entered into with the vendor, a copy of the plan shall be forwarded to Purchasing Services and retained by the department for the term of the contract.

f. Renewals. Departments shall keep track of contract expiration dates in order to renew contracts prior to expiration, or issue solicitations for new contracts to be in place prior to expiration of the existing contract.

8. Effective Date. Service contract documents must be executed before the service contract effective date. Contract payments cannot be made until the service contract is executed by all parties.

9. Indemnification. Any contract that requires the County to indemnify the contractor, or includes a limitation of liability, must be approved by the Board of Supervisors regardless of the contract amount.

**C. Procedures for Services Contracts Equal to or Below \$200,000.**

1. Approval. The Purchasing Agent is authorized to execute contracts for services costing equal to or below \$200,000.

2. County Counsel Review. A service contract that is either more than \$50,000 or not on a County standard form (i.e., on a vendor's form) must be reviewed and approved as to legal form by the County Counsel's Office before the Purchasing Agent executes the contract. If a service contract is \$50,000 or less and is on the County's standard form, the Purchasing Agent may sign the contract without County Counsel review.

**D. Procedures for Service Contracts Above \$200,000.**

1. Approval. The Board of Supervisors must approve all service contracts above \$200,000. The requesting department shall draft a Board Order seeking approval of the contract over \$200,000 and submit to the County Administrator's Office via the Board of Supervisors' electronic agenda management system for placement on the Board of Supervisors' agenda for review and final approval.

2. County Counsel Review. All service contracts that are over \$200,000 must be reviewed and approved as to legal form by the County Counsel's Office.

**E. Legal Authority**. The legal authority for the purchase of certain services required by the County is set forth in the following statutes and County codes: Government Code section [31000](#), Government Code section [25502.5](#), Ordinance Code section [1108-2.215](#) and Public Contract Code section [22032\(a\)](#).

**IV. DIGITAL SIGNATURES**. All purchasing and contract related documents specified in this bulletin may be executed either with original signatures or electronic signatures through a

digital signature platform authorized by the Chief Information Officer.

- V. OTHER PROCUREMENT POLICIES.** The Board of Supervisors, in its discretion, may adopt additional policies impacting procurement of materials, supplies, equipment, furnishings, and other personal property of any kind and nature or services from time to time. This policy establishes the minimum standards for conducting procurement activities; however, compliance with additional policies adopted by the Board of Supervisors or those required to satisfy federal or state grant requirements may supersede this policy.
- VI. OTHER ADMINISTRATIVE BULLETINS.** Additional Administrative Bulletins governing specific purchases have been promulgated to provide guidance on those unique transaction types and should be reviewed in conjunction with this policy as the requirements in those policies may supersede the requirements in this policy, including:
- a. [Administrative Bulletin No. 508, “County Vehicle and Equipment Acquisition and Replacement Policy, and Zero-Emission Vehicle Policy and Goals”.](#)
  - b. [Administrative Bulletin No. 614, “Food and Beverage Policy”.](#)
  - c. [Administrative Bulletin No. 615, “Incentives for County Programs and Services”](#)
  - d. [Administrative Bulletin No. 616, “Acquisition of Computer Hardware, Software and Computer-Related Services”.](#)

**References:**

- [Emergency Purchase Form](#)
- [Procurement Card Manual](#)
- [Purchasing User Setup/Change Form](#)
- [Sole Source Purchase Form](#)
- [Purchase Order General Terms and Conditions](#)
- [Small Business Enterprise \(SBE\) Program Requirements](#)

/s/

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Monica Nino,  
County Administrator

BOS Approved: June 27, 2023, Agenda Item C.107

**Community Services Bureau****FIXED ASSETS, INFORMATION TECHNOLOGY, LOW-VALUE INVENTORY AND  
CLOUDS DATA SYSTEM POLICIES AND PROCEDURES****BACKGROUND**

The following Agency Fixed Assets, Information Technology, Low-value Inventory and CLOUDS Data System Policy was approved by Community Services Bureau ("CSB"). This policy applies to all programs funded by CSB.

**DEFINITIONS**

**General Fixed Assets:** All equipment (non-expendable personal property) with an acquisition cost of \$5,000.00 or more per unit and a useful life of more than one year that is purchased with funds distributed by CSB.

**Information Technology Equipment (purchased with CSB Program funds):** The purchase, rent, licensing, maintenance fee, or subscription of information-technology applications/software/services with a per-unit single or cumulative cost totaling \$5,000 or more within a twelve-month period with CSB Program funds.

**Low-value Inventory (Equipment):** All computer hardware and expendable property of a sensitive nature (subject to loss or theft due to its size), meeting the state and federal definition of equipment, such as photocopiers, printers, tablets, laptops, and video cameras with an estimated useful life of more than one year, and value is less than \$5,000.00. All Low-value Inventory shall be considered to have a useful life of up to five years for purposes of this policy.

**Covered Equipment:** Any and all General Fixed Assets, Information Technology and/or Low-value Inventory. The cost of Covered Equipment includes: the purchase price less discounts plus freight charges; sales, use and transportation taxes; and installation charges.

**CLOUDS Data Management System (Software):** all programs operated and funded by CSB, including sub-recipient/delegate/partner, will utilize the CLOUDS data management system for recording daily attendance, reports, asset management and conduct program monitoring. County shall provide training and technical support on CLOUDS and all related hardware and software applications used at sub-recipient/delegate/partner centers, on an as-needed basis.

**PRIOR APPROVAL OF FIXED ASSETS AND INFORMATION TECHNOLOGY**

Expenditures for fixed assets and information technology (CSB Program funds) shall be approved by CSB and/or grantor prior to the purchase of such fixed assets by subrecipient/delegate agency. Sub-recipient/delegate/partner agency shall obtain written approval of CSB and/or grantor prior to purchasing the fixed assets and information

technology. For fixed assets purchase using Head Start funds, if fixed assets are approved in the annual budget, no further approvals are required.

## INVENTORY OF FIXED ASSETS AND LOW-VALUE INVENTORY

All Covered Equipment will be inventoried by Sub-recipient/Delegate/Partners and entered into CLOUDS Asset Management System, which will be monitored by CSB. A physical property inventory monitoring will be conducted and reconciled with the property records at least once every two years. Replacement, transfer, tagging and disposal of any Covered Equipment shall be consistent with the following procedures.

## REPLACEMENT OF COVERED EQUIPMENT

When the status of Covered Equipment is reported after the annual physical inventory, the sub-recipient/delegate/partner agency that cannot locate items of Covered Equipment assigned to it shall provide to CSB (from non-CSB sources) funds equal to the replacement Value of the Covered Equipment not located.

## TRANSFER OF COVERED EQUIPMENT

The sub-recipient/delegate/partner agency that receives Covered Equipment from CSB will be solely responsible for the pickup and return of such equipment to CSB. In addition, all Covered Equipment must be returned when the program operator is no longer funded by CSB.

## TAGGING OF COVERED EQUIPMENT

Every purchase made with CSB funds will be approved by CSB's Fiscal Unit. Each sub-recipient/delegate/partner must be aware that in some instances, prior federal and/or state approval is necessary, and program must secure the appropriate approval prior to acquisition. For tagging and record keeping, the sub-recipient/delegate/partner must provide a report containing an itemized listing of Covered Equipment purchases with a copy of the invoice for each item. The listing should provide the date of acquisition, individual cost, serial number, and location of the Covered Equipment. CSB will then arrange for tagging the Covered Equipment.

## DISPOSITION OF COVERED EQUIPMENT

Disposition of Covered Equipment will be made in accordance with OMB Uniform Guidance (2 CFR Part 200) and applicable implementing regulations by federal funding source. Sub-recipient/delegate/partner agency shall also take reasonable measures to safeguard and protect personally identifiable information from the Covered Equipment in accordance with OMB Uniform Guidance (2 CFR Part 200.82 and 200.203(e)). Covered Equipment determined to be non-usable by CSB may be sent to the County General Services for disposition. Proceeds received from disposition will be retained by CSB for future program services, as applicable to each funding source.

If it is determined that the cost of moving the non-usable Covered Equipment will exceed the potential sale proceeds from disposition, CSB may perform disposition procedure on site. In addition, any Low-value Inventory that has exceeded its useful life may be disposed of on site. If any Covered Equipment is disposed of on site, the Program Operator shall continue to use such equipment in its CSB-funded program or, if such equipment is disposed of for value, the proceeds shall be considered Program Income and shall be accounted for as provided in the sub-grant or delegate agreement.

## CLOUDS DATA MANAGEMENT SYSTEMS

Sub-recipient/Delegate/Partner shall use CLOUDS data management system, including specific software applications and hardware, for all enrollments using CSB's state or federal funding for the following:

- 1) Electronic Attendance/e-Signature/Touchless QR Code sign-in/out system
- 2) Communication with Families (SMS, Email & CSBConnect.org)
- 3) DROP App data recording
- 4) Program Information Report (PIR)
- 5) Monitoring
- 6) Purchase Request Approval Process (CLOUDS & CSBConnect.org)
- 7) Electronic Communications via SMS, Email & CSBConnect.org
- 8) Asset Management Module (Federal & State Funding)

## REPORTS AND SUBMITTALS

Recipient and sub-recipient/Delegate, shall conduct a physical inventory of the property and results reconciled with the property records in CLOUDS asset Management at least once every two years and complete the approved Equipment Inventory Form/Template provided (see Exhibit 1, attached).

- 1) County shall provide CLOUDS specific hardware and software applications for electronic attendance requirements.
- 2) Hardware is the property of the County, and the below procedures must be followed:
  - a) Missing or Stolen County hardware must be reported to CSB and include a copy of police report.
  - b) Non-operational or damaged hardware must be returned to CSB as soon as possible and a replacement will be provided
  - c) All County hardware must be returned upon termination of contract agreement.



**Equipment Inventory**

Contractor Legal Name:					Funding Source (e.g. ACF)					
Item Description*	Serial or Identification Number	Original Cost	Acquisition Date	Source of Funding (incl. FAIN)	Who Holds Title	% of Federal Interest**	Location	Use	Condition	Disposition Date (incl. date of disposal and sale price)***
<i>Example: King-Wade desktop computer</i>	12345678-9011	\$1,500	7/12/2004	B.L. Warren Preschool	ACF	50				
<i>Example: Metover refrigerator</i>	23434234-90	\$1,200	2/13/1995							Transfer to U.L. Max C.D.C.
I certify the information contained in this Equipment Inventory form represents a complete and accurate disclosure of items purchased with Head Start funds.				Signature			Inventory Completion Date			
* List each piece of equipment, purchased in whole or part, with funds provided by ACF. **Enter percentage of Federal participation in the project costs for the Federal award under which the property was acquired										
***Enter date the item was removed from service and its disposition.										

References: Head Start Act's Post Federal Award Requirements regarding Equipment (see 45 Code of Federal Regulations section 75.320(d)(1)(Equipment)).

**Note: A physical inventory of the property must be taken and the results reconciled with the property records at least once every two years.**

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**I. GENERAL:**

This document establishes the Employment and Human Services Department (EHSD) fiscal monitoring policy on the oversight responsibilities relating to federal subawards made to subrecipients.

**II. REFERENCES:**

Title 2 - Code of Federal Regulations, Part 200, *Grants and Agreements*;

Title 45 - Code of Federal Regulations, *Public Welfare*;

Title 29 - Code of Federal Regulations, *Labor*;

Federal Acquisition Regulations (FAR) Part 31, *Cost Principles and Procedures for Commercial Entities*;

Federal Acquisition Regulations (FAR) Part 48, *Cost Accounting Standards for Commercial Entities*; and

Other applicable Title(s) as indicated in grant agreement(s).

**III. PURPOSE:**

As a pass-through entity of federal funds, it is EHSD's policy to monitor its subrecipients consistent with the requirements outlined in this document.

Federal rules, unless otherwise stated in applicable CFRs, require pass-through entities to evaluate each subrecipient's risk of noncompliance to determine the appropriate fiscal monitoring level, monitor the fiscal activities of subrecipient organizations to ensure that the subaward is in compliance with applicable Federal statutes and regulations and terms of the subaward, and verify that subrecipients are audited as required by Subpart F of 2 CFR 200 and 45 CFR Part 75.

Failure to adequately monitor the fiscal compliance of subrecipients could result in audit findings in EHSD's single audit report or fiscal monitoring report conducted by Federal and State monitors. EHSD, as a pass-through entity, serves as a steward that exercises the appropriate oversight to provide reasonable assurance that Federal awards are expended

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in accordance with programmatic intent and are not misapplied, or misdirected whereby financial harm may be suffered by EHSD, Contra Costa County, and/or its constituency.

The standards in this policy apply to all subrecipients of federal awards, unless otherwise stated in applicable CFRs.

IV. **DEFINITIONS:**

**Subrecipient** – Title 2 CFR section 200.93 and 45 CFR 75.2

Subrecipient means a non-Federal entity that receives a **subaward** from a **pass-through entity** to carry out part of a Federal program; but does not include an individual that is a beneficiary of such program. A subrecipient may also be a recipient of other Federal awards directly from a Federal awarding agency.

**Contractor** – Title 2 CFR section 200.23 and 45 CFR 75.2

Contractor means an entity that receives a contract as defined in §200.22 **contract**.

**Subaward** – Title 2 CFR section 200.92 and 45 CFR 75.2

Subaward means an award provided by a **pass-through entity** to a **subrecipient** for the **subrecipient** to carry out part of a Federal award received by the pass-through entity. It does not include payments to a **contractor** or payments to an individual that is a beneficiary of a Federal program. A subaward may be provided through any form of legal agreement, including an agreement that the **pass-through entity** considers a **contract**.

**Contract** – Title 2 CFR section 200.22 and 45 CFR 75.2

Contract means a legal instrument by which a non-Federal entity purchases goods or services needed to carry out the project or program under a Federal award. The term as used in this part does not include a legal instrument, even if the non-Federal entity considers it a contract, when the substance of the transaction meets the definition of a Federal award or **subaward** (see §200.92 **Subaward**).

**Pass-through Entity** – Title 2 CFR section 200.74 and 45 CFR 75.2

Pass-through entity means a non-Federal entity that provides a **subaward** to a **subrecipient** to carry out part of a Federal program. *This will generally refer to EHSD.*

**Non-federal Entity** – Title 2 CFR section 200.69 and 45 CFR 75.2

Non-Federal entity means a state, local government, Indian tribe, institution of higher education (IHE), or nonprofit organization that carries out a Federal award as a recipient or **subrecipient**.

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**Cognizant Agency for Indirect Cost** – Title 2 CFR section 200.19 and 45 CFR Part 75.2  
Cognizant agency for indirect costs means the Federal agency responsible for reviewing, negotiating, and approving cost allocation plans or indirect cost proposals developed under this part on behalf of all Federal agencies.

V. **WHO MUST COMPLY:**

EHSD as a pass-through entity providing subawards to subrecipients to carry out part of a federal program(s) must comply with this policy.

Fiscal staff will be implementing the standards in this policy. Program analysts and their designees will work in collaboration with fiscal to assist with the coordination of fiscal monitoring activities and be involved in the resolution of fiscal monitoring findings.

VI. **POLICY STANDARDS FOR FISCAL MONITORING:**

Title 2 CFR section 200.331 defines the requirement for pass-through entities awarding a federal subaward to a subrecipient.

In order to comply with the requirements, EHSD must adhere to the following 20 standards and adequately document all actions taken to comply with the requirements.

EHSD may be required to comply with additional fiscal monitoring requirements above the 20 standards as required by specific Federal agencies and other pass-through entities.

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**Pre-award Stage**

Fiscal Monitoring Activities Conducted by Fiscal Staff	Action/Timeline	References	Tools
<b>Standard 1</b>  Make a case-by-case determination on whether the contracting agreement resulting from the RFP or RFI for the disbursement of federal program funds casts the party receiving the funds in the role of a subrecipient.	Complete checklist <u>before issuance</u> of RFP, RFI or sole source.	<u>Section A</u>	<u>Appendix 1</u> <i>Subrecipient/ Contractor Determination Checklist</i>
<b>Standard 2</b>  Review the fiscal section of the RFP or RFI to ensure required budget information and appropriate subrecipient language is included in the document.	Review fiscal section <u>before issuance</u> of RFP or RFI.	<u>Section A,</u> <u>Section C</u>	None
<b>Standard 3</b>  Evaluate the risks posed by subrecipient applicants that are responding to RFP or RFI.	Upon receipt of proposals, complete risk scoring sheet during RFI/RFP evaluation period as requested by Contract Administrator.	<u>Section B</u>	Scoring Spreadsheet

**Post-award Stage**

Fiscal Monitoring Activities Conducted by Fiscal Staff	Action/Timeline	References	Tools
<b>Standard 4</b>  Make a case-by-case determination on whether the contracting agreement for the disbursement of federal program funds casts the party receiving the funds in the role of a subrecipient.	Complete checklist annually <u>before</u> execution of agreement.	<u>Section A</u>	<u>Appendix 1</u> <i>Subrecipient/ Contractor Determination Checklist</i>
<b>Standard 5</b>  Review subrecipient contract budget for reasonableness, allocability and allowability.	Complete checklist annually <u>before</u> execution of agreement and when the subaward is amended.	<u>Section C</u>	<u>Appendix 2</u> <i>Contract Budget Review Checklist</i>
<b>Standard 6</b>  Ensure that every subaward is clearly identified to the subrecipient as a subaward and includes the <b>required information</b> at the time of the subaward and if any of these data elements	Include required information for each subrecipient <u>before</u> execution of agreement.	<u>Section D</u>	<u>Appendix 3</u> <i>Special Conditions Template</i>

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Fiscal Monitoring Activities Conducted by Fiscal Staff	Action/Timeline	References	Tools
change, include the changes in subsequent subaward modification.			
<p><b>Standard 7</b></p> <p>Gain an understanding of the subrecipient organization, history of Federal awards, previous audit results, and fiscal practices.</p>	Send Subrecipient Questionnaire by July 15 <sup>th</sup> of each year. Review subrecipient response by August 30 <sup>th</sup> of each year in preparation for the completion of the risk assessment.	<u>Section E</u>	<p><u>Appendix 4</u></p> <p><i>Subrecipient Questionnaire</i></p>
<p><b>Standard 8</b></p> <p>Evaluate each subrecipient's risk of noncompliance with Federal statutes, regulations, and the terms and conditions of the subaward for purposes of determining the appropriate subrecipient monitoring.</p> <p>Classify subrecipient's risk level as (1) Low; (2) Moderate; (3) High</p>	Complete risk assessment for each subrecipient by September 30 <sup>th</sup> of each year.	<u>Section E</u>	<p><u>Appendix 5</u></p> <p><i>Risk Assessment Matrix</i></p>
<p><b>Standard 9</b></p> <p>Establish fiscal monitoring schedule and monitoring activities in accordance with subrecipient's risk level.</p> <p>Determine if additional monitoring activities are warranted depending upon EHSD's assessment of risk posed by the subrecipient.</p>	By September 30 <sup>th</sup> of each year.	<u>Section F</u>	<p><u>Appendix 6</u></p> <p><i>Subrecipient Monitoring Plan</i></p>
<p><b>Standard 10</b></p> <p>Monitor the fiscal activities of the subrecipient as necessary to ensure that the subaward is used for authorized purposes, in compliance with Federal statutes, regulations, and the terms and conditions of the subaward.</p>	On-going; on-site monitoring and desk review to begin no later than 60 days after FYE June 30 <sup>th</sup> .	<u>Section F</u>	<p><u>Appendix 7</u> <i>Monthly Demand Review Guide</i></p> <p><u>Appendix 8</u> <i>Desk Review Guide</i></p> <p><u>Appendix 9</u> <i>On-site Monitoring Guide</i></p>

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Fiscal Monitoring Activities Conducted by Fiscal Staff	Action/Timeline	References	Tools
<p><b>Standard 11</b></p> <p>Determine by AL number cumulative Federal subaward payments for the fiscal year and communicate the amounts to subrecipient.</p>	<p>Within 30 days of final settlement, but no later than September 15<sup>th</sup>.</p>	<p><a href="#">Section G</a></p>	<p><a href="#">Appendix 10</a> <i>Federal Subaward Payment Template</i></p>
<p><b>Standard 12</b></p> <p>Verify that every subrecipient is audited as required by Subpart F—Audit Requirements of this part when it is expected that the subrecipient's Federal awards expended during the respective fiscal year equaled or exceeded the threshold set forth in §200.501 Audit requirements.</p>	<p>Send prior year single audit certification survey by November 30<sup>th</sup> of each year; Evaluate subrecipient response by February 15<sup>th</sup>.</p>	<p><a href="#">Section H</a></p>	<p><a href="#">Appendix 11</a> <i>Single audit certification form</i></p>
<p><b>Standard 13</b></p> <p>Review subrecipient's single audit to ensure federal program(s) funded by EHSD are on the SEFA and identify on schedules of findings whether there are findings present for Federal programs.</p>	<p>Complete single audit review checklist within 60 days of due date of single audit to Federal Audit Clearinghouse (FAC).</p>	<p><a href="#">Section I</a></p>	<p><a href="#">Appendix 12</a> <i>Single audit review checklist</i></p>
<p><b>Standard 14</b></p> <p>Prepare and issue management decision for single audit findings pertaining to the EHSD's Federal award provided to the subrecipient.</p>	<p>Prepare and issue management decision letter within 180 days of acceptance of single audit by Federal Audit Clearinghouse (FAC).</p>	<p><a href="#">Section J</a></p>	<p><a href="#">Appendix 13</a> <i>Management Decision Template</i></p>
<p><b>Standard 15</b></p> <p>If subrecipient has not completed corrective action(s), provide a timetable and ensure that subrecipient proceeds with corrective action(s).</p>	<p>Must be initiated as rapidly as possible and corrective action should begin no later than upon receipt of the audit report.</p>	<p><a href="#">Section J</a></p>	<p><a href="#">Appendix 14</a> <i>Corrective Action(s) Letter Template</i></p>
<p><b>Standard 16</b></p> <p>Consider imposing specific subaward conditions upon a subrecipient if appropriate as described in §200.207 Specific conditions.</p>	<p>On a case-by-case basis if conditions in section K are met.</p>	<p><a href="#">Section K</a></p>	<p>None</p>
<p><b>Standard 17</b></p>	<p>On a case-by-case basis if specific subaward conditions are not adhered to.</p>	<p><a href="#">Section L</a></p>	<p>None</p>

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Fiscal Monitoring Activities Conducted by Fiscal Staff	Action/Timeline	References	Tools
Consider taking enforcement action against noncompliant subrecipients as described in §200.338 Remedies for non-compliance of this part and in program regulations.			
<b>Standard 18</b>  Assess training needs and prepare an annual schedule to provide technical assistance for program analysts and subrecipients. Update training materials as needed.	1 <sup>st</sup> Quarter of each Fiscal Year	<a href="#">Section M</a>	None
<b>Standard 19</b>  Maintain electronic documentation of completed checklists, reports and communication with subrecipient.	On-going	<a href="#">Section M</a>	None
<b>Standard 20</b>  Maintain monitoring activities in electronic database.	On-going	<a href="#">Section M</a>	None

**Foster Family Agency (FFA) and Group Home Monitoring and Oversight**

Fiscal Monitoring Activities Conducted by Fiscal Staff	Action/Timeline	References	Tools
Verify that every subrecipient is audited as required by Subpart F—Audit Requirements of this part when it is expected that the subrecipient's Federal awards expended during the respective fiscal year equaled or exceeded the threshold set forth in §200.501 Audit requirements.	Send prior year single audit certification survey by November 30 <sup>th</sup> of each year; Evaluate subrecipient response by February 15 <sup>th</sup> .	<a href="#">Section N</a>	<a href="#">Appendix 11</a> <i>Single audit certification form</i>
Review subrecipient's single audit to ensure federal program(s) funded by EHSD are on the SEFA and identify on schedules of findings whether there are findings present for Federal programs.	Complete single audit review checklist within 60 days of due date of single audit to Federal Audit Clearinghouse (FAC).	<a href="#">Section N</a>	<a href="#">Appendix 12</a> <i>Single audit review checklist</i>
Verify that corrective action(s) have been implemented and/or ensure that subrecipient proceeds with corrective action(s)	Must be initiated as rapidly as possible and corrective action should begin no later than upon receipt of the audit report.	<a href="#">Section N</a>	<a href="#">Appendix 14</a> <i>Corrective Action(s) Letter Template</i>

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VII. POLICY GUIDANCE AND REFERENCES:

A. Subrecipient/Contractor Determination

EHSD will use the subrecipient/contractor determination checklist to determine if the contracting relationship with the third-party is of a subrecipient or vendor.

**RFP/RFI Issued before July 1, 2016**

For contracts for which the Request for Proposal (RFP) or Request for Interest (RFI) was issued prior to July 1, 2016, EHSD will complete the subrecipient/contractor determination checklist annually before contract execution to ensure the status remains unchanged from the RFP/RFI subrecipient determination.

**RFP/RFI Issued on or after July 1, 2016**

For contracts for which the Request for Proposal (RFP) or Request for Interest (RFI) on July 1, 2016, or thereafter, the determination on whether the contracting agreement for the disbursement of federal program funds casts the party receiving the funds in the role of a subrecipient should be made **before the issuance** of the RFP or RFI.

Effective July 1, 2016, the RFP or RFI must identify whether the contracting relationship will be in the form of a subrecipient or contractor (vendor).

EHSD will review the subrecipient/contractor determination annually to ensure the initial determination status remains unchanged.

**Sole Source Contracts**

Effective July 1, 2016, for sole source contracts, the subrecipient/contractor determination will be made annually before contract execution.

The following characteristics are guidelines from 2 CFR 200.331 to assist EHSD in making the determination of whether a contracting relationship is of subrecipient or Contractor (vendor).

**Subrecipients:** A **subaward** is for the purpose of carrying out a portion of a Federal award and creates a Federal assistance relationship with the **subrecipient**. Characteristics which support the classification of the non-Federal entity as a **subrecipient** include when the non-Federal entity:

Determines who is eligible to receive what Federal assistance;

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Has its performance measured in relation to whether objectives of a Federal program were met;

Has responsibility for programmatic decision making;

Is responsible for adherence to applicable Federal program requirements specified in the Federal award;  
and

In accordance with its agreement, uses the Federal funds to carry out a program for a public purpose specified in authorizing statute, as opposed to providing goods or services for the benefit of the pass-through entity.

**Contractors (vendor):** A **contract** is for the purpose of obtaining goods and services for the non-Federal entity's own use and creates a procurement relationship with the contractor (vendor). Characteristics indicative of a procurement relationship between EHSD and a contractor are when the contractor:

Provides the goods and services within normal business operations;

Provides similar goods or services to many different purchasers;

Normally operates in a competitive environment;

Provides goods or services that are ancillary to the operation of the Federal program; and

Is not subject to compliance requirements of the Federal program as a result of the agreement, though similar requirements may apply for other reasons.

**Use of judgment in making determination:** In determining whether an agreement between a pass-through entity and another non-Federal entity casts the latter as a **subrecipient** or a **contractor**, the substance of the relationship is more important than the form of the agreement. All of the characteristics listed above may not be present in all cases, and the pass-through entity must use judgment in classifying each agreement as a **subaward** or a procurement **contract**.

## B. Risk-based Approach to Evaluating Risks Posed by Subrecipient Applicant

EHSD is required to evaluate the risks posed by subrecipient applicants that are responding to RFP or RFI. In evaluating risks posed by subrecipient applicants, EHSD may use a risk-based approach and may consider information such as the following:

Financial stability;

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Quality of management systems and ability to meet the management standards prescribed in this part;

History of performance. The applicant's record in managing Federal awards, if it is a prior recipient of Federal awards, including timeliness of compliance with applicable reporting requirements, conformance to the terms and conditions of previous Federal awards, and if applicable, the extent to which any previously awarded amounts will be expended prior to future awards;

Reports and findings from audits performed under Subpart F—Audit Requirements of this part or the reports and findings of any other available audits; and

The applicant's ability to effectively implement statutory, regulatory, or other requirements imposed on non-Federal entities.

When a single audit report or any other available audit reports were not performed on the subrecipient entity, EHSD will request additional information from the subrecipient entity and apply the above principles to evaluate the risks posed by the subrecipient applicant.

In addition to this review, EHSD must comply with the guidelines on government-wide suspension and debarment in 2 CFR part 180, and must require non-Federal entities to comply with these provisions. These provisions restrict Federal awards, subawards and contracts with certain parties that are debarred, suspended or otherwise excluded from or ineligible for participation in Federal programs or activities.

EHSD is also required to use a risk-based approach for a subrecipient that has not been competitively procured (sole source).

C. Incorporation of Subrecipient Language and Evaluation of Subrecipient Reasonableness, Allocability and Allowability Budget for

Effective July 1, 2016, the subrecipient determination is required to be made before the RFP or RFI publication. When entity is classified as a subrecipient, the RFP or RFI should be reviewed for inclusion of appropriate subrecipient language subject to federal CFRs and Single audit requirements.

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The subrecipient entity receiving Federal funds is required to provide detailed budget information to assist EHSD with evaluating the reasonableness, allocability and allowability of the proposed costs to operate the program.

The budget evaluation is one of many aspects of the fiscal subrecipient monitoring program. The fundamental guiding principles for an effective budget evaluation of a subrecipient that is required to comply with Federal cost principles described in 2 CFR 200 Subpart D (for HHS subawards, 45 CFR 75 Subpart E) are as follows:

The subrecipient is responsible for the efficient and effective administration of the Federal award through the application of sound management practices.

The subrecipient assumes responsibility for administering Federal funds in a manner consistent with underlying agreements, program objectives, and the terms and conditions of the Federal award.

The subrecipient, in recognition of its own unique combination of staff, facilities, and experience, has the primary responsibility for employing whatever form of sound organization and management techniques may be necessary in order to assure proper and efficient administration of the Federal award.

The application of these cost principles should require no significant changes in the internal accounting policies and practices of the subrecipient. However, the accounting practices of the subrecipient must be consistent with these cost principles and support the accumulation of costs as required by the principles, and must provide for adequate documentation to support costs charged to the Federal award.

In reviewing, negotiating and approving cost allocation plans or indirect cost proposals, the cognizant agency for indirect costs should generally assure that the subrecipient is applying these cost accounting principles on a consistent basis during their review and negotiation of indirect cost proposals. Where wide variations exist in the treatment of a given cost item by the subrecipient, the reasonableness and equity of such treatments should be fully considered.

The subrecipient may not earn or keep any profit resulting from Federal financial assistance, unless explicitly authorized by the terms and conditions of the Federal award. Commercial organizations subject to FAR may earn a profit if not prohibited by the applicable CFR or terms and conditions of the Federal award. **Note:**

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*Prohibition on profit earning by commercial entity determined to be a subrecipient is present in 45 CFR 75.216.*

**Cost reasonableness principles:** A cost is reasonable if, in its nature and amount, it does not exceed that which would be incurred by a prudent person under the circumstances prevailing at the time the decision was made to incur the cost. In determining reasonableness of a given cost, consideration must be given to:

Whether the cost is of a type generally recognized as ordinary and necessary for the operation of the subrecipient or the proper and efficient performance of the Federal award.

The restraints or requirements imposed by such factors as: sound business practices; arm's-length bargaining; Federal, state, local, and other laws and regulations; and terms and conditions of the Federal award.

Market prices for comparable goods or services for the geographic area.

Whether the individuals concerned acted with prudence in the circumstances considering their responsibilities to the subrecipient, its employees, the public at large, and the Federal Government.

Whether the subrecipient significantly deviates from its established practices and policies regarding the incurrence of costs, which may unjustifiably increase the Federal award's cost.

**Factors impacting the allowability of costs:** Except where otherwise authorized by statute, costs must meet the following general criteria in order to be allowable under Federal awards:

Be **necessary and reasonable** for the performance of the Federal award and be **allocable** thereto under these principles.

Conform to any limitations or exclusions set forth in these principles or in the Federal award as to types or amount of cost items.

Be consistent with policies and procedures that apply uniformly to both federally-financed and other activities of the subrecipient.

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Be accorded consistent treatment. A cost may not be assigned to a Federal award as a direct cost if any other cost incurred for the same purpose in like circumstances has been allocated to the Federal award as an indirect cost.

Be determined in accordance with generally accepted accounting principles (GAAP).

Not be included as a cost or used to meet cost sharing or matching requirements of any other federally-financed program in either the current or a prior period.

Be adequately documented.

The above principles must be used in determining the reasonableness, allowability and allocability of costs for work performed by the subrecipient under Federal awards. For specific rules, review 2 CFR 200 Subpart D (for HHS subawards, 45 CFR 75 Subpart E).

These principles also must be used by the EHSD as a guide in the pricing of fixed-price contracts and subcontracts where costs are used in determining the appropriate price (sole source vendor when a competitive market for the procured service/good does not exist). The principles do not apply to fixed amounts based on such items as education allowance or published tuition rates and fees.

#### D. Required Information in Subaward

When the contracting relationship is determined to be of a subrecipient, the legal instrument is referred to as a subaward in 2 CFR 200.92. EHSD is to include the following required information in each subaward (2 CFR 200.331 and for HHS subaward 45 CFR 75.352), unless otherwise authorized in applicable CFR:

1. Federal Award Identification
  - a. Subrecipient name (which must match the name associated with its unique entity identifier);
  - b. Subrecipient's unique entity identifier<sup>1</sup>;

<sup>1</sup> SAM.gov, an official website of the U.S. government announced on their website the unique entity identifier used in SAM.gov has changed effective April 4, 2022.

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- c. Federal Award Identification Number (FAIN), if applicable;
- d. Federal Award Date, if applicable;
- e. Subaward Period of Performance Start and End Date;
- f. Amount of Federal Funds Obligated by this action;
- g. Total amount of Federal Funds Obligated to the subrecipient in the Federal subaward;
- h. Name of pass-through entity,
- i. AL Number and Name; the pass-through entity must identify the dollar amount made available under each Federal award and the AL number at time of disbursement; and
- j. Subrecipient's federally approved indirect cost rate agreement.

When some of above information is not available, **EHSD must provide the best information available to describe the Federal award and subaward.**

- 2. All requirements imposed by the pass-through entity on the subrecipient so that the Federal award is used in accordance with Federal statutes, regulations and the terms and conditions of the Federal award.
- 3. Any additional requirements that the pass-through entity imposes on the subrecipient in order for the pass-through entity to meet its own responsibility to the Federal awarding agency including identification of any required financial and performance reports;
- 4. A requirement that the subrecipient permit the pass-through entity and auditors to have access to the subrecipient's records and financial statements as necessary for the pass-through entity to meet the requirements of this part; and
- 5. Appropriate terms and conditions concerning closeout of the subaward.
- 6. Effective April 4, 2022, the unique entity identifier used across the federal government changed from the DUNS Number to the Unique Entity ID (UEI) generated by SAM.gov.

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Existing registered entities (subrecipients/subcontractors) can find their UEI as follows:

- a. Log in to SAM.gov.
- b. Select “Search” from the header menu.
- c. Expand “Select Domain,” then select “Entity Information,” then “Entities.”
- d. You can then use keywords and filters to search for the entity you are trying to locate. The UEI is displayed in the search results for each entity.

New entities (subrecipients/subcontractors) can get their UEI at SAM.gov and, if required, complete an entity registration.

Effective fiscal year FY 2022-2023, all EHSD’s subcontractors/subrecipients receiving federal funds, will be sent a letter informing them of this change including the steps described above to obtain the new UEI. The contractor will have 10 business days to provide their UEI to EHSD Contracts and Grants Division.

All new subcontractors/subrecipients will be required to get their UEI at SAM.gov and provide EHSD with the number before the subaward is awarded to the subrecipient in response to a RFP or RFI.

If the contractor does not comply, the EHSD Contracts and Grants Division will follow-up with the contractor.

E. Evaluation Factors to Assess Subrecipient’s Risk of Noncompliance

EHSD Contract Unit will verify and track all contractors UEI at the early stage of the contract development and prior to awarding a contract.

- Upon receipt of the UEI number, the Contract Analyst will log into SAM.gov website.

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- Contract Analyst will conduct a clearance and check the Excluded Parties List System (EPLS) to verify the contractor account is active and in good standing.
- If contractor's account is not in good standing, the Department will add such contractor in the Excluded Parties List System (EPLS) and will not be able to execute a contract.
- A print-out of the clearance will be saved electronically.

EHSD will require each of its subrecipients to complete the Subrecipient Questionnaire annually to gain an understanding of the subrecipient organization, history of Federal awards, previous audit results, and fiscal practices.

EHSD must evaluate each subrecipient's risk of noncompliance with Federal statutes, regulations, and the terms and conditions of the subaward for purposes of determining the appropriate subrecipient monitoring. The evaluation may include consideration of such factors as those listed below:

1. The subrecipient's prior experience with the same or similar subawards;
2. The results of previous audits including whether or not the subrecipient receives a Single Audit in accordance with Subpart F—Audit Requirements of this part, and the extent to which the same or similar subaward has been audited as a major program;
3. Whether the subrecipient has new personnel or new or substantially changed systems; and
4. The extent and results of Federal awarding agency monitoring (e.g., if the subrecipient also receives Federal awards directly from a Federal awarding agency).

EHSD will use the information from the responses to the Annual Subrecipient Questionnaire and other pertinent information to determine the subrecipient's level of risk by completing the risk assessment matrix. Each subrecipient will be attributed a level of risk (Low, Moderate and High) based on a multiplicity of factors outlined in the risk assessment matrix.

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F. Monitoring of Subrecipient Fiscal Activities

EHSD will monitor the fiscal activities of the subrecipient as necessary to ensure that the subaward is used for authorized purposes, in compliance with Federal statutes, regulations, and the terms and conditions of the subaward. The monitoring activities must include at least:

1. Reviewing financial reports required by EHSD.
2. Following-up and ensuring that the subrecipient takes timely and appropriate action on all deficiencies pertaining to the Federal award provided to the subrecipient from EHSD detected through audits, on-site reviews, and other means.
3. Issuing a management decision for audit findings pertaining to the Federal award provided to the subrecipient from EHSD as required by §200.521 Management decision.
4. Depending upon EHSD's assessment of risk posed by the subrecipient, the following monitoring tools may be useful for EHSD to ensure proper accountability of the Federal award:
5. Providing subrecipients with training and technical assistance on fiscal-related matters;
6. Performing on-site reviews or desk review of the subrecipient's fiscal operations;
7. Arranging for agreed-upon-procedures engagements as described in §200.425 Audit services. EHSD may charge Federal awards for the cost of agreed-upon-procedures engagements to monitor a subrecipient that are exempted from the requirements of the Single Audit Act and Subpart F—Audit Requirements of this part. This cost is allowable only if the agreed-upon-procedures engagements are meeting the requirements in §200.425 (c)(1), (c)(2) and (c)(3).

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Risk(s) Level	Monitoring Activities	Who	Frequency
Low, Moderate and High	Send prior year single audit certification survey to each subrecipient	Fiscal Analyst	Annually
Low, Moderate and High	Review single audit for findings and accuracy of SEFA	Fiscal Analyst	Annually if subrecipient is subject to single audit
Low, Moderate and High	Review audited financial statements to assess financial stability.  Review auditor's opinion and internal control report	Fiscal Analyst	Annually if subrecipient is subject to single audit or if financial statements audit available only
Low, Moderate and High	Review responses to Subrecipient Questionnaire	Fiscal Analyst	Annually
Low, Moderate and High	Review monthly financial reports (demands) for each subrecipient	Program Analyst Account Clerk Fiscal Analyst, if issue is unresolved or open findings	Monthly
Low	Conduct desk review if subrecipient is not subject to Single Audit requirement and risk level is assessed at Low	Fiscal Analyst	Annually if subrecipient is not subject to single audit
Moderate and High	Conduct on-site monitoring if subrecipient is not subject to Single Audit requirement and risk level is assessed at Moderate or High.	Fiscal Analyst	Annually if subrecipient is not subject to single audit
Moderate	Conduct desk review if subrecipient is subject to Single Audit and	Fiscal Analyst	Annually

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Risk(s) Level	Monitoring Activities	Who	Frequency
	no prior findings from Single Au- dit or EHSD’s monitoring,		
High	Conduct on-site monitoring visit	Fiscal Analyst	Annually

G. Report on Cumulative Federal Subaward Payments to Subrecipient

EHSD is required to report to its subrecipients their cumulative Federal subaward payments by AL number within 30 days of the final settlement, but no later than September 15<sup>th</sup> of each year.

H. Subrecipient Subject to Single Audit Requirements

EHSD will verify that every subrecipient is audited as required by Subpart F— Audit Requirements of 2 CFR 200 when it is expected that the subrecipient's Federal awards expended during the respective fiscal year equals or exceeds the threshold set forth in §200.501 Audit requirements.

EHSD will send a single audit certification survey to its subrecipients by November 30<sup>th</sup> of each year and require a response within 30 days of the date of the letter. A review of the survey responses will be performed to determine which subrecipients are subject to the single audit requirement and when the single audit is expected to be filed with FAC.

Responses to the single audit survey will be logged in a database for ease of tracking. EHSD will follow up on subrecipients that have not responded to the single audit survey or have not sent their single audit report by the FAC filing date. In addition to those subrecipients undergoing periodic monitoring will be those chosen for special monitoring. Special monitoring will focus on subrecipients EHSD has reason to believe that federal funds are not being expended appropriately or that the subrecipient is concerned about its compliance status and requests a monitoring visit.

Sub-recipients and programs can be selected for special monitoring at the discretion of the EHSD Chief Financial Officer or the EHSD Director.

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I. Review of Subrecipient Single Audit

Upon determining that a subrecipient is subject to the single audit requirements, EHSD will track whether the single audit reports are received by the FAC filing date.

EHSD will review the subrecipient single audit to ensure that federal program(s) funded by EHSD are on the SEFA and identify on schedules of findings whether there are findings present for EHSD's federal programs. The results of the review will be logged in the database and, if necessary, EHSD will issue a management decision and/or require the subrecipient to issue a corrective action plan as described in section J below.

J. Issuance of Management Decision and Subrecipient Corrective Actions

If audit findings are present, EHSD must issue a management decision that clearly states whether or not the audit finding is sustained, the reasons for the decision, and the expected auditee action to repay disallowed costs, make financial adjustments, or take other action.

EHSD will also provide a timetable to the subrecipient if the entity has not completed its corrective action plan.

Prior to issuing the management decision, EHSD may request additional information or documentation from the auditee, including a request for auditor assurances related to the documentation, as a way of mitigating disallowed costs.

The management decision should describe the, if any, appeal process available to the subrecipient.

EHSD must issue a management decision within six months of acceptance of the audit report by the Federal Audit Clearinghouse (FAC). The subrecipient (auditee) must initiate and proceed with corrective action as rapidly as possible and corrective action should begin no later than upon receipt of the audit report.

While not required by §200.521, EHSD may also issue a management decision on findings relating to the financial statements.

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K. Additional Specific Award Conditions upon a Subrecipient as Appropriate

EHSD may impose additional specific award conditions as needed under the following circumstances:

Based on the criteria set forth in EHSD's review of risk posed by **applicants**;

When an **applicant** or **subrecipient** has a history of failure to comply with the general or specific terms and conditions of a Federal award;

When an **applicant** or **subrecipient** fails to meet expected performance goals as described in §200.210 Information contained in a Federal award; or

When an **applicant** or **subrecipient** is not otherwise responsible.

Additional federal award conditions may include items such as the following:

Requiring payments as reimbursements rather than advance payments;

Withholding authority to proceed to the next phase until receipt of evidence of acceptable performance within a given period of performance;

Requiring additional, more detailed financial reports;

Requiring additional project monitoring;

Requiring the non-Federal entity to obtain technical or management assistance; or

Establishing additional prior approvals.

EHSD must notify the **applicant** or **subrecipient** regarding:

The nature of the additional requirements;

The reason why the additional requirements are being imposed;

The nature of the action needed to remove the additional requirement, if applicable;



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The time allowed for completing the actions if applicable, and

The method for requesting reconsideration of the additional requirements imposed.

EHSD must **promptly remove any specific conditions** once the conditions that prompted them have been corrected.

L. Remedies for Noncompliance of 2 CFR 200 and in Program Regulations

EHSD may take one or more of the following actions, as appropriate to the circumstances, if it is determined that the subrecipient noncompliance cannot be remedied by imposing additional conditions:

Temporarily withhold cash payments pending correction of the deficiency by the subrecipient or more severe enforcement action EHSD.

Disallow (that is, deny both use of funds and any applicable matching credit for) all or part of the cost of the activity or action not in compliance.

Wholly or partly suspend or terminate the subaward.

Recommend to the Federal awarding agency the initiation of suspension or debarment proceedings as authorized under 2 CFR part 180 and Federal awarding agency regulations.

Withhold further Federal awards for the project or program.

Take other remedies that may be legally available.

M. Subrecipient Monitoring Standards and Tracking Subrecipient Monitoring Activities

*Section VI. Policy and Standards for Fiscal Monitoring* of this document establishes the monitoring standards, frequencies of activities, reference materials, and tools that the Fiscal staff are responsible for implementing annually under the direction of the Fiscal Officer.

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N. Foster Family Agency (FFA) and Group Home Monitoring and Oversight

Pursuant to guidance received in 2001 from the federal Administration for Children and Families (ACF), Foster Care providers who operate group homes and/or FFA programs that receive an Aid to Families with Dependent Children-Foster Care program rate are considered subrecipients and are subject to the same audit requirements and require the same degree of oversight as other subrecipients.

Although EHSD can reasonably rely on the findings of Single audits required by California Department of Social Services (CDSS) and management letters issued accordingly, EHSD will review those audits and their findings and follow up to ensure compliance and monitoring and oversight required by federal and state laws and regulations. (County Fiscal Letter No. 15/16-62)

O. Fiscal Monitoring in the Aging and Adult Bureau

The designated fiscal staff will follow policy standards with the exception to Standard 9. Regardless of the risk level, Monitoring Plan #3 must be followed at minimum every other year.

P. Fiscal Monitoring in the Workforce Development Board Bureau

The designated fiscal staff will follow policy standards with the exception to Standard 9. Regardless of the risk level, Monitoring Plan #3 must be followed every year.

Q. Fiscal Monitoring and Head Start/Early Head Start Regulations on the Allowability of Costs and Inventory Requirements in the Community Service Bureau

The designated fiscal staff will follow policy standards with the exception to Standard 9. Regardless of the risk level, Delegate Monitoring Plan #4 must be followed. For all other subrecipients, Monitoring Plan #3 will be followed.

**Self-Monitoring – Appendix 15**

As a recipient of federal and state awards, EHSD is responsible for establishing a self-monitoring policy per 45 CFR Part 75.303(c). Initial monitoring will take place quarterly and semi-annually thereafter. Compliance assessments will be conducted to ensure:

- Compliance with statutory requirements

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- Review of internal checks/controls
- Review of financial documents
- Review of business practices, processes and policies

Internal Controls – 45 CFR Part 75.303

The non-Federal entity must:

- (a) Establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations, and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government,” issued by the Comptroller General of the United States or the “Internal Control Integrated Framework,” issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).
- (b) Comply with Federal statutes, regulations, and the terms and conditions of the Federal awards.
- (c) Evaluate and **monitor** the non-Federal entity's compliance with statutes, regulations and the terms and conditions of Federal awards.
- (d) Take prompt action when instances of noncompliance are identified including noncompliance identified in audit findings.
- (e) Take reasonable measures to safeguard protected personally identifiable information and other information the HHS awarding agency or pass-through entity designates as sensitive or the non-Federal entity considers sensitive consistent with applicable Federal, state, local, and tribal laws regarding privacy and obligations of confidentiality.

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Pursuant to Head Start Performance Standard – 1302.102(b) Achieving program goals:

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

- (i) Collect and use data to inform this process;
- (ii) Correct quality and compliance issues immediately, or as quickly as possible;
- (iii) Work with the governing body and the policy council to address issues during the ongoing oversight and correction process and during federal oversight; and,
- (iv) Implement procedures that prevent recurrence of previous quality and compliance issues, including previously identified deficiencies, safety incidents, and audit findings.

**CSB Fiscal Process – Head Start and Early Head Start**

Employment and Human Services Department (EHSD) charges costs that are reasonable, allowable, and allocable to a federal award directly or indirectly. All unallowable costs shall be appropriately segregated from allowable costs in the general ledger in order to assure that unallowable costs are not charged to federal awards. (See Appendix 16)

**Delegate Onsite Monitoring Tool – Appendix 17**

**VIII. ROLES, RESPONSIBILITIES AND DATA MANAGEMENT**

Under the direction of the Fiscal Officer, the Social Services Compliance Accountant (SSCA) is responsible for establishing EHSD’s fiscal monitoring framework and implementing systems that track the actual monitoring activities against the established monitoring standards, frequencies of activities, reference materials, and tools. The SSCA will also oversee the updates to the fiscal monitoring policy, reference materials and tools.

The SSCA is responsible for creating and maintaining technical assistance materials to assist the Fiscal staff with educating subrecipients and program analysts on the monitoring standards, frequencies of activities, reference materials, and tools. The SSCA will

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also prepare an annual schedule of technical assistance sessions for the Fiscal staff, Program Analysts and Subrecipient, and ensure that technical assistance sessions are conducted annually according to schedule.

During the peak monitoring periods, the Fiscal Officer will direct accounting and administrative support whenever possible to assist the Fiscal staff and SSCA with implementing the monitoring standards established in this policy document.

The next section describes the tracking of data and forms related to monitoring activities.

**Pre-award Stage:**

The SSCA will obtain RFP or RFI schedule from the Contract administrator and coordinate the pre-award activities with the designated Fiscal staff.

The SSCA will maintain an electronic data table containing basic information on RFP or RFI as follows:

**Table 1: Pre-award Subrecipient Tracking**

Fiscal Analyst Name
Bureau
RFP or RFI Number
RFP or RFI PDF
Start RFP or RFI Date
End RFP or RFI Date
Federal funds (Y/N)
Subrecipient Checklist due
Subrecipient Determination (Y/N)
# of Proposals Received

The designated Fiscal staff will identify whether the contracted services will be funded with Federal funds and complete the subrecipient determination checklist as appropriate. The checklist will be stored electronically and the information provided to SSCA.

For each RFP or RFI contracting instrument identified as subaward, the SSCA will maintain an electronic data table containing information on RFP or RFI respondents as follows:

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**Table 2: Pre-award Fiscal Scores**

RFP or RFI Number
Proposal #?
Legal Entity Name
Score
Total Score

The designated Fiscal staff will evaluate the risk posed by subrecipient applicants who are responding to the RFP or RFI. The checklist will be stored electronically and the score information provided to SSCA and the designated staff in the contracts unit.

**Post-award Stage**

The SSCA will maintain an electronic data table containing basic information on each subrecipient and contractor (vendor) as follows:

**Table 3: Post-award Basic Contract Data**

Contract Number
Contract PDF
Start Contract Date
End Contract Date
Federal funds (Y/N)
Subrecipient Checklist Due
Subrecipient (Y/N)
Special Conditions (Y/N)
Legal Entity Name
Legal Entity Type
Mailing address
Mailing City
Mailing State
Fiscal Contact Last Name
Fiscal Contact First Name
Fiscal Contact Title
Fiscal Contact Position
Telephone number

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Email
Fiscal Analyst Name
Bureau

The designated Fiscal staff will maintain in a centralized location electronic copies of the contract and completed subrecipient determination checklist.

The SSCA will maintain an annual electronic data table containing basic information on each subrecipient identified in Table 3 as follows:

**Table 4: Post-award Subrecipient Monitoring Activities**

Vendor Number
AL
Federal funds Expended at year-end for each AL # (\$)
Letter with Federal funds expended by AL # mailed (Y/N)
Awarding Agency
Program Name
Legal Entity Type
Budget Review Completed (Y/N)
Subrecipient Contract language (Y/N)
Subrecipient Questionnaire Sent (Y/N)
Subrecipient Questionnaire Received (MM/DD/YY)
Risk Assessment Matrix (Y/N)
Risk Level (L/M/H)
Review Invoices Required (Y/N)
Desk Review Required (Y/N)
On-site Visit Required (Y/N)
Monitoring Date Scheduled on (MM/DD/YY)
Desk or On-site Monitoring Completed (NA/Y/N)
Monitoring Report Issued (Y/N)
Finding(s) Y/N
Observation(s) Y/N
Contractor Response Required (Y/N)
Response Received (NA/Y/N)
Response Adequate (Y/N)

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The designated Fiscal staff will provide the information identified in Table 4 for each subrecipient to the SSCA. Federal funds expended by AL number will be provided to the SSCA within 30 days of final settlement, but no later than September 15th. The SSCA will consolidate the monitoring activities into the EHSD annual monitoring plan by October 15<sup>th</sup> of each year.

The designated Fiscal staff will store the following electronic documents for each subrecipient in a centralized location:

- Review of subrecipient budget for reasonableness, allowability and allocability
- Subrecipient’s responses to Subrecipient Questionnaire
- Risk Assessment matrix
- Subrecipient monitoring plan
- Desk review or on-site visit monitoring tool
- Monitoring report
- Response from subrecipient and corrective action plan, if applicable
- Letter with Federal funds expended mailed to subrecipient

The SSCA will maintain an annual electronic data table containing basic information on each subrecipient identified in Table 3 as follows:

**Table 5: Post-award Subrecipient Single Audit Review**

Vendor Number
Sent Request for Single Audit Certification (Y/N)
Method Certification Requested (Mail/Email)
Due Date for Certification (MM/DD/YY)
Received Certification (Y/N)
If Certification Not Received, Follow-up Action (Y/N)

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Over \$750,000 (Y/N)
Estimated date for Single Audit (MM/DD/YY)
If Single Audit Not Received, Follow-up Action (Y/N)
Date Single Audit Reviewed by Analyst (MM/DD/YY)
Unmodified Opinion on Audited Financial Statements (Y/N)
Unmodified Opinion on Compliance of Major Federal Programs (Y/N)
Auditee Identified as High Risk (Y/N)
Finding(s) Reported in Single Audit: (Y/N)
If Finding(s) Reported, Management Letter Due Date (MM/DD/YY)
If Finding(s) Reported, Letter to Subrecipient Regarding Corrective Action (Y/N)
If Finding(s) Reported, Letter to Subrecipient Regarding Questioned Cost (Y/N)
Subrecipient Response Received (MM/DD/YY)
Subrecipient Exercising Appeal Rights (Y/N)

The designated Fiscal staff will provide the information in Table 5 for each subrecipient to the SSCA.

The designated Fiscal staff will maintain in a centralized location electronic copies of the following documents for each subrecipient:

- Single audit survey completed by subrecipient
- Subrecipient single audit
- Subrecipient checklist
- Management letter to subrecipient, if applicable
- Subrecipient response to management letter
- Subrecipient request to appeal questioned cost in management letter

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APPENDIX 1: SUBRECIPIENT/CONTRACTOR DETERMINATION CHECKLIST

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APPENDIX 1

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Legal Entity Name: \_\_\_\_\_  
AL Number: \_\_\_\_\_

Contract Number: \_\_\_\_\_  
Program Name: \_\_\_\_\_

For FY 20

**Subrecipient/Contractor Determination Checklist**

(Only use this checklist if legal instrument is funded with Federal dollars)

**INSTRUCTIONS:**

Begin by evaluating whether one or more characteristics listed under Section 1 – Subrecipient apply to the scope of work included in the legal instrument under review. If none of the Section 1 – Subrecipient characteristic applies, confirm that the relationship between EHSD and the 3<sup>rd</sup> party is of a contractor (vendor) by evaluating whether one or more characteristics listed under Section 2 – Contractor (vendor) apply.

When the subrecipient or contractor relationship is unclear, the Analyst will use his/her best judgment in making the subrecipient or contractor determination. Due diligence in making the determination may include past experience with similar legal instruments, reviewing prior EHSD or other Counties subrecipient determination findings, consulting with other Fiscal Analysts, and requesting technical assistance from the funding entity. The comment section should be used to provide justification when subrecipient or contractor relationship requires further clarifications.

In determining whether an agreement between a pass-through entity and another non-Federal entity casts the latter as a subrecipient or a contractor, **the substance of the relationship is more important than** the form of the agreement. All of the characteristics listed above may not be present in all cases, and the pass-through entity must use judgment in classifying each agreement as a subaward or a procurement contract.

**SECTION 1 – SUBRECIPIENT**

**Description:** A subaward is for the purpose of carrying out a portion of a Federal award and creates a Federal assistance relationship with the subrecipient. Characteristics which support the classification of the non-Federal entity as a subrecipient include when the non-Federal entity:

- 1. Determines who is eligible to receive what Federal assistance;
- 2. Has its performance measured in relation to whether objectives of a Federal program were met;
- 3. Has responsibility for programmatic decision making;
- 4. Is responsible for adherence to applicable Federal program requirements specified in the Federal award;
- 5. In accordance with its agreement, uses the Federal funds to carry out a program for a public purpose specified in authorizing statute, as opposed to providing goods or services for the benefit of the pass-through entity.

**SECTION 2 – CONTRACTOR (vendor)**

**Description:** A contract is for the purpose of obtaining goods and services for the non-Federal entity's own use and creates a procurement relationship with the contractor. Characteristics indicative of a procurement relationship between the non-Federal entity and a contractor are when the non-Federal entity receiving the Federal funds:

- 1. Provides the goods and services within normal business operations;
- 2. Provides similar goods or services to many different purchasers;
- 3. Normally operates in a competitive environment;
- 4. Provides goods or services that are ancillary to the operation of the Federal program.
- 5. Is not subject to compliance requirements of the Federal program as a result of the agreement, though similar requirements may apply for other reasons.

Comment

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Contra Costa County  
Employment and Human Services

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**DETERMINATION:**

**SUBRECIPIENT**

**CONTRACTOR**

**Analyst Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**DEFINITIONS FROM Uniform Guidance (2 CFR, Part 200)**

**Subrecipient (§200.93)**

*Subrecipient means a non-Federal entity that receives a subaward from a pass-through entity to carry out part of a Federal program; but does not include an individual that is a beneficiary of such program. A subrecipient may also be a recipient of other Federal awards directly from a Federal awarding agency.*

**Contractor (§200.23)**

*Contractor means an entity that receives a contract as defined in §200.22 Contract. §200.22 Contract means a legal instrument by which a non-Federal entity purchases property or services needed to carry out the project or program under a Federal award.*

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**APPENDIX 2: CONTRACT BUDGET REVIEW CHECKLIST**

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**Checklist to Review Budgeted Costs for Allowability, Allocability and Reasonableness**

This Checklist is intended to assist Fiscal Analysts with reviewing the subrecipient budget submitted to EHSD, and making a determination on whether budgeted costs are allowable, allocable and reasonable to operate the program.

Contract Number:	
Subrecipient Name:	
Prepared by:	Date:

**References:**

- Title 2 - Code of Federal Regulations, Part 200, *Grants and Agreements*;
- Title 45 - Code of Federal Regulations, *Public Welfare*;
- Title 29 - Code of Federal Regulations, *Labor*;
- Federal Acquisition Regulations (FAR) Part 31, *Cost Principles and Procedures for Commercial Entities*;
- Federal Acquisition Regulations (FAR) Part 48, *Cost Accounting Standards for Commercial Entities*; and
- Other applicable Title(s) as indicated in grant agreement(s).

We strongly encourage the reader to review the applicability and exceptions sections found in 2 CFR 200.101 and 2 CFR 200.102 when making a determination on the applicability of the various CFR rules.

Determination Factors	Yes <input type="checkbox"/>	No <input type="checkbox"/>
1. Are the budgeted costs necessary and reasonable?		
2. Are the budgeted costs allocable to the Federal subaward?		
3. Are the budgeted costs allowable to the Federal subaward?		
4. Was there a cost allocation plan or description of the cost allocation methodology submitted if common costs such as rent are allocated to the Federal?		
5. If a cost allocation plan or description of the cost allocation methodology was submitted, is the methodology to distribute common cost reasonable?		
6. If there is a budgeted indirect cost rate: <ul style="list-style-type: none"> <li>a. Was a Federally approved indirect rate submitted?</li> <li>b. Did the entity include an indirect cost using the de minimis rate?</li> </ul>		
7. Was sufficient information provided to determine whether costs are correctly allocated to each budget category (for example: Personnel cost vs Participant cost)?		
8. Do line items add up correctly?		
9. Were budget calculations verified for accuracy?		

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10. Is there a budget narrative included?		
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**Comment:**

Consider increasing the level of risk for the subrecipient **as necessary** based on your assessment of the cost reasonableness, allocability and allowability.

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**APPENDIX 3: SPECIAL CONDITIONS TEMPLATE**



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Contra Costa County  
Special Conditions Form

SPECIAL CONDITIONS  
Federal Subaward Conditions

Number xx-xxx-x

- I. The contract meets the conditions of a Federal subaward and the Contractor is subject to the Subrecipient provisions in 2 CFR or 45 CFR Part 75.
- II. Definitions:
  - A. CFR means Code of Federal Regulations
  - B. Assistance Listings (AL) (formerly Catalog of Federal Domestic Assistance (CFDA))
  - C. Subrecipient – – Title 2 CFR section 200.93 or 45 CFR Part 75.2  
Subrecipient means a non-Federal entity that receives a subaward from a pass-through entity to carry out part of a Federal program; but does not include an individual that is a beneficiary of such program. A subrecipient may also be a recipient of other Federal awards directly from a Federal awarding agency.
  - D. Subaward – – Title 2 CFR section 200.92 or 45 CFR Part 75.2  
Subaward means an award provided by a pass-through entity to a subrecipient for the subrecipient to carry out part of a Federal award received by the pass-through entity. It does not include payments to a contractor or payments to an individual that is a beneficiary of a Federal program. A subaward may be provided through any form of legal agreement, including an agreement that the pass-through entity considers a contract.
  - E. Pass-through Entity – – Title 2 CFR section 200.74 or 45 CFR Part 75.352  
Pass-through entity means a non-Federal entity that provides a subaward to a subrecipient to carry out part of a Federal program.
- III. The pass-through entity is the County of Contra Costa.
- IV. The Subrecipient is Fill in contractor name.
- V. The Subrecipient's unique identification number is Fill In.
- VI. If applicable, the Federal Award Date is Fill in or not applicable.
- VII. If applicable, the Federal Award Identification Number (FAIN) is Fill in or not applicable.
- VIII. The Subaward Period of Performance is from Fill in Start Date to Fill in End Date.

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- IX. The total amount of Federal Funds Obligated to the subrecipient in this Federal subaward award is: Fill In.
- X. The AL Number is Fill In.
- XI. The Federal Program Title is Fill In.
- XII. The Subrecipient's federally approved indirect cost rate agreement is incorporated by reference if the Subrecipient's budget submitted includes a federally approved indirect cost.
- XIII. The Subrecipient shall use the Federal award in accordance with Federal statutes, regulations and the terms and conditions of the Federal award.

Revised 2016

Initials: \_\_\_\_\_  
Contractor County Dept.

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**APPENDIX 4: SUBRECIPIENT QUESTIONNAIRE**

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**Subrecipient Questionnaire**

Please complete the following questionnaire and fax to (925) \_\_\_\_\_ or email to: \_\_\_\_\_@ehsd.cccounty.us by \_\_\_\_\_. Feel free to add pages with explanations. You may provide copies of your policies and procedures.

<b>Legal Name:</b> Fictitious Business Name: Type of Legal Ownership : Address: City:	Agency Fiscal Contact: Telephone Number: Fax Number: Email Address: Website Address:
Executive Director's Name:	<b>Fiscal Year:</b>

- How long has your organization been in business?
- Please provide your organization's chart, if available. Has your organization recently experienced changes in senior management?  
 Yes       No  
 If yes, please provide a brief description of the change(s).
- Please provide your organization's fiscal org chart, if available with a brief description of your organization's fiscal org structure and the average number of years your key fiscal staff have worked for your organization.
- Is your organization currently in a litigation(s) that could adversely impact on your organization's ability to perform on the EHSD contract(s) or place your organization out of compliance with Federal, State or Local laws?  
 Yes       No  
 If yes, please describe.
- Have you previously entered into one or more agreements funded with Federal award(s) to perform the same or similar work as the scope of work included in the current EHSD agreement?  
 Yes       No

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**If yes**, please list current year agreements and those received in the past three years and indicate whether your organization received each Federal award directly from **the US Federal Government** or a **pass-through entity**.

For each of the agreements you received, indicate whether there were one or more findings in your organization's single audit or monitoring report issued by the funding entity.

Awarding Agency:  
Award Period:  
Type of work performed  
Audit/Monitoring Finding (s):

Awarding Agency:  
Award Period:  
Type of work performed  
Audit/Monitoring Finding (s):

Awarding Agency:  
Award Period:  
Type of work performed  
Audit/Monitoring Finding (s):

6. In the previous three years and during current year have you entered into one or more agreements funded with Federal award(s) to perform work unrelated to the scope of work included in the current EHSD agreement?

Yes       No

**If yes**, please provide a brief description of the work performed under the agreement(s) and the funding agency name. Please provide a list of Audit/Monitoring findings, if any.

7. Is your organization subject to the Single Audit requirements as described in 2 CFR 200 Subpart F and 45 CFR 75.501?

Yes       No

Date of Last Single Audit:  
Fiscal Period Audited:  
Audit Firm:

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Auditor's Opinion on Financial Statements Unqualified:  Yes  No  
If not, State Reason:

Auditor's Opinion on Compliance for Major Program(s) Unqualified:  Yes  No  
If not, State Reason:

Auditor's Determination on Auditee's Risk Level: (Circle) **High Risk** **Low Risk**

Does your organization's Single Audit disclose findings?  Yes  No

If yes, are the findings resolved (closed)?  Yes  No

If the findings are not closed, what is the status of you corrective action plan?

Enclosed is a copy of the audit report and management letter package (pdf copy preferred.)

8. If your organization is not subject to the Single Audit requirements, do you have annual financial statements that have been compiled, reviewed or audited by an independent audit firm?

Yes  No

**If yes:**

Date of Last Financial Statement Audit:

Fiscal Period Audited:

Audit Firm:

Auditor's Opinion on Financial Statements Unqualified:  Yes  No

If not, State Reason:

Enclosed is a copy of the audit report package (pdf copy preferred.)

9. Which method of accounting do you use?

Accrual  
 Modified Accrual  
 Cash

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10. Electronic modules and journals used in Accounting System:

- General ledger
- Cash receipt journal
- Cash disbursement journal
- Payroll register
- Timesheet
- A/R ledger
- A/P ledger
- Cost Allocation
- Fixed Assets
- Human Resources

11. Name of accounting system(software) used:

12. Does your financial management system provide records that can identify the source and application of funds for award supported activities, and track expenditures by project number (Federal award) and against budgeted line items?

- Yes       No

**If no**, please explain.

13. List the names of the employees performing the following functions:

Activity	Employee (First and Last Name)
Cashier (receiving payments)	
Opening Mail	
Restrictively endorsing checks	
Preparing deposits	
Verifying daily receipts	

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Entering daily receipts	
Reconciling bank accounts	
Payroll	

14. Does the Board of Directors receive regular updates on financial status of the organization and specific Federal awards?  Yes  No

If no, explain:

15. Are the Board minutes available upon request?  Yes  No

16. Are there written procedures for:

If **yes**, provide a copy of

Inventory Controls - 45 CFR Part 75.320	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Accounting Policies - 45 CFR 75.403.400	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Purchasing guidelines - 45 CFR Part 75.327h, 45 CFR Part 75.328	<input type="checkbox"/> Yes	<input type="checkbox"/> No

17. Provide a copy of the personnel policy manual. Do you have a formal, written personnel policy that addresses:

Pay Rates and Benefits - 45 CFR Part 75.430,75.431	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Time and Attendance	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Leave	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Conflict of Interest - 45 CFR Part 75.327(c) (1)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

18. With respect to the conflict of interest provision of the contract, are there any situations which have not previously been disclosed?  Yes  No

If yes, please explain:

19. Was the organization a party to a business transaction with a family member of a current or former officer, director, trustee, or key employee?  Yes  No

20. Is there a separate bank account for payroll?  Yes  No

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21. Do you outsource your payroll?  Yes  No

Explain your payroll process:

22. Are the payroll checks signed by someone independent of the payroll clerk?

Yes  No

Who?

If not, why?

23. Provide a narrative description of your cost allocation plan.

a) How do you track and control time spent on different activities to ensure that time and efforts are billable to the funding source receiving the benefit(s)?

Describe:

b) How do you allocate labor/non-labor cost not directly associated to a program?

Describe:

c) How do you allocate your facilities costs?

Describe:

d) How do you allocate your general office expenses?

Describe:

24. Do you have a negotiated federally approved indirect cost rate?

Yes  No

**If yes**, please provide the following information:

- Name of the cognizant agency:
- Provisional rate:
- Definition of the base:

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Provide a copy of your federally approved provisional indirect cost rate agreement.

25. What is the reconciliation process for the bank accounts?

Describe:

26. What is the process for handling money/donations on-site?

Describe:

27. Who signs the checks and is there a double endorsement?

Describe:

28. Please describe the method used to support labor and benefit charges.

Describe:

29. Do you receive other sources of income to operate your program?  Yes  No

If yes, please list:

30. How is your financial audit funded (if required) pursuant to contract obligations?

Describe:

31. In your single audit, are Federal award funds paid to your agency by EHSD listed in the Schedule of Federal Awards by contract number and Assistance Listing number?

Yes  No  Not applicable

If no, please explain:

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32. Do you Cash Match/In-Kind Match for the funding?  Yes  No  
If so, what is the source of the match? (Example: volunteer hours calculated by market value)

Describe:

33. Do you use any other Federal funding source as match for this subaward?  Yes  No

Describe:

34. Do you use Contra Costa subaward funds as match for any other contract?  Yes  No

If yes, please explain:

35. Explain your asset control model. How do you track inventory purchased by the subaward funds?

Describe:

36. Describe your purchasing policy and practice. (How is a vendor selected? Bidding, small business enterprise, etc.)

Describe:

37. Explain your travel policy as related to Federal award funds.

Describe:

38. At any time, has there been a security breach including wrongful access, inspection, use or disclosure of confidential information at your agency?  Yes  No

If yes, please explain the nature of the breach and your process to mitigate:

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39. Do you subcontract any of the EHSD awarded funds?  Yes  No

If yes, what type of monitoring procedure do you conduct?

**FFATA Reporting**

As required by the Federal Accountability and Transparency Act of 2006 (FFATA), Federal agencies, and non-federal agencies receiving federal funds, are required to report to the federal government specific information associated with subrecipients of subawards (i.e., grants) over \$30,000, as well as executive compensation amounts for the five most highly compensated executives of your organization should you meet certain threshold reporting requirements as listed below.

Executive Compensation Questions (see definitions on next page)	Place an X under Yes or No	
	Yes	No
Our organization received 80 percent or more of its annual gross revenues from Federal procurement contracts (and subcontracts) and Federal financial assistance subject to the <i>Transparency Act</i> , as defined at 2 CFR 170.320 (and subawards).	<input type="checkbox"/>	<input type="checkbox"/>
Your organization received \$25,000,000 or more in annual gross revenues from federal procurement contracts (and subcontracts), and Federal financial assistance subject to the <i>Transparency Act</i> (and subawards).	<input type="checkbox"/>	<input type="checkbox"/>
The public does NOT have access to information about the compensation of the executives through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986. (To determine if the public has access to the compensation information, see the U.S. Security and Exchange Commission total compensation filings at <a href="http://www.sec.gov/answers/execomp.htm">http://www.sec.gov/answers/execomp.htm</a> ).	<input type="checkbox"/>	<input type="checkbox"/>

If you answered yes to ALL three executive compensation questions above, complete the table below:

Names of 5 Mostly Highly Compensated Executives	Compensation for Preceding Completed Fiscal Year
1)	

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Names of 5 Mostly Highly Compensated Executives	Compensation for Preceding Completed Fiscal Year
2)	
3)	
4)	
5)	

*Please write legibly, number attachments, and answer all questions on this form (soft copy is available). Please email or fax requested single audit and financial statements, and other documents provided for our review. We will contact you with any additional questions.*

I certify that the above information accurately represents the organization of which I am a representative.

\_\_\_\_\_  
Name of Person Completing Questionnaire

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

\_\_\_\_\_  
Title of Person Completing Questionnaire

\_\_\_\_\_  
**Phone** number and **email** address of Person Completing Questionnaire

I attached the following documents for your review:

- 1.
- 2.
- 3.
- 4.
- 5.

Please email to: \_\_\_\_\_@ehsd.cccounty.us

Fax number:

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Contra Costa County  
Employment and Human Services

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**APPENDIX 5: RISK ASSESSMENT MATRIX**

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**Risk Assessment Matrix - Contract Number(s):** \_\_\_\_\_ **Subrecipient Name:** \_\_\_\_\_

**How to use:** The Risk Assessment Matrix is used by fiscal analysts in conjunction with the Subrecipient Questionnaire to assess the level of risk posed by the subrecipient. After assessing the risk level in each of the categories, the fiscal analyst should determine the aggregate level of risk for the subrecipient using his/her best judgment. The fiscal analyst should consider increasing the level of risk when the information is unknown in multiple categories.

Based on my assessment, the Subrecipient's risk is assessed at (circle):                      **Low**                      **Moderate**                      **High**

Completed by: \_\_\_\_\_ (Print name and date)

Category	Low Risk	Moderate Risk	High Risk	Un- known (ex- plain)
Maturity of organization	Mature (e.g. more than 10 years)	Mature, but new to government contracts	Start-up, first year in business	
Staffing and management	Experienced staff and management; low turnover	Medium turnover	High turnover, new management team	
Aware of existing or pending litigation	No legal action against organization	Possible legal action against organization	In litigation	
Organization type	Non-profit, subject to Single Audit requirements	Non-profit – external audit	For-profit, unaudited financial statements	
Subrecipient's prior experience with the same or similar subawards	Over three years	Two to three years	One year or less	
Complexity of subaward	Provides single service to specific population	Provides multiple services to diverse populations	Makes eligibility determinations; performance impacts objectives of the federal program; recruits participants	
Approximate amount of total Federal awards funded by EHSD	Less than \$100,000	\$100,001-\$684,999	Over \$685,000	
Federal awards from agencies other than EHSD	Yes	Yes, but very few	None	
Large share of revenues from non-federal awards	Organization has multiple sources of revenue	Organization has two sources of revenue	Organization is dependent on a single source of revenue	
Audit report	Has annual audit as required by Uniform Guidance Subpart F with no open or close finding in current and prior years	Has annual third-party financial audit only or finding(s) were identified single audit, but have been corrected	Has not had annual or financial audit or finding(s) are present in current or prior year single audit	
Subrecipient identified as high Risk in Single Audit report	No	Yes, in prior year single audit only	Yes, in prior and current year single audit	
Prior Management Decision Letters	No response required	Items of concern	Corrective action required	
Accounting/Procurement Systems from Response to Subrecipient Questionnaire and Recent Audit	No internal control deficiency identified in recent audit(s) and/or Response to Subrecipient Questionnaire  Entity is mature and has a history of receiving federal awards with no evidence of recent findings	No internal control deficiency identified in recent audit(s) and/or Response to Subrecipient Questionnaire  Little information is available on entity's history with Federal awards	Internal control deficiency identified in recent audit(s) and/or Response to Subrecipient Questionnaire or entity has never been audited (review or compilation only)  Other indicators that no systems are in place or systems are new	

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Financial management system	Allows tracking award supported activities against budgeted line items	Manual tracking of award supported activities against budgeted line items	Does not allow tracking expenditures against line items	
Internal control from Response to Subrecipient Questionnaire and Recent Audit	Strong; proper separation of duties; low chance for undetected fraud	Controls vary from weak to strong depending upon function	Weak; small organization where one employee performs many duties; high chance for employee fraud	
Records security Subrecipient Questionnaire and Recent Audit	Confidential records secured and property disposed; no reported security violations	Confidential records secured; violation reported in prior years	Security breach within a year	
Funds claiming compliance	Billing frequency as agreed in the contract	Delays in billing	No billing until the end of the project. History of late billing	

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**APPENDIX 6: SUBRECIPIENT MONITORING PLAN**

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Subrecipient Monitoring Plan

The Subrecipient Monitoring Plan should follow the completion of the Risk Assessment Matrix and review of the Subrecipient Questionnaire. The Fiscal Analyst should select the Subrecipient Monitoring Plan according to the assessed level of risk and prior findings evidenced in prior year single audit(s) or monitoring results.

**For All Subrecipients:**

Analyst Name and Bureau:

Contract Number and Contractor Name:

AL and Program Name:

Subrecipient Determination Form Completed on:

Risk Assessment Completed on:

Level of Risk (Circle):

Low

Moderate

High

<b>Low Risk Subrecipient – Monitoring Plan #1</b>		<b>Frequency</b>	<b>Tool</b>	<input checked="" type="checkbox"/>
1.	Send prior year single audit certification survey to each subrecipient to determine whether subrecipient is subject to Single Audit requirements.	Annually	Single Audit Certification Survey	<input type="checkbox"/>
2.	Review Single Audit for findings and accuracy of SEFA.	Annually if subject to single audit	Single Audit Checklist	<input type="checkbox"/>
3.	Review audited financial statements to assess financial stability. Review auditor’s opinion and internal control report.	Annually if subject to single audit or audited F/S	F/S Checklist	<input type="checkbox"/>
4.	Review responses to Subrecipient Questionnaire to detect potential issues.	Annually	Subrecipient Questionnaire	<input type="checkbox"/>
5.	Review monthly financial reports (demands) for each subrecipient.	Monthly	Demands Review Guide	<input type="checkbox"/>
If not subject to Single Audit or if relevant findings are detected in subrecipient’s prior year Single Audit/monitoring:				
6.	Conduct desk review.	Annually	Desk Review Checklist	<input type="checkbox"/>

<b>Moderate Risk Subrecipient – Monitoring Plan #2</b>		<b>Frequency</b>	<b>Tool</b>	<input checked="" type="checkbox"/>
1.	Send prior year single audit certification survey to each subrecipient to determine whether subrecipient is subject to Single Audit requirements.	Annually	Single Audit Certification Survey	<input type="checkbox"/>
2.	Review Single Audit for findings and accuracy of SEFA.	Annually if subject to single audit	Single Audit Checklist	<input type="checkbox"/>
3.	Review audited financial statements to assess financial stability. Review auditor’s opinion and internal control report.	Annually if subject to single audit or audited F/S	F/S Checklist	<input type="checkbox"/>
4.	Review responses to Subrecipient Questionnaire to detect potential issues.	Annually	Subrecipient Questionnaire	<input type="checkbox"/>
5.	Review monthly financial reports (demands) for each subrecipient.	Monthly	Demands Review Guide	<input type="checkbox"/>
6.	Conduct desk review.	Annually	Desk Review Checklist	<input type="checkbox"/>
If not subject to Single Audit or if relevant findings are detected in subrecipient’s prior year Single Audit/monitoring:				
7.	Conduct monitoring on-site.	Annually	On-site Checklist	<input type="checkbox"/>

<b>High Risk Subrecipient – Monitoring Plan #3</b>		<b>Frequency</b>	<b>Tool</b>	<input checked="" type="checkbox"/>
1.	Send prior year single audit certification survey to each subrecipient to determine whether subrecipient is subject to Single Audit requirements.	Annually	Single Audit Certification Survey	<input type="checkbox"/>

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<b>High Risk Subrecipient – Monitoring Plan #3</b>		<b>Frequency</b>	<b>Tool</b>	<b>√</b>
2.	Review Single Audit for findings and accuracy of SEFA.	Annually if subject to single audit	Single Audit Checklist	<input type="checkbox"/>
3.	Review audited financial statements to assess financial stability. Review auditor's opinion and internal control report.	Annually if subject to single audit or audited F/S	F/S Checklist	<input type="checkbox"/>
4.	Review responses to Subrecipient Questionnaire to detect potential issues.	Annually	Subrecipient Questionnaire	<input type="checkbox"/>
5.	Review monthly financial reports (demands) for each subrecipient.	Monthly	Demands Review Guide	<input type="checkbox"/>
6.	Conduct monitoring on-site.	Annually	On-site Checklist	<input type="checkbox"/>

<b>CSB Delegate Subrecipient – Monitoring Plan #4</b>		<b>Frequency</b>	<b>Tool</b>	<b>√</b>
1.	Send prior year single audit certification survey to each subrecipient to determine whether subrecipient is subject to Single Audit requirements.	Annually	Single Audit Certification Survey	<input type="checkbox"/>
2.	Review Single Audit for findings and accuracy of SEFA.	Annually if subject to single audit	Single Audit Checklist	<input type="checkbox"/>
3.	Review audited financial statements to assess financial stability. Review auditor's opinion and internal control report.	Annually if subject to single audit or audited F/S	F/S Checklist	<input type="checkbox"/>
4.	Review responses to Subrecipient Questionnaire to detect potential issues.	Quarterly	Subrecipient Questionnaire	<input type="checkbox"/>
5.	Review monthly financial reports (demands) for each subrecipient.	Monthly	Demands Review Guide	<input type="checkbox"/>
6.	Conduct monitoring on-site.	Quarterly	On-site Checklist	<input type="checkbox"/>

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**APPENDIX 7: GUIDELINES TO REVIEW MONTHLY DEMANDS**

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### Guidelines to Review Subrecipient Monthly Financial Reports (demands)

This document is intended to assist *Program Analysts* and *Account Clerks* with reviewing and processing monthly financial reports (demands). The purpose of the review is to ensure that financial reports (demands) include proper documentation, support, and approvals. Requests for reimbursement should be submitted timely (monthly, quarterly) as stated in the contract.

In cases where unresolved non-compliance issues by subrecipients are detected during the fiscal monitoring or other means, the designated Fiscal staff will review the monthly demands as needed until the non-compliance issues are resolved by subrecipient.

#### Program Analyst – Bureau – Demand Review

1. Date stamps the demand when received.
2. Verifies that a valid contract is on file.
3. Review the budget for allowability, allocability and reasonableness before a contract is executed and when the budget is subsequently amended.
4. Invoice should provide additional understanding of a project's financial performance in relation to task/milestones/deliverable status
5. Invoices should go hand-in-hand with progress toward the milestones/tasks in the project SOPO.
6. Reject invoices missing or have incorrect required documentation including invoice attestation form.
7. Reject invoices with no supporting documentation
8. Checks the demand *Form D15* for completeness.
9. Do not alter/change any amount on the D15 or invoice submitted by the subrecipient/contractor. Request a corrected D15 as well as invoice from subrecipient/contractor.
10. Verifies that the work billed for was performed, and that proper documentation is attached.
11. Verifies that each cost item on the demand corresponds to the line item in the current budget<sup>2</sup>.
12. Verifies that each line item on the demand does not exceed the amount listed in the budget.
13. Verifies that each cost, when rounding, does not exceed the budgeted amount.
14. Signs and retains a copy of Form D15 with back up, prior to sending it to Fiscal Unit.

#### Account Clerk – Fiscal Unit

1. Date stamps the demand when received and log.
2. Reviews the demand for completeness.
  - a. Vendor information, completed name, address and signature
  - b. Authorizing signature (program analyst or higher)
    - i. If no authorizing signature:
      1. Returns original demand back to program analyst for needed information

<sup>2</sup> The budget is reviewed for allowability, allocability and reasonableness before the contract is executed and when the budget is subsequently amended.

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2. When the demand is received (with necessary information), another date stamp is required.
3. Verifies billing information on the demand to confirm:
  - a. Billed month falls within contract period
    - i. If not, checks to see if fiscal has received a contract amendment or renewal
    - ii. If no amendment or renewal, Account Clerk sends an email to Account Clerk Supervisor who sends an email to the Contract Unit's Clerk requesting the status on the contract renewal
  - b. Insurance covers FULL billing period (i.e. If demand is for the month of January, the Insurance Clearance must expire on or after January 31<sup>st</sup>.)
    - i. Account Clerk sends an email to the Account Clerk Supervisor, if *Insurance Clearance* does not cover the full period. Account Clerk Supervisor sends an email to Contract Unit's Clerk requesting an updated *Insurance Clearance* prints a copy of email and attaches it to the demand, as the demand cannot be processed. Places demand in *Demand Issues Folder*, waiting for insurance, etc.
4. Enters **current** month's billing information onto the Excel Spreadsheet.
  - a. For each line item in the budget verifies that expenses:
    - i. DO NOT exceed the total contract limit.
    - ii. If total exceeds contract limit, the Account Clerk (AC) will notify the Account Clerk Supervisor (ACS), because the AC or ACS cannot reduce or alter a submitted demand/invoice amount. The demand/invoice is returned to the Program/Fiscal Analyst who contacts the vendor.
    - iii. Line items are not over limit by more than 10%, if applicable, per language in the contract. If line item is over by more than 10%, a line item adjustment is required. Sends an email to the program/fiscal analyst requesting a line item adjustment.
    - iv. If a line item adjustment is needed, demands are held pending receipt/confirmation of the adjustment.
7. Encodes information onto demand:
  - a. Enters Vendor# in Vendor # box on the mid left side of the demand and top box.
  - b. Dates the demand using demand or invoice date
  - c. Writes description in the following format: mm/yy, contractor
    - i. Invoice#, if applicable, if not, data of services, mm/yy – invoices go last so A/P has it in uniform order
    - ii. Contractor's name of abbreviation
    - iii. Date services mm/yy, only of there is an invoice#
  - d. Includes Org# and Option codes from spreadsheet
    - i. If multiple Org#s and option codes, list each org on a different line. If more than three (3) lines, use TC52 Form.,
  - e. Records account number as 2310
  - f. P/C (only used if contract is encumbered). P = Partial Payment against the contract, C=Close Encumbrance (last payment only, contract is complete) – ONLY CSB

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- g. Writes payment amount.
8. Date stamp the demand when it's going to A/P and when processed, stamps "contract", records the date the demand was processed on the bottom of the demand and when it's going to A/P.
9. Scan demands with backup and save to subrecipient folder, spreadsheet is also saved to the subrecipient folder.
10. Redacts confidential information from the original demand.
11. Signs the demand.
12. Sends original demand to Account Payable-Contracts at the Auditor-Controller's office.
  13. Checks Auditor-Controller's Intranet for last payment information (<http://auditor.co.contra-costa.ca.us/>)
    - a. Select Accounts Payable
    - b. Select Vendor History
    - c. Enter P.O.# (Encumbrance # from demand)
    - d. Click box next to "include 'F' pays"
    - e. Click search
  14. Records prior month's payment information onto the EXCEL Spreadsheet maintained at \\fshare3\fiscal\Payment\Contracts\Excel\Spreadsheets
    - a. Warrant Number
    - b. Issuance Date
    - c. If new vendor, Fiscal Clerk updates vendor number on the spreadsheet and on the Contract List.

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**APPENDIX 8: DESK REVIEW GUIDE**



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**Desk Review Guide**

This desk review tool can be adapted as needed by the user. Please line out the steps rather than deleting them if they are not needed for the review you are conducting and provide a justification in the comment section. Add steps as needed based on your preliminary review prior to your desk review.

**Please complete the following section:**

<i><b>Subrecipient Name:</b></i>	
<i><b>Subaward Number:</b></i>	
<i><b>Subaward Amount:</b></i>	
<i><b>Funding Sources and AL:</b></i>	
<i><b>Analyst conducting the re-view:</b></i>	
<i><b>Subrecipient's Fiscal Of-ficer:</b></i>	

Before using this desk review tool, answer the following questions:

<b>Pre-Desk Review Activities Questions:</b>	<b>YES / NO</b>
1. Was the Annual Subrecipient/Contractor Determination checklist completed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Was the determination made that the entity is a subrecipient?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Was the Single Audit Certification sent to the Subrecipient?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Did the subrecipient indicate on Single Audit Certification form that the subrecipient entity is subject to 2 CFR 200 Part F - Single Audit Requirements?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. If the answer is yes to 5, did EHSD receive the latest subrecipient single audit and was the Single Audit Review checklist completed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Was the Annual Subrecipient Questionnaire sent to the subrecipient?	<input type="checkbox"/> Yes <input type="checkbox"/> No

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7. Were the subrecipient’s responses to the Annual Subrecipient Questionnaire and Single Audit Review Checklist used to complete the Risk Analysis Matrix?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. Was the subrecipient risk level assessed HIGH upon reviewing the risk categories listed in the Risk Assessment Matrix?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9. If the answer to 8 is no, was the subrecipient risk level assessed MODERATE and did the subrecipient had finding(s) in the previous EHSD monitoring report or finding(s) in the prior year Single Audit?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10. If the answers to 8 and 9 are no, STOP here and GO back to the subrecipient monitoring plan to verify if the subrecipient is subject to a desk review.	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Desk Review Planning Phase**

A	Steps	Completed (√). Add Comment(s) if Noncompliance is Detected or Improvements are Needed
1.	Contact program analyst before notifying subrecipient about the desk review and obtain the following information: <ul style="list-style-type: none"> <li>Date of last program review or site visit</li> <li>Copy of report if subrecipient had program findings or service concerns</li> <li>Copy of subrecipient corrective action plan and timeline</li> </ul>	
2.	Gain an understanding of the rules and regulations applicable to the subrecipient Federal subawards: <ul style="list-style-type: none"> <li>Obtain AL number and program name</li> <li>Review fiscal section of grant agreement, if applicable</li> <li>Review contract special conditions</li> <li>Review Federal Cost Principles section in 2 CFR 200, 45 CFR 75 or other applicable CFRs</li> <li>Review applicable State guidance on fiscal compliance</li> </ul>	
3.	Gain an understanding of the subrecipient fiscal conditions by reviewing the following documents:	

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A	Steps	Completed (√). Add Comment(s) if Noncompliance is Detected or Improvements are Needed
	<ul style="list-style-type: none"> <li>• Latest subrecipient Single Audit and completed Single Audit Review checklist</li> <li>• Subrecipient's responses to Annual Subrecipient Questionnaire</li> <li>• Completed Risk Assessment Matrix</li> <li>• Annual contract budget</li> <li>• Monthly Financial Reports (demands)</li> <li>• Contract Budget v. Actual by line item Report</li> <li>• Obtain and review payment history from the Auditor-Controller's Intranet site</li> </ul>	
4.	<p>Review subrecipient submitted year-to-date expenditures and determine type of costs to be reviewed during the desk review. Consider prior EHSD monitoring results, single audit findings and areas of risk identified during preliminary review in determining the selection of cost items.</p> <p>Sample at least one monthly demand based on following considerations:</p> <ul style="list-style-type: none"> <li>• Dollar amount of demand relative to total contract (subaward)</li> <li>• Determine the major cost elements by calculating the percentage to total by cost element in the subrecipient's annual contract budget</li> <li>• Major cost elements as measured by percentage to total annual contract budget (i.e. salaries, facilities and supportive services) represented on sampled demand</li> <li>• If prior monitoring or audit findings, attempt to select a demand that will allow the monitor to assess whether the corrective action plan was adequately implemented</li> </ul>	
5.	<p>Inform subrecipient of desk review and request list of items.</p> <ul style="list-style-type: none"> <li>• Prepare and mail notification letter to subrecipient with a copy to program analyst</li> <li>• Inform the subrecipient that the fiscal monitor</li> </ul>	

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A	Steps	Completed (√). Add Comment(s) if Noncompliance is Detected or Improvements are Needed
	<p>will review the responses/ statements to the Annual Subrecipient Questionnaire sent earlier during the fiscal year. Cost items claimed on the sampled monthly demand will be verified during the desk review</p> <ul style="list-style-type: none"> <li>• Attach to notification a request for items to be reviewed during desk review.</li> </ul> <p><u>General Items</u></p> <ul style="list-style-type: none"> <li>○ Cost Allocation Plan</li> <li>○ Indirect Cost Agreement, if applicable</li> <li>○ Chart of Accounts</li> <li>○ Accounting Policies/Procedures</li> <li>○ If responses to Annual Subrecipient Questionnaire were incomplete (i.e. org chart not provided) or unclear, request that the information be provided prior to conducting desk review</li> </ul> <p><u>For Monthly Sample Demand</u></p> <ul style="list-style-type: none"> <li>○ Detailed Expenditures and Revenue Transaction Ledger</li> <li>○ Check Registers</li> <li>○ Payroll Registers</li> <li>○ Time Studies/Time Sheets</li> <li>○ Invoices and purchase orders/contract</li> <li>○ Cancelled Checks or detailed bank statement showing check numbers</li> <li>○ Travel Vouchers</li> <li>○ Property Inventory Control Listing, if applicable</li> </ul> <p>Above listed items must be submitted electronically to fiscal analyst who is conducting the desk review prior to the desk review date.</p>	
6.	Review and evaluate documents received from subrecipient in response to the request. Make a list of missing documents.	

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A	Steps	Completed (√). Add Comment(s) if Noncompliance is Detected or Im- provements are Needed
7.	Tailor the desk review steps to the areas of risk identified during the review of responses to Subrecipient Questionnaire and submitted documents.	
	<b>Other Steps as Needed</b>	

**During Desk Review**

B	General Steps	Completed (√) Add Comment(s) if Noncompliance is Detected or Improvements are Needed
1.	Review written accounting procedures and pertinent policies (travel, purchasing) for the items selected under review.	
	<b>Other Steps as Needed</b>	

C	Selected Cost Item - Personnel cost	Completed (√) Add Comment(s) if Noncompliance is Detected or Improvements are Needed
1.	Select one or two employees listed on invoice and compare to org chart to ensure they are working on the programs funded by the contract being monitored.	
2.	Obtain timesheet for each employee and trace cost center code to chart of accounts. If hours worked by the selected employee are pooled, compare the cost pool allocation methodology from the subrecipient's cost allocation to how the hours were allocated to the benefiting programs. Verify that the base of allocation is reasonable and adequately supported by actual numbers.	
3.	Obtain payroll register and compare employee total salary to documented salary in the document authorizing that amount.	
4.	Compare check number on payroll register to bank statement to verify that the check cleared. If the subrecipient uses EFT, verify that the check number is on the positive pay file submitted to the bank. Then verify that the total	

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C	Selected Cost Item - Personnel cost	Completed (√) Add Comment(s) if Noncompliance is Detected or Improvements are Needed
	amount from the positive pay file cleared the bank per the bank statement.	
5.	Trace cost from payroll register to general ledger. Use time-sheet to calculate cost center hours to-total hours ratio. Apply ratio to employee salary from payroll register and compare calculated amount to amount in the general ledger for the cost center code designated for this contract. <i>This step may need to be modified depending on the Subrecipient's payroll process in place.</i> The calculated amount should match the general ledger and sampled monthly invoice.	
	<b>Other Steps as Needed per Risk Level</b>	

D	Selected Cost Item - Non-personnel cost (space)	Completed (√) Add Comment(s) if Noncompliance is Detected or Improvement are Needed
1.	Obtain total cost and square footage from lease agreement and calculate monthly rent.	
2.	Request detailed ledger disclosing rent transaction and associated documentation supporting rent cost billed on sampled monthly invoice.	
3.	Review a/p supporting documentation and verify that the correct amount of payment was made to landlord listed on lease agreement. Compare check number to bank statement to verify that the check cleared.	
4.	Determine space allocation methodology from the subrecipient's cost allocation plan.	
5.	Verify that the share of rent billed to the contract for the sampled monthly invoice was appropriately allocated in accordance with the cost allocation plan. If cost allocation plan is not provided (may result in an administrative finding), verify that the share of rent cost billed to the contract is reasonable based on a sound methodology. If methodology is not sound or adequately supported by accounting records/lease, this may result in a cost disallowance.	
	<b>Other Steps as Needed per Risk Level</b>	

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E	Selected Cost Item - Non-personnel cost (vendor/sub-recipient)	Completed (√) Add Comment(s) if Noncompliance is Detected or Improvement are Needed
1.	Request detailed ledger disclosing transaction and associated documentation supporting cost (i.e. office supplies, contracted services) billed on sampled monthly invoice. Documentation should include the following: <ul style="list-style-type: none"> <li>• Authorization to purchase (requisition, PO, etc.) with appropriate signature in accordance with organization’s signature authority.</li> <li>• For contracted services, obtain a copy of the contract to verify payment conditions.</li> <li>• Price reasonableness.</li> <li>• Indicator showing that the goods/services were received and vendor invoice.</li> </ul>	
2.	Verify that the goods/services purchased benefitted program funded by contract being monitored and that the cost is recorded in the appropriate cost center.	
3.	Compare check number to bank statement to verify that the check cleared. Verify that the check was made to the appropriate party.	
	<b>Other Steps as Needed per Risk Level</b>	

F	Selected Cost Item - Non-personnel cost (travel)	Completed (√) Add Comment(s) if Noncompliance is Detected or Improvements are Needed
1.	Request detailed ledger disclosing transaction and associated documentation supporting travel cost billed on sampled monthly invoice. Documentation should include the following: <ul style="list-style-type: none"> <li>• Authorization to travel and travel reimbursement form with appropriate signature in accordance with organization’s signature authority.</li> <li>• Travel receipts for hotel, airfare and other travel cost. If organization uses per diem, verify that the per diem does not exceed the federal per diem</li> </ul>	

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<b>F</b>	<b>Selected Cost Item - Non-personnel cost (travel)</b>	<b>Completed (√) Add Comment(s) if Noncompliance is Detected or Improvements are Needed</b>
	schedule. If per diem is higher, an additional step may be necessary to determine reasonableness of the per diem (not supported by receipt).	
2.	Verify that the cost is recorded in the appropriate cost center.	
3.	Compare check number to bank statement to verify that the check cleared. Verify that the check was made to the appropriate party.	
	<b>Other Steps as Needed per Risk Level</b>	

**Post Activities after Desk Review**

<b>G</b>	<b>Summarize Desk Review</b>	<b>Completed (√) Add Comment(s) if Noncompliance is Detected or Improvements are Needed</b>
1.	Make copies of evidence supporting findings, if any.  During the review, cross reference contract and CFR/OMB references supporting findings, if any.	
2.	Write draft monitoring report.	
3.	Provide copy of draft desk review report to Fiscal Officer or his/her designee for review.	
4.	Finalize desk review report and mail to subrecipient.	
5.	If findings are in desk review report, request corrective action plan with timetable.	
6.	Follow up with subrecipient on corrective action plan per timetable and verify during the next annual monitoring that is implemented.	
7.	File electronically desk review documents and inform Compliance Accountant of desk review outcomes.	
	<b>Other Steps as Needed per Risk Level</b>	

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**APPENDIX 9: ONSITE MONITORING GUIDE**

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**On-site Fiscal Monitoring Tool**

This monitoring tool can be adapted as needed by the user. Please line out the steps rather than deleting them if they are not needed for the review you are conducting and provide a justification in the comment section. Add steps as needed based on your preliminary review prior to your monitoring visit.

**Please complete the following section:**

<i><b>Subrecipient Name:</b></i>	
<i><b>Subaward Number:</b></i>	
<i><b>Subaward Amount:</b></i>	
<i><b>Funding Sources and AL:</b></i>	
<i><b>Analyst conducting the re- view:</b></i>	
<i><b>Subrecipient's Fiscal Of- ficer:</b></i>	

Before using this onsite monitoring tool, answer the following questions:

<b>Pre-Onsite Monitoring Activities Questions:</b>	<b>YES / NO</b>
1. Was the Annual Subrecipient/Contractor Determination checklist completed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Was the determination made that the entity is a subrecipient?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Was the Single Audit Certification sent to the Subrecipient?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Did the subrecipient indicate on Single Audit Certification form that the subrecipient entity is subject to 2 CFR 200 Part F - Single Audit Requirements?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. If the answer is yes to 4, did EHSD receive the latest subrecipient single audit and was the Single Audit Review checklist completed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Was the Annual Subrecipient Questionnaire sent to the subrecipient?	<input type="checkbox"/> Yes <input type="checkbox"/> No

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7. Were the subrecipient’s responses to the Annual Subrecipient Questionnaire and Single Audit Review Checklist used to complete the Risk Analysis Matrix?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. Was the subrecipient risk level assessed HIGH upon reviewing the risk categories listed in the Risk Assessment Matrix?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9. If the answer to 8 is no, was the subrecipient risk level assessed MODERATE and did the subrecipient had finding(s) in the previous EHSD monitoring report or finding(s) in the prior year Single Audit?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10. If the answers to 8 and 9 are no, STOP here and GO back to the subrecipient monitoring plan to verify if the subrecipient is subject to a desk review.	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Onsite Monitoring Planning Phase**

A	Steps	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
1.	<p>Contact program analyst before notifying subrecipient about the onsite monitoring review and obtain the following information:</p> <ul style="list-style-type: none"> <li>Date of last program review or site visit</li> <li>Copy of report if subrecipient had program findings or service concerns</li> <li>Copy of subrecipient corrective action plan and timeline</li> </ul>	
2.	<p>Gain an understanding of the rules and regulations applicable to the subrecipient Federal subawards:</p> <ul style="list-style-type: none"> <li>Obtain AL number and program name</li> <li>Review fiscal section of grant agreement, if applicable</li> <li>Review contract special conditions</li> <li>Review Federal Cost Principles section in 2 CFR 200, 45 CFR 75 or other applicable CFRs</li> <li>Review applicable State guidance on fiscal compliance</li> </ul>	

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A	Steps	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
3.	<p>Gain an understanding of the subrecipient fiscal conditions by reviewing the following documents:</p> <ul style="list-style-type: none"> <li>• Latest subrecipient Single Audit and completed Single Audit Review checklist</li> <li>• Subrecipient’s responses to Annual Subrecipient Questionnaire</li> <li>• Completed Risk Assessment Matrix</li> <li>• Annual contract budget</li> <li>• Monthly Financial Reports (demands)</li> <li>• Contract Budget v. Actual by line item Report</li> <li>• Obtain and review payment history from the Auditor-Controller’s Intranet site</li> </ul>	
4.	<p>Review subrecipient submitted year-to-date expenditures and determine type of costs to be reviewed during on-site visit. Consider prior EHSD monitoring results, single audit findings and areas of risk identified during preliminary review in determining the selection of cost items.</p> <p>Sample at least one monthly demand based on following considerations:</p> <ul style="list-style-type: none"> <li>• Dollar amount of demand relative to total contract (subaward)</li> <li>• Determine the major cost elements by calculating the percentage to total by cost element in the subrecipient’s annual contract budget</li> <li>• Major cost elements as measured by percentage to total annual contract budget (i.e. salaries, facilities and supportive services) represented on sampled demand</li> <li>• If prior monitoring or audit findings, attempt to select a demand that will allow the monitor to assess whether the corrective action plan was adequately implemented</li> </ul>	
5.	<p>Inform subrecipient of onsite monitoring visit and request list of items.</p>	

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A	Steps	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
	<ul style="list-style-type: none"> <li>• Prepare and mail notification letter to subrecipient with a copy to program analyst</li> <li>• Inform the subrecipient that the fiscal monitor will review the responses/ statements to the Annual Subrecipient Questionnaire sent earlier during the fiscal year. Cost items claimed on the sampled monthly demand will be verified during the onsite monitoring visit</li> <li>• Attach to notification a request for items to be reviewed before and during onsite monitoring</li> </ul> <p><u>General Items</u></p> <ul style="list-style-type: none"> <li>○ Cost Allocation Plan</li> <li>○ Indirect Cost Agreement, if applicable</li> <li>○ Chart of Accounts</li> <li>○ Personnel Manual</li> <li>○ Accounting Policies</li> <li>○ Purchasing Guidelines</li> <li>○ If responses to Annual Subrecipient Questionnaire were incomplete (i.e. org chart not provided) or unclear, request that the information be provided prior or during the onsite monitoring visit</li> </ul> <p><u>For Monthly Sample Demand</u></p> <ul style="list-style-type: none"> <li>○ Detailed Expenditures and Revenue Transaction Ledger</li> <li>○ Check Registers</li> <li>○ Payroll Registers</li> <li>○ Time Studies/Time Sheets</li> <li>○ Invoices and purchase orders/contract</li> <li>○ Cancelled Checks or detailed bank statement showing check numbers</li> <li>○ Travel Vouchers</li> <li>○ Property Inventory Control Listing</li> </ul>	

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A	Steps	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
	(PICL), if applicable. Verify if PICL information includes requirements under 45 CFR Part 75.320(d)(1).	
6.	Review and evaluate documents received from subrecipient in response to the request. Make a list of missing documents.	
7.	Prepare a list of questions for the entrance conference and on-site visit that are tailored to the areas of risk identified during the review of responses to Subrecipient Questionnaire and submitted documents.	
	<b>Conflict of Interest</b>	
8.	Review Conflict of Interest of the Subrecipient Contract General Conditions.	
9.	Verify if there is a modification of the Conflict of Interest provisions in of the Subrecipient’s Contract Special Conditions. Review the additional language if a modification is identified in the Special Conditions.	
10.	Research the applicable Code of Federal Regulations on Conflict of Interest for additional guidance - 45 CFR Part 75.327(c).	
11.	Review subrecipient’s written conflict of interest policy and verify if the policy is in alignment with the Subrecipient’s Contract General Conditions and Special Conditions, if applicable.	
	<b>Other Steps as Needed</b>	

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**During Onsite Monitoring Visit**

<b>B</b>	<b>General Steps</b>	<b>NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed</b>
1.	Conduct entrance conference. Collect sign-in sheet with list of attendees.	
2.	Meet with fiscal officer to go over contract monitoring questionnaire and submitted documents. Clarify items as needed and obtain the missing documents, if any, from the requested document list.	
3.	Ask fiscal officer to describe the process in place for the following items:	
4.	<ul style="list-style-type: none"> <li>• Preparation of monthly/quarterly invoice (demand)</li> </ul>	
5.	<ul style="list-style-type: none"> <li>• Org chart in relation to accounting functions, internal control and signature authority.</li> </ul>	
6.	<ul style="list-style-type: none"> <li>• Personnel costs billed to contract                             <ul style="list-style-type: none"> <li>○ Time sheet completion and sign off</li> <li>○ Determination of cost centers for time charges and cost allocation plan</li> <li>○ Payroll process from timesheet completion to printing/ETF to posting of payroll to ledger</li> <li>○ Employee benefits and payroll taxes</li> </ul> </li> </ul>	
7.	<ul style="list-style-type: none"> <li>• Non-personnel costs billed to contract                             <ul style="list-style-type: none"> <li>○ Accounts payable process from purchase authorization (requisition/purchase order) to processing vendor payment and issuing checks/ETF</li> <li>○ Space cost billed to contract, including lease agreement and cost allocation plan</li> <li>○ Vendor and sub-recipient agreement and issuance of payment</li> <li>○ Process for selecting vendors and sub-recipients</li> </ul> </li> </ul>	

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<b>B</b>	General Steps	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
	<ul style="list-style-type: none"> <li>○ Process for authorizing and reimbursing employee travel</li> </ul>	
8.	<ul style="list-style-type: none"> <li>● In-Kind/Cash Match reported to EHSD (only if the contract requires a match)                             <ul style="list-style-type: none"> <li>○ Valuation system for In-Kind services and donated goods</li> <li>○ Maintenance of records system for In-Kind services and donated goods</li> <li>○ Tracking system for reporting cash match</li> </ul> </li> </ul>	
9.	Obtain and review written accounting procedures for the above items and pertinent policies (travel, purchasing).	
10.	Request supporting documentation for selected items of cost from the sampled monthly/quarterly invoice (demand). Selected items of cost may vary based on result of risk assessment. See boxes below for additional details.	
<b>Conflict of Interest</b>		
11.	Perform onsite interviews on a sample basis with various management staff overseeing functions such as finance, procurement and governance.	
12.	Identify potential risk and issues using the below sample of questions.	
	<ul style="list-style-type: none"> <li>● Have any of the key executives or Board Members been associated with other organizations in the past with which you have a business relationship and, if yes, what was the nature of those organizations and relationships?</li> </ul>	
	<ul style="list-style-type: none"> <li>● Can you describe how you monitor Conflict of Interest in your organization?</li> </ul>	
	<ul style="list-style-type: none"> <li>● Have managers at all levels expressed their commitment to the policy?</li> </ul>	
	<ul style="list-style-type: none"> <li>● If you have a subrecipient under this contract, how do you monitor conflict of interest?</li> </ul>	

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<b>B</b>	General Steps	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
	<ul style="list-style-type: none"> <li>Is the policy easily accessible to everyone within the organization and to external partners/vendors?</li> </ul>	
	<ul style="list-style-type: none"> <li>Have managers and staff received adequate training in how to manage and/or report conflicts of interest?</li> </ul>	
	<ul style="list-style-type: none"> <li>Is conflict of interest policy and awareness incorporated into your recruitment, selection and procurement processes?</li> </ul>	
	<b>How to Solve Conflict of Interest</b>	
13.	Address conditions under which outside activities, relationships, or financial interests are proper or improper; (accepting gifts, disclosing confidential information, outside employment).	
14.	Outline how financial conflicts of interest may be addressed.	
15.	Identify when and how the subrecipient must provide disclosure, written notification, possible outside activities, relationships, or financial interests to EHSD.	
16.	Explain the consequences of non-disclosure may result in additional conditions and could result in suspension or debarment.	
17.	Document and demonstrate compliance efforts.	
	<b>Other Steps as Needed</b>	

<b>C</b>	Selected Cost Item - Personnel cost	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
1.	Select one or two employees listed on invoice and compare to org chart to ensure they are working on the programs funded by the contract being monitored.	

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C	Selected Cost Item - Personnel cost	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
2.	Obtain timesheet for each employee and trace cost center code to chart of accounts. If hours worked by the selected employee are pooled, compare the cost pool allocation methodology from the subrecipient's cost allocation to how the hours were allocated to the benefiting programs. Verify that the base of allocation is reasonable and adequately supported by actual numbers.	
3.	Obtain payroll register and compare employee total salary to documented salary in employee's personnel file.	
4.	Compare check number on payroll register to bank statement to verify that the check cleared. If the subrecipient uses EFT, verify that the check number is on the positive pay file submitted to the bank. Then verify that the total amount from the positive pay file cleared the bank per the bank statement.	
5.	Trace cost from payroll register to general ledger. Use timesheet to calculate cost center hours to-total hours ratio. Apply ratio to employee salary from payroll register and compare calculated amount to amount in the general ledger for the cost center code designated for this contract. <i>This step may need to be modified depending on the subrecipient's payroll process in place.</i> The calculated amount should match the general ledger and sampled monthly invoice.	
	<b>Other Steps as Needed per Risk Level</b>	

D	Selected Cost Item - Non-personnel cost (space)	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
1.	Obtain total cost and square footage from lease agreement and calculate monthly rent.	

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<b>D</b>	Selected Cost Item - Non-personnel cost (space)	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
2.	Request detailed ledger disclosing rent transaction and associated documentation supporting rent cost billed on sampled monthly invoice.	
3.	Review a/p supporting documentation and verify that the correct amount of payment was made to landlord listed on lease agreement. Compare check number to bank statement to verify that the check cleared.	
4.	Determine space allocation methodology from the subrecipient's cost allocation plan.	
5.	Verify that the share of rent billed to the contract for the sampled monthly invoice was appropriately allocated in accordance with the cost allocation plan. If cost allocation plan is not provided (may result in an administrative finding), verify that the share of rent cost billed to the contract is reasonable based on a sound methodology. If methodology is not sound or adequately supported by accounting records/lease, this may result in a cost disallowance.	
	<b>Other Steps as Needed per Risk Level</b>	

<b>E</b>	Selected Cost Item - Non-personnel cost (vendor/sub-recipient)	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
1.	Request detailed ledger disclosing transaction and associated documentation supporting cost (i.e. office supplies, contracted services) billed on sampled monthly invoice. Documentation should include the following: <ul style="list-style-type: none"> <li>• Authorization to purchase (requisition, PO, etc.) with appropriate signature in accordance with organization's signature authority.</li> </ul>	

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E	Selected Cost Item - Non-personnel cost (vendor/sub-recipient)	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
	<ul style="list-style-type: none"> <li>For contracted services, obtain a copy of the contract to verify payment conditions.</li> <li>Price reasonableness.</li> <li>Indicator showing that the goods/services were received and vendor invoice.</li> </ul>	
2.	Verify that the goods/services purchased benefitted program funded by contract being monitored and that the cost is recorded in the appropriate cost center.	
3.	Compare check number to bank statement to verify that the check cleared. Verify that the check was made to the appropriate party.	
	<b>Other Steps as Needed per Risk Level</b>	

F	Selected Cost Item - Non-personnel cost (travel)	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
1.	<p>Request detailed ledger disclosing transaction and associated documentation supporting travel cost billed on sampled monthly invoice. Documentation should include the following:</p> <ul style="list-style-type: none"> <li>Authorization to travel and travel reimbursement form with appropriate signature in accordance with organization's signature authority.</li> <li>Travel receipts for hotel, airfare and other travel cost. If organization uses per diem, verify that the per diem does not exceed the federal per diem schedule. If per diem is higher, an additional step maybe necessary to determine reasonableness of the per diem (not supported by receipt).</li> </ul>	

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F	Selected Cost Item - Non-personnel cost (travel)	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
2.	Verify that the cost is recorded in the appropriate cost center.	
3.	Compare check number to bank statement to verify that the check cleared. Verify that the check was made to the appropriate party.	
	<b>Other Steps as Needed per Risk Level</b>	

G	Exit Conference and Other Items	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
1.	Make copies of evidence supporting findings, if any.  During the review, cross reference contract and CFR/OMB references supporting findings, if any.	
2.	Conduct exit conference. Collect sign-in sheet with list of attendees.  Inform attendees of potential administrative findings and cost disallowance, if any.	
3.	Be prepared to write monitoring report.	
	<b>Other Steps as Needed per Risk Level</b>	

**Post Activities after Onsite Monitoring**

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<b>H</b>	<b>Exit Conference and Other Items</b>	<b>NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings.</b> <b>Add Comment(s) if Noncompliance is Detected or Improvements are Needed</b>	
	1. Write draft monitoring report within 10 days of the visit unless there are extenuating circumstances.		
	2. Provide copy of draft monitoring report to Fiscal Officer or his/her designee for review.		
	3. Finalize monitoring report and mail to subrecipient.		
	4. If findings are in monitoring report, request corrective action plan with timetable.		
	5. Follow up with subrecipient on corrective action plan per timetable and verify during the next annual monitoring that is implemented.		
	6. File electronically monitoring documents and inform Compliance Accountant of monitoring outcomes.		
	<b>Other Steps as Needed</b>		
	<b>Subrecipients of Federal Funding</b> <b>FFATA Reporting</b> As required by the Federal Accountability and Transparency Act of 2006 (FFATA), Federal agencies, and non-federal agencies receiving federal funds, are required to report to the federal government specific information associated with subrecipients of subawards (i.e., grants) over \$30,000, as well as executive compensation amounts for the five most highly compensated executives of your organization should you meet certain threshold reporting requirements as listed below.		
<b>Executive Compensation Questions (see definitions on next page)</b>		<b>Place an X under Yes or No</b>	
Our organization received 80 percent or more of its annual gross revenues from Federal procurement contracts (and subcontracts) and Federal financial assistance subject to the <i>Transparency Act</i> , as defined at 2 CFR 170.320 (and subawards)		Yes <input type="checkbox"/>	No <input type="checkbox"/>

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Executive Compensation Questions (see definitions on next page)		Place an X under Yes or No	
Your organization received \$25,000,000 or more in annual gross revenues from federal procurement contracts (and subcontracts), and Federal financial assistance subject to the Transparency Act (and subawards).		Yes <input type="checkbox"/>	No <input type="checkbox"/>
The public does NOT have access to information about the compensation of the executives through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986. (To determine if the public has access to the compensation information, see the U.S. Security and Exchange Commission total compensation filings at <a href="http://www.sec.gov/answers/execomp.htm">http://www.sec.gov/answers/execomp.htm</a> .)		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If you answered yes to ALL three executive compensation questions above, complete the table below:			
Names of 5 Mostly High Compensated Executives		Compensation for Preceding Completed Fiscal Year	
1)			
2)			
3)			
4)			
5)			

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**APPENDIX 10: FEDERAL AWARD PAYMENT TEMPLATE**



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**[Sample  
Only one letter per Subrecipient  
Use AL Worksheet to complete the table]**  
Date

Address:

Dear (Name of Fiscal Contact):

This letter provides information to be included in the Schedule of Federal Awards (SEFA) for \_\_\_\_\_ fiscal year.  
Pass through from Contra Costa County:

Title	Contract Number	AL Number	Federal Funds Spent

Please verify this information and contact \_\_\_\_\_ if there are discrepancies. She/he can be reached at tel. \_\_\_\_\_ or email \_\_\_\_\_

Sincerely,

Name  
Fiscal Officer  
Tel.  
Email.

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Contra Costa County  
Employment and Human Services

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**APPENDIX 11: SINGLE AUDIT CERTIFICATION**

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Fiscal Unit

Date: \_\_\_\_\_ Contract Number(s): \_\_\_\_\_  
To: \_\_\_\_\_ Period of Performance: \_\_\_\_\_  
Attn: \_\_\_\_\_

Re: Single Audit Requirement Certification for EHSD Contract(s) Fiscal Year

**Subject: Title 2: Code of Federal Regulations Part 200, Subpart F – Single Audit Requirements**

Your organization is subject to the Single Audit provisions of 2 CFR 200 Part F if it has expended \$750,000 or more in Federal awards during the fiscal year, unless the entity is classified as a for-profit corporation. We have determined the contract number(s) listed above was/were funded with one or more Federal awards and are asking that you provide Contra Costa County with the following information.

Please check the appropriate box and provide required documents by

- We have completed our Single Audit for the most recent period \_\_\_\_\_ to \_\_\_\_\_. The audit disclosed no material instances of noncompliance with federal laws or regulations or reportable conditions specifically related to the award(s) from EHSD. **Enclosed is a copy of the audit report package.**
- We have completed our Single Audit for the most recent period \_\_\_\_\_ to \_\_\_\_\_. The audit report noted material noncompliance issues and/or reportable conditions. **Enclosed is a copy of the audit report package and the corrective action plan.**
- We have not yet completed our Single Audit for the period \_\_\_\_\_ to \_\_\_\_\_. We expect the audit to be completed on \_\_\_\_\_. Within thirty (30) days of completion, we will send you either written notification or a copy of the audit report package.
- We are not subject to the audit requirements of Subpart F because
  - We expended less than \$750,000 in total Federal awards during the fiscal year for EHSD contracts and non-EHSD funding entities
  - We are a For Profit Organization
  - Other (Explain) \_\_\_\_\_

Our Fiscal year end is: \_\_\_\_\_ *(Please provide this information so that we can update your record.)*

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I certify that the foregoing statements accurately represent the organization of which I am a representative. Further, I certify that all relevant material findings contained in the audit report, if completed, have been disclosed.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Name (Print): \_\_\_\_\_ Phone \_\_\_\_\_

Email: \_\_\_\_\_

Thank you for your assistance in complying with this federal mandate. If you have questions, please feel free to contact me. My contact information is provided below. Please send the completed form back to me via email (preferred) or USPS.

Office Phone:

Email:

Mailing address: EHSD, Fiscal Unit  
40 Douglas Drive  
Martinez, CA 94553  
Fax: (925) 313-1757

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Employment and Human Services

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APPENDIX 12

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**APPENDIX 12: AUDIT REVIEW CHECKLIST**

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**Contra Costa County**

Employment & Human Services Department  
AUDIT REVIEW CHECKLIST

Auditee Name: \_\_\_\_\_ Fiscal Year End: \_\_\_\_\_  
 Contract Number: \_\_\_\_\_  
 Reviewer: \_\_\_\_\_  
 Date Reviewed: \_\_\_\_\_

**Instructions:**

For single audit (includes audit of financial statements), complete all parts of this document.  
For financial statements audit only (subrecipient not subject to \$750,000 threshold), complete Part I, the financial statements section of Part II and Part III of this document.

**PART I: General**

- Audit is a:
    - Financial Statements Audit (subrecipient not subject to \$750,000 threshold)
    - Single Audit (includes audit of financial statements)
    - Program Specific Audit
  - Auditee's fiscal period end date: \_\_\_\_\_
  - Audit Firm Name: \_\_\_\_\_
  - Total Federal Subaward/Award Expended for Fiscal Year: \$ \_\_\_\_\_
  - Number of programs in which Federal funds were expended: \_\_\_\_\_
- \*Note that a Single Audit is required if Federal funds expended equal or exceed \$750,000 for fiscal years beginning on or after January 1, 2015).*
- Audit was conducted according to:  GAAS  GAGAS
  - If no audit was required by 2 CFR §200.501(a), how was the audit paid for? \_\_\_\_\_  
 or  N/A

**PART II: Audit Component Checklist**

**The following is a key for the Component Checklist**

- \* = Required (cannot be blank or 'N/A').
- \*\* = Required if prior audit findings exist.

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\*\*\* = Required if findings exist.

Note: These codes do not apply to a program specific audit.

**Financial Statements Section:**

<u>Page Number</u>	<u>Component</u>
_____	* Financial Statements
_____	* Independent Opinion on Financial Statements
_____	* Report on Internal Control over Financial Reporting
_____	* Report on Compliance
_____	* Management Discussion and Analysis
_____	* Balance Sheet Statement
_____	* Income Statement
_____	* Statement of Cash Flow
_____	* Notes to the Financial Statements

**Compliance Over Federal Programs Section (ONLY IF ENTITY SUBJECT TO SINGLE AUDIT):**

<u>Page Number</u>	<u>Component</u>
_____	* Schedule of expenditures of Federal Awards
_____	* Independent Opinion or Disclaimer of Opinion on Schedule of Federal Awards
_____	* Report on Internal Control (major programs)
_____	* Report on Compliance (major programs)
_____	* Schedule of Findings and Questioned Costs
_____	** Summary Schedule of Prior Audit Findings
_____	*** Corrective Action Plan (if findings)
_____	Management Letter (if applicable)

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**PART III: FINANCIAL STATEMENTS**

1. Type of audit report issued on financial statements:

Mark either:

- Unmodified Opinion  
 Qualified opinion  
 Adverse opinion  
 Disclaimer of opinion

2. Is a "going concern" emphasis-of-matter paragraph included in the audit report?  Yes  No

3. Is a significant deficiency disclosed?  Yes  No

4. Is a material weakness disclosed?  Yes  No

5. Is a material noncompliance disclosed?  Yes  No

6. Opinion Letter is signed by the CPA:  Yes  No

7. Calculate liquidity ratio (current assets/current liabilities) \_\_\_\_\_. Is the entity able to pay off its short-term liabilities with its current assets?  Yes  No

8. Calculate the debt ratio (total liabilities/total assets) \_\_\_\_\_. Is the entity highly dependent on leverage (debt) to finance its operations?  Yes  No

9. Does the entity have significant operating lease obligation(s) disclosed in the note to the financial statements?  Yes  No if yes, calculate operating lease/total assets ratio: \_\_\_\_\_.

10. Does the Contingency note to the financial statements reveal a contingent liability such as an income/payroll tax dispute with a government agency that could potentially lead the entity to owe a substantial amount tax penalties and interest?  Yes  No

If yes, please explain:

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11. Is there a Subsequent Event reported in the notes to the financial statements?  Yes  No

If yes, please explain:

12. Does the Significant Accounting Policies note to the financial statements reveal any concerns regarding the entity's ability to meet the financial management federal requirements outlined in the 2 CFR 200 and 45 CFR 75?

Yes  No

If yes, please explain:

**PART IV: FEDERAL PROGRAMS**

1. Was the audit submitted timely to Federal Audit Clearinghouse?  Yes  No

If no, please explain:

*Note: Audits are to be completed within 9 months of the end of the subrecipient's audit period*

2. Does the SEFA include EHSD as a pass-through entity, the contract number(s), AL(s) and Federal Subaward(s):  Yes  No

3. Did the auditee qualify as a low-risk auditee?  Yes  No

4. Did the auditee have prior or current year audit findings in Federal programs funded by other entities than EHSD?  Yes  No

5. Is a material weakness(es) disclosed in internal control over major Federal programs?

6. Is a significant deficiency(ies) disclosed in internal control over major Federal programs?

7. Type of audit report issued on compliance for major programs:

Mark either:

- Unmodified Opinion  
 Qualified opinion  
 Adverse opinion  
 Disclaimer of opinion

8. Were Prior Audit Findings related to direct funding shown in the Summary Schedule of Prior Audit Findings?  Yes  No  N/A if entity had no prior audit findings in previous years

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9. Does the audit include a summary schedule of prior audit findings with corrective action plan?  
 Yes  No  N/A if entity had no prior audit findings in previous  
years

10. Does the audit include current year audit findings with a corrective action plan?  Yes   
No

11. If prior or current year audit findings are present, check compliance requirement(s) that apply to  
audit findings:

- Activities Allowed or Unallowed
- Allowable costs/cost principles
- Cash management
- Davis-Bacon Act
- Eligibility
- Equipment and real property management
- Matching, level of effort, earmarking
- Period of availability of Federal funds
- Procurement and suspension and debarment
- Program income
- Real property acquisition and relocation assistance
- Reporting
- Subrecipient monitoring
- Special tests and provisions
- Other

12. Do any of the prior or current year audit findings reveal questioned costs?  Yes  No

If yes, how much? \_\_\_\_\_ If finding directly related to EHSD, did the entity repay EHSD?  
\_\_\_\_\_

If questioned costs exist and entity has not repaid EHSD, follow 2 CFR 200.xxx to proceed with  
issuing a management decision letter.

13. Do any of the prior or current year audit findings reveal significant instances of abuse such as  
fraud?  Yes  No

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**APPENDIX 13: MANAGEMENT DECISION TEMPLATE**

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[Sample

**Audit Transmittal Letter** (for Comment Purposes)

Send this letter to request additional information]

Date

Address:

Re: **(Auditee)** Audit Report Number

Dated:

Period:

Dear (Name of Fiscal Contact):

Employment of Human and Services Department (EHSD) has examined the results of the Single Audit of the **(Sub-recipient)**, issued by **(Name of Firm)**, dated \_\_\_\_\_, for the year ended June 30, 20XX.

The audit report on pages \_\_\_\_\_ cites questioned costs of \$\_\_\_\_\_ and on pages \_\_\_\_\_ cites \_\_\_\_\_ administrative findings. At this time, EHSD is extending to **(Name of Subrecipient)** 30 days from receipt of this letter to submit comments and/or documentation relative to the above questioned costs and administrative findings.

At the conclusion of the 30-day response period, an Initial Findings and Determination will be issued by this office.

Should you have any questions regarding this report, please contact \_\_\_\_\_ at \_\_\_\_\_.

Sincerely,

Name

Fiscal Officer

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Contra Costa County  
Employment and Human Services

Issued/Revised 05-10-2023  
Distribution: 1,4,10,31,41,51,70

1028

DEPARTMENTAL FISCAL  
POLICY

APPENDIX 13

REPLACES: 07-08-2022

SECTION: 25-130  
PAGE NO.: 100  
ISSUED/REVISED: 01-01-03

FISCAL MONITORING  
OF SUBRECIPIENT

SECTION: 25-130  
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[Sample

**Initial Determination Transmittal Letter**

Send after Audit Transmittal Letter]

Date

Address:

Dear Mr. /Ms.:

This is in reference to the audit of **(name of program)** operated by the **(Auditee)**. The Audit report contains **(select)**:

- Questioned costs and administrative findings
- Administrative findings but no questioned costs
- Questioned costs in the amount of \$ \_\_\_\_\_

Enclosed is my Initial Determination on the audit findings summarized as follows:

Audit Report Number: (if applicable)

Audit Period:

Amount Questioned:

Amount Allowed:

Amount Disallowed:

Number of Administrative Findings:

Number of Uncorrected Administrative Findings:

The enclosed Initial Determination explains the reasons for the determinations to **(select as appropriate)**:

- Allow or disallow costs
- Require administrative corrective action
- Allow or disallow costs and require administrative corrective actions

This notification provides **(Auditee)** with the opportunity to resolve the audit findings informally with the Employment and Human Services Department (EHSD) within \_\_\_ days from the date this letter and Initial Determination. A Final Determination will be issued upon expiration of the \_\_\_ day informal resolution period.

If you wish to begin informal resolution discussions, please contact \_\_\_\_\_ of my staff at **(Telephone number)** immediately upon receipt of this letter.

Sincerely,

Name  
Fiscal Officer

[Enclose "Sample Management Decision Attachment"]

DMCL #23-17

Contra Costa County  
Employment and Human Services

Issued/Revised 05-10-2023  
Distribution: 1,4,10,31,41,51,70

REPLACES: 07-08-2022

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[Sample

**Sample Management Decision Attachment**

Findings and Determination Format. Attach to “**Initial Determination Transmittal Letter**”  
(May be used as attachment for both Initial and Final Determinations)]

Date

Subject: Initial (Final) Determination

References: (Name of Subrecipient) Audit

Audit Number:

Audit Period Amount:

Questioned Amount:

Allowed Amount:

Disallowed Amount:

Amount Subject to Debt Collection (for Final Determination only):

Number of Administrative Findings:

Introduction: This is the Initial Determination on the resolution of (select):

- Questioned costs and administrative findings
- Administrative findings
- Questioned costs

Recommendations pertained to the EHSD programs are contained in the above referenced audit. These programs are administered by the (**Subrecipient**). The audit was performed by (**Audit Firm**) pursuant to the provision of Title 2 Code of Federal Regulations §200.501 (Audit Requirements) and issued on (**Date**).

The audit report (**select**):

- Questioned \$ \_\_\_ costs
- Identified \_\_\_ administrative/procedural weakness(es)
- Questioned \$ \_\_\_ in cost and identified \_\_\_ administrative/procedural weakness(es).

The (Subrecipient’s) response to the audit report was taken into consideration in the preparation of this (**Initial/Final**) determination.

**Finding Number**

(**Format/Content**) The order of findings should correspond to the order in the audit report with administrative findings listed first and questioned costs findings listed second. Findings contain the following:

- Amount and nature of the questioned cost and nature of the administrative finding
- Citation of appropriate regulation, circular, issuance, or agreements that were violated
- Appropriate explanatory information, including any subrecipient’s attempt to support cost or administrative deficiencies

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**Determination**

**(Format/Content)** The determination should include:

- Basis upon which the auditee's response was accepted or rejected
- Precise statement as to whether questioned costs are allowed or disallowed (if appropriate)
- Precise statement as to whether or not the finding (administrative) is corrected.

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APPENDIX 14

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**APPENDIX 14: CORRECTIVE ACTION LETTER TEMPLATE**



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APPENDIX 14

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EFFECTIVE: 05-10-2023

[Sample  
Final Determination Transmittal Letter  
**Disallowed Costs and Uncorrected Administrative Findings]**

Date

Reference: Initial Determination Dated:

Address of Subrecipient:

Dear Ms./Mr.:

This is in reference to the recent Initial Determination on the audit of the Employment and Human Service Department (EHSD) program subcontracted to [name of Subrecipient]. The Initial Determination was issued on the date referenced above.

The audit report contains questioned costs and administrative findings. Enclosed is my Final Determination on the audit findings summarized as follows:

Audit Report Number:  
Audit Period:  
Amount Questioned:  
Amount Allowed:  
Amount Disallowed:  
Amount Subject to Debt Collection:  
Number of Administrative Findings:  
Number of Uncorrected Administrative Findings:

(Add the following bolded sections if costs have been disallowed)

**The Final Determination, which is based on all the information available as of the date of this letter, establishes a debt owed to the \_\_\_\_\_ in the amount of \$ \_\_\_\_\_. You are hereby requested to pay this amount by sending a cashier's check, drawn on non-Federal funds and payable to the \_\_\_\_\_, to:**

**(Name and Address)**

**In accordance with the (policy affecting debts – look up) interest on this debt shall accrue from the date of this letter. Interest shall be charged at the (look up) rate prevailing on that date. If the debt is paid before it becomes delinquent, which is (look up) days after the date of this letter, interest shall be waived.**

**Failure to honor this demand for repayment will result in collection actions being taken pursuant to (look up). Delinquent debts that remain outstanding will, in some cases, jeopardize your eligibility for receipt of Federal funds and become the basis for recommending enforced collection through litigation by the State \_\_\_\_\_.**

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Employment and Human Services

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Corrective action is required to address the administrative findings. Uncorrected administrative findings are tracked until effective corrective action is implemented or other resolution occurs which meets the approval of the EHSD. Your agency should address the remaining uncorrected issues by developing and implementing the corrective actions needed. Periodic progress reports to EHSD are due on the first of each month until all findings are corrected.

In accordance with 2 CFR 200.521, your agency may initiate an administrative appeal of by filing a written request for hearing with the EHSD within 10 working days of receipt of this Final Determination. The request should state your agency's reasons for disputing the determinations.

A copy of the **Final Determination** should accompany your request for a hearing and should state specifically those sections of the determination upon which a hearing is requested. Copies of the request for an administrative appeal should be provided to this office.

In the event that no administrative hearing is timely requested, the debt herein established becomes a civil claim of the State of (Awarding Entity). However, in the event that such a hearing is requested and granted, debt collection actions will be suspended, and no interest or other sanctions will be charged or imposed. If, however, the case is dismissed because the appeal request was untimely, interest will be charged retroactively as though an appeal had never been requested.

Copies of the Final Determination are being provided to .

Sincerely,

Name  
Fiscal Officer

*[Attach Final Determination]*

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EFFECTIVE: 05-10-2023

[Sample  
Final Determination Transmittal Letter  
**Uncorrected Administrative Findings**]

Date

Reference: Initial Determination Dated:

Address of Subrecipient:

Dear Ms. /Mr.:

This is in reference to the recent Initial Determination on the audit of the Employment and Human Service Department (EHSD) program subcontracted to [name of Subrecipient]. The Initial Determination was issued on the date referenced above.

The audit report contains administrative findings. No costs were questioned. Enclosed is my Final Determination on the audit findings summarized as follows:

Audit Report Number:

Audit Period:

Questioned Costs: none

Number of Administrative Findings:

Number of Uncorrected Administrative Findings:

Corrective action is required to address the administrative findings. Uncorrected administrative findings are tracked until effective corrective action is implemented or other resolution occurs which meets the approval of the EHSD.

Your (Agency)(Organization) should address the remaining uncorrected issues by developing and implementing the corrective actions needed. Progress reports to EHSD are due on the first of each month until all findings are corrected.

In accordance with 2 CFR 200.521, your agency may initiate an administrative appeal of EHSD related issues by filing a written request for a hearing with the \_\_\_\_\_ within \_\_\_ working days of receipt of this Final Determination. The request should state your agency's reasons for disputing the determinations.

This Final Determination is subject to review and concurrence by the EHSD. Copies of the request for administrative appeal should be provided to this office and to \_\_\_\_\_

Sincerely,

Name  
Fiscal Officer

[Attach Final Determination]

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[Sample

**Sample Management Decision Attachment**

Findings and Determination Format. Attach to **“Final Determination Letters.”**

(May be used as attachment for both Initial and Final Determinations)]

Date

Subject: Initial (Final) Determination

References: (Name of Subrecipient) Audit

Audit Number:

Audit Period Amount:

Questioned Amount:

Allowed Amount:

Disallowed Amount:

Amount Subject to Debt Collection (for Final Determination only):

Number of Administrative Findings:

Introduction: This is the Initial Determination on the resolution of (select):

- Questioned costs and administrative findings
- Administrative findings
- Questioned costs

Recommendations pertained to the EHSD programs are contained in the above referenced audit. These programs are administered by the (**Subrecipient**). The audit was performed by (**Audit Firm**) pursuant to the provision of Title 2 Code of Federal Regulations §200.501 (Audit Requirements) and issued on (**Date**).

The audit report (**select**):

- Questioned \$ \_\_\_ costs
- Identified \_\_\_ administrative/procedural weakness(es)
- Questioned \$ \_\_\_ in cost and identified \_\_\_ administrative/procedural weakness(es).

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nal**) determination.

**Finding Number**

(**Format/Content**) The order of findings should correspond to the order in the audit report with administrative findings listed first and questioned costs findings listed second. Findings contain the following:

- Amount and nature of the questioned cost and nature of the administrative finding
- Citation of appropriate regulation, circular, issuance, or agreements that were violated

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- Appropriate explanatory information, including any subrecipient's attempt to support cost or administrative deficiencies

**Determination**

**(Format/Content)** The determination should include:

- Basis upon which the auditee's response was accepted or rejected
- Precise statement as to whether questioned costs are allowed or disallowed (if appropriate)
- Precise statement as to whether or not the finding (administrative) is corrected

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**APPENDIX 15: COMMUNITY SERVICE BUREAU – SELF-MONITORING TOOLS**

REPLACES: 07-08-2022

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## EHSD

### Community Service Bureau - Self-Monitoring Monitoring and Implementing Fiscal Infrastructure

#### INTRODUCTION

As a recipient of federal and state awards, EHSD is responsible for establishing a self-monitoring policy per 45 CFR Part 75.303(c). Initial monitoring will take place quarterly and semi-annually thereafter. Compliance assessments will be conducted to ensure:

- Compliance with statutory requirements
- Review of internal checks/controls
- Review of financial documents
- Review of business practices, processes and policies

#### **45 CFR Part 75.303 Internal controls.**

The non-Federal entity must:

- (a) Establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations, and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government,” issued by the Comptroller General of the United States or the “Internal Control Integrated Framework,” issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).
- (b) Comply with Federal statutes, regulations, and the terms and conditions of the Federal awards.
- (c) Evaluate and **monitor** the non-Federal entity's compliance with statutes, regulations and the terms and conditions of Federal awards.

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(d) Take prompt action when instances of noncompliance are identified including noncompliance identified in audit findings.

(e) Take reasonable measures to safeguard protected personally identifiable information and other information the HHS awarding agency or pass-through entity designates as sensitive or the non-Federal entity considers sensitive consistent with applicable Federal, state, local, and tribal laws regarding privacy and obligations of confidentiality.

**EHSD's self-monitoring will adhere to the following Head Start regulation:**

**Head Start Performance Standard - 1302.102(b) Achieving program goals.**

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

- (i) Collect and use data to inform this process;
- (ii) Correct quality and compliance issues immediately, or as quickly as possible;
- (iii) Work with the governing body and the policy council to address issues during the ongoing oversight and correction process and during federal oversight; and,
- (iv) Implement procedures that prevent recurrence of previous quality and compliance issues, including previously identified deficiencies, safety incidents, and audit findings.

**EHSD Monitoring Process**

Potential control weaknesses, policy or procedural violations, other areas of concern will be identified and discussed with EHSD management. Throughout the self-monitoring, any observations, identified issues and associated risks are discussed with management. The Fiscal Compliance Accountant will present management with their findings and recommendations.

A Compliance Assessment of EHSD's programs will be prepared. EHSD's Fiscal Compliance Unit will conduct the assessment. In accordance with the requirements of the Fiscal Compliance

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Accountant's area of responsibility – Monitoring and Detection of noncompliance with fiscal requirements for internal and county policies, funding agency regulations and requirements, adherence to GAAP, proper use of negotiable items, appropriateness of claimed costs versus audited or documented costs, and the impact and validity of cost.

The monitoring activities must include at least:

1. Reviewing financial reports prepared by EHSD. Review <https://www.ecfr.gov/current/title-45/subtitle-A/subchapter-A/part-75/subpart-D/subject-group-ECFR911e5e1a30bfcb/section-75.305>
2. Following-up and ensuring that the recipient takes timely and appropriate action on all deficiencies pertaining to the Federal award provided to the recipient from program sponsors through audits, on-site reviews, and other means.
3. Issuing a report of review findings pertaining to the Federal award provided to the recipient.
4. Depending upon the FCA assessment of risk posed by the recipient, the following monitoring tools may be useful for EHSD to ensure proper accountability of the Federal award:
5. Providing recipients with training and technical assistance on fiscal-related matters;
6. Performing on-site reviews or desk review of the recipient's fiscal operations.

At least quarterly, other areas, like administrative cost, non-federal share (NFS), cost allocation and required reporting should be reviewed. Ensure all required reports are being done when due and are accurate and submitted to the appropriate agencies/entities like the Payment Management System (PMS), Board and Policy Council.

### **Checklist to Review Budgeted Costs for Allowability, Allocability and Reasonableness**

This Checklist is intended to assist the Fiscal Compliance Accountant with reviewing the recipient budget and making a determination on whether budgeted costs are allowable, allocable and reasonable to operate the program per 45 CFR Part 75.407. **See Appendix 16 for EHSD's Process for Charging of Costs to Head Start.**

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Grant Number:			
Program Name:			
Date:		Prepared By:	

**References:**

- Title 2 - Code of Federal Regulations, Part 200, *Grants and Agreements*;
- Title 45 - Code of Federal Regulations, *Public Welfare*;
- Title 29 - Code of Federal Regulations, *Labor*;
- Federal Acquisition Regulations (FAR) Part 31, *Cost Principles and Procedures for Commercial Entities*; • Federal Acquisition Regulations (FAR) Part 48, *Cost Accounting Standards for Commercial Entities*; and
- Other applicable Title(s) as indicated in grant agreement(s).

We strongly encourage the reader to review the applicability and exceptions sections found in 2 CFR 200.101 and 2 CFR 200.102 when making a determination on the applicability of the various CFR rules.

Determination Factors	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
1. Are the budgeted costs necessary and reasonable?		
2. Are the budgeted costs allocable to the Federal award?		
3. Are the budgeted costs allowable to the Federal award? Provide me with samples of budgeted costs and the supporting documentation. Explain how allowability was determined.		
4. Was there a cost allocation plan or description of the cost allocation methodology submitted if common costs such as rent are allocated to the Federal?		
5. If a cost allocation plan or description of the cost allocation methodology was submitted, is the methodology to distribute common cost reasonable?		
6. If there is a budgeted indirect cost rate: <ul style="list-style-type: none"> <li>a. Was a Federally approved indirect rate submitted?</li> <li>b. Did the entity include an indirect cost using the de minimis rate?</li> </ul>		

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7. Was sufficient information provided to determine whether costs are correctly allocated to each budget category (for example: Personnel cost vs Participant cost)?		
8. Do line items add up correctly?		
9. Were budget calculations verified for accuracy?		
10. Is there a budget narrative included?		

Comments:

**INTERNAL CONTROL QUESTIONNAIRE**

40. Which method of accounting do you use?

- Accrual
- Modified Accrual
- Cash

41. Electronic modules and journals used in Accounting System:

- General ledger
- Cash receipt journal
- Cash disbursement journal
- Payroll register
- Timesheet
- A/R ledger
- A/P ledger

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- Cost Allocation
- Fixed Assets
- Human Resources

42. Name of accounting system(software) used:

43. Does your financial management system provide records that can identify the source and application of funds for award supported activities, and track expenditures by project number (Federal award) and against budgeted line items?

- Yes     No

**If no**, please explain.

44. List the names of the employees performing the following functions:

Activity	Employee (First and Last Name)
Cashier (receiving payments)	
Opening Mail	
Restrictively endorsing checks	
Preparing deposits	
Verifying daily receipts	
Entering daily receipts	
Reconciling bank accounts	
Payroll	

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Activity	Employee (First and Last Name)
RFI/RFP	
Contractor's Qualification/Scoring/Contract Award	
Demand/Invoice Review	
Demand/Invoice Approval	
Desk Review	
Monitoring	

45. Is EHSD management provided with regular updates on financial status of the organization and specific Federal awards?  Yes  No

If no, explain:

46. Are the copies of the updates provided available upon request?  Yes  No

47. Are there written procedures for:  
If yes, provide a copy of

Inventory Controls - 45 CFR Part 75.320	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<ul style="list-style-type: none"> <li>Provide me with a copy of your inventory listing to verify assets are recorded per 45 CFR Part 75.320.</li> <li>Are annual SF-428 submitted to ACF? Provide me with a copy of the last report submitted.</li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<ul style="list-style-type: none"> <li>How often are physical inventory done?</li> <li>Verify physical inventories are per 45 CFR Part 75.320.</li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Accounting Policies - 45 CFR 75.403.400	<input type="checkbox"/> Yes	<input type="checkbox"/> No

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Purchasing guidelines - 45 CFR Part 75.327h, 45 CFR Part 75.328	<input type="checkbox"/> Yes	<input type="checkbox"/> No
---	------------------------------	-----------------------------

48. Provide a copy of the personnel policy manual. Do you have a formal, written personnel policy that addresses:

Pay Rates and Benefits - 45 CFR Part 75.430,75.431	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Provide me with the last two months leave accrual and usage report. Is there a written policy on payment in lieu of vacation? Please provide a copy.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Time and Attendance	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Leave	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Conflict of Interest - 45 CFR Part 75.327(c) (1)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

49. With respect to the conflict of interest provision of the contract, are there any situations, which have not previously been disclosed?  Yes  No

If yes, please explain:

50. Was the organization a party to a business transaction with a family member of a current or former officer, director, trustee, or key employee?  Yes  No

51. Is there a separate bank account for payroll?  Yes  No

52. Do you outsource your payroll?  Yes  No

Explain your payroll process:

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53. Are the payroll checks signed by someone independent of the payroll clerk?  Yes  No

Who?

If not, why?

54. Provide a narrative description of your cost allocation plan.

e) How do you track and control time spent on different activities to ensure that time and efforts are billable to the funding source receiving the benefit(s)?

Describe:

f) How do you allocate labor/non-labor cost not directly associated to a program?

Describe:

g) How do you allocate your facilities costs?

Describe:

h) How do you allocate your general office expenses?

Describe:

55. Do you have a negotiated federally approved indirect cost rate?

Yes  No

If yes, please provide the following information:

- Name of the cognizant agency:
- Provisional rate:

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- Definition of the base:

Provide a copy of your federally approved provisional indirect cost rate agreement.

56. What is the reconciliation process for the bank accounts?

Describe:

57. What is the process for handling money/donations on-site?

Describe:

58. Who signs the checks and is there a double endorsement?

Describe:

59. Please describe the method used to support labor and benefit charges.

Describe:

60. Do you receive other sources of income to operate your program?  Yes  No

If yes, please list:

61. How is your financial audit funded (if required) pursuant to contract obligations?

Describe:

62. In your Single Audit, are Federal award funds paid to EHSD listed in the Schedule of Federal Awards by contract number and Assistance Listing number?

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Yes  No  Not applicable

If no, please explain:

63. Do you Cash Match/In-Kind Match for the funding?  Yes  No  
If so, what is the source of the match? (Example: volunteer hours calculated by market value)

Describe:

64. Do you use any other Federal funding source as match for this award?  Yes  No

Describe:

65. Do you use EHSD's other award funds as match for any other contract?  Yes  No

If yes, please explain:

66. Explain your asset control model. How do you track inventory purchased by the award funds?

Describe:

67. Describe your purchasing policy and practice. (How is a vendor selected? Bidding, small business enterprise, etc.)

Describe:

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68. Explain your travel policy as related to Federal award funds.

Describe:

69. At any time, has there been a security breach including wrongful access, inspection, use or disclosure of confidential information at your agency?  Yes  No

If yes, please explain the nature of the breach and your process to mitigate:

70. Do you subcontract any of the EHSD awarded funds?  Yes  No

If yes, what type of monitoring procedure do you conduct?

71. What is the reconciliation process for the grant award? Please walk me through the process and provide me with the most recent reconciliation.

Describe:

Comments

Monitoring Plan

Demand/Invoice Review

The purpose of the review is to ensure that financial reports (demands) include proper documentation, support, cost are allowable, unallowable costs are not charged to Head Start, accrued liabilities are supported, and have the necessary level of approvals, program and fiscal.

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In cases where unresolved non-compliance issues by recipients are detected during the fiscal monitoring or other means, the Fiscal Compliance Accountant will review the monthly demand as needed until recipient resolves the non-compliance issues.

**Internal Control Review** - 45 CFR Part 75.320 - EHSD controls financial management risks with effective internal controls. EHSD policies and procedures control the access and use of financial resources.

**Contracts Review** – RFI/RFPs and contracts are reviewed for vendor’s qualification and adherence to Head Start – 45 CFR Part 75.327(h) General procurement standards and 45 CFR Part 75.328 Competition.

Verify Special conditions reference applicable Code of Regulations specific to Head Start.

Concerns/Areas of Non-Compliance

**Personnel** – Compensation and benefits review – 45 CFR Part 75.430 and 45 CFR Part 75.431

Concerns/Areas of Non-Compliance

**Quarterly report review** – Expenditure reports

Concerns/Areas of Non-Compliance

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**Budget review** – Budgeted award vs Actual and Projections through the award date

Concerns/Areas of Non-Compliance

**Conflict of interest policy** - 45 CFR Part 75.327(c)(1) in its entirety in the Delegate's Contract Special Conditions and Department's Policies

Concerns/Areas of Non-Compliance

**Capital Asset Inventory** - 45 CFR Part 75.320

Concerns/Areas of Non-Compliance

EHSD's financial management system provides for effective control over and accountability for all funds, property, and other assets.

The grantee complies with application, prior approval, and reporting requirements for facilities

Concerns/Areas of Non-Compliance

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**COMMENTS**

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APPENDIX 16: EHSD PROCESS FOR CHARGING COSTS TO HEAD START

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I. GENERAL:

This Section sets forth the Employment and Human Services Department (EHSD) procedures for charging of costs to Head Start Federal Awards.

Employment and Human Services Department (EHSD) charges costs that are reasonable, allowable, and allocable to a federal award directly or indirectly. All unallowable costs shall be appropriately segregated from allowable costs in the general ledger in order to assure that unallowable costs are not charged to federal awards.

II. REFERENCE:

- 45 CFR Part 75 Subpart E, Cost Principles
- 45 CFR Part 75.421 – 476
- 45 CFR Part 75.407
- 45 CFR Part 75.402 – 407 Basic Considerations
- 45 CFR Part 75.413(a)
- 45 CFR Part 75.320
- SF-428-A Tangible Personal Property Report
- SF-428-C Disposition Report/Request

III. POLICY:

A. **Segregating Unallowable from Allowable Costs**

The following steps shall be taken to identify and segregate costs that are allowable and unallowable with respect to each federal award:

1. The budget and grant or contract for each award shall be reviewed for costs specifically allowable or unallowable.
2. Fiscal personnel shall be familiar with the allowability of costs provisions of 45 CFR Part 75 Subpart E, Cost Principles particularly:

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- a. The list of specifically unallowable costs found in 45 CFR Part 75.421 – 476, Selected Items of Cost, such as alcoholic beverages, bad debts, contributions, fines and penalties, lobbying, etc.
- b. Those costs requiring advance approval from federal agencies in order to be allowable in accordance with 45 CFR Part 75.407, Prior Written Approval, such as participant support costs, equipment purchases, etc.
3. No costs shall be charged directly to any federal award until the cost has been determined to be allowable under the terms of the award and/or 45 CFR Part 75 Subpart E, Cost Principles.
4. For each federal award, an appropriate set of general ledger accounts (or account segments) shall be established in the chart of accounts to reflect the categories of allowable costs identified in the award or the award budget.
5. All items of miscellaneous income or credits, including the subsequent write-offs of uncashed checks, rebates, refunds, and similar items, shall be reflected for grant accounting purposes as reductions in allowable expenditures if the credit relates to charges that were originally charged to a federal award or to activity associated with a federal award. The reduction in expenditures shall be reflected in the year in which the credit is received (i.e., if the purchase that results in the credit took place in a prior period, the prior period shall not be amended for the credit).

**B. Criteria for Allowability**

All costs must meet the following criteria from 45 CFR Part 75.402 – 407, Basic Considerations, in order to be treated as allowable direct or indirect costs under a federal award:

1. The cost must be “reasonable” for the performance of the award, considering the following factors:
  - a. Whether the cost is of a type that is generally considered as being necessary for the operation of EHSD or the performance of the award.
  - b. Restraints imposed by such factors as generally accepted sound business practices, arm’s length bargaining, federal and state laws and regulations, and the terms and conditions of the award.

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- c. Whether the individuals concerned acted with prudence in the circumstances.
  - d. Consistency with established policies and procedures of Contra Costa County, deviations from which could unjustifiably increase the costs of the award.
2. The cost must be “allocable” to an award by meeting one of the following criteria:
    - a. The cost is incurred specifically for a federal award,
    - b. The cost benefits both the federal award and other work and can be distributed in reasonable proportion to the benefits received, or
    - c. The cost is necessary to the overall operation of EHSD, except where a direct relationship to any particular program or group of programs cannot be demonstrated.
  3. The cost must conform to any limitations or exclusions of 45 CFR Part 75 Subpart E, Cost Principles, or the federal award itself.
  4. Treatment of costs must be consistent with policies and procedures that apply to both federally financed activities and other activities of EHSD.
  5. Costs must be consistently treated over time.
  6. The cost must be determined in accordance with generally accepted accounting principles (GAAP).
  7. Costs may not be included as a cost of any other federally financed program in the current or prior periods.
  8. The cost must be adequately documented.

**C. Direct Costs**

Direct costs are those costs that can be identified specifically with a particular final cost objective, such as a Federal Award, or other internally or externally funded activity, or

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that can be directly assigned to such activities relatively easily with a high degree of accuracy EHSD identifies and charges these costs exclusively to each award or program. (45 CFR Part 75.413(a))

Each Demand shall be coded with the appropriate account number reflecting which program received direct benefit from the expenditure. Demands are approved by the appropriate project director, reviewed by Fiscal and approved by the Head Start Accountant or DFO, or CFO for payment issuance.

Time sheets are also submitted on a regular basis, reflecting employees' work and which programs directly benefited from their effort. Time sheets shall serve as the basis for charging salaries directly to federal awards and nonfederal functions.

Equipment purchased for exclusive use on a federal award and reimbursed by a federal agency shall be accounted for as a direct cost of that award (i.e., such equipment shall not be capitalized and depreciated for grant purposes, but will be capitalized and depreciated at year-end for financial statement purposes).

#### **D. Indirect Cost Rate**

EHSD maintains an annual indirect cost budget. Each year a new indirect cost budget is prepared and submitted to Head Start cognizant agency for approval. The approved indirect cost rate is used when determining the overhead applied to each federal award and major function. EHSD's process for developing and submitting its indirect cost proposal is:

1. Completion of the Indirect Cost Proposal (ICP) checklist.
2. Preparation of Indirect Cost Rate Proposal Reconciliation to prior year audit report.

The Indirect Cost Proposal with the required supporting information must be submitted to the Department of Health & Human Services Division of Cost Allocation Western Field Office within six months of fiscal year-end.

#### **E. Description of Inventory**

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EHSD maintains an inventory of materials used for administration, and programs. Examples of such items include, but are not limited to:

- Computers, Laptops, and related technology
- Portable Buildings
- Vans
- Furniture
- Equipment

**F. Accounting for Inventory**

EHSD records the purchase of capital equipment per Head Start regulations in 45 CFR 75 Part 75.320(d)(1).

***Management requirements.*** Procedures for managing equipment (including replacement equipment), whether acquired in whole or in part under a Federal award, until disposition takes place will, as a minimum, meet the following requirements:

(1) Property records must be maintained that include a description of the property, a serial number or other identification number, the source of funding for the property (including the FAIN), who holds title, the acquisition date, and cost of the property, percentage of Federal participation in the project costs for the Federal award under which the property was acquired, the location, use and condition of the property, and any ultimate disposition data including the date of disposal and sale price of the property.

(2) A physical inventory of the property must be taken and the results reconciled with the property records at least once every two years.

(3) A control system must be developed to ensure adequate safeguards to prevent loss, damage, or theft of the property. Any loss, damage, or theft must be investigated.

EHSD accounts for purchased inventory items at cost, using the FIFO method of valuation. Unit cost shall be computed by adding freight, insurance and other shipping costs to the actual cost of purchased inventory, dividing this total amount by the number of units purchased.

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### **G. Physical Counts**

A physical count of inventory will be performed at least every two years. Any inventory items that appear damaged, obsolete or otherwise unable to be sold shall be excluded from the counts. A detailed record of the physical count shall be kept by the individuals involved in taking the inventory.

At the conclusion of the physical count, the inventory control log shall be extended by applying the most recent unit costs to the physical quantities of each item on hand. Form SF-428-A Tangible Personal Property Report will be submitted annually to Head Start and include the inventory control log. Any requests for asset disposition will be submitted on Form SF-428-C Disposition Report/Request. Upon approval by ACF, balances shall be adjusted to reflect the total inventory on hand as determined by the physical count.

### **H. PROPERTY AND EQUIPMENT**

#### **Capitalization Policy**

Physical assets acquired with unit costs in excess of \$5,000 are capitalized as property and equipment in EHSD's financial statements. Items with unit costs below this threshold shall be expensed in the year purchased.

If an awarding agency requires a lower amount for equipment, EHSD will adhere to that dollar amount only for that program or contract.

Capitalized property and equipment additions are accounted for at their historical cost and all such assets, except land, are subject to depreciation over their estimated useful lives, as described later.

Capitalized assets will be reported as expensed for grants if they were so budgeted in the grant application. However, for EHSD financial statements, these assets will be capitalized and depreciated according to these policies.

#### **Equipment Purchased with Federal Funds (45 CFR Part 75.320)**

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EHSD may occasionally purchase equipment and furniture that will be used exclusively on a program funded by a federal agency. In addition to those policies on Asset Management described earlier, equipment and furniture charged to federal awards will be subject to certain additional policies as described below.

For purposes of federal award accounting and administration, "equipment" shall include all assets with a unit cost equal to the lesser of \$5,000 or the capitalization threshold utilized by EHSD, described under Asset Management.

All purchases of "equipment" with federal funds shall be approved, in advance and in writing, by the federal awarding agency. In addition, the following policies shall apply regarding equipment purchased and charged to federal awards:

1. Adequate insurance coverage will be maintained with respect to equipment and furniture charged to federal awards.
2. For equipment (or residual inventories of supplies) with a remaining per unit fair market value of \$5,000 or less at the conclusion of the award, EHSD shall retain the equipment without any requirement for notifying the federal agency.
3. If the remaining per unit fair market value is \$5,000 or more, EHSD shall gain a written understanding with the federal agency regarding disposition of the equipment. This understanding may involve returning the equipment to the federal agency, keeping the equipment and compensating the federal agency, or selling the equipment and remitting the proceeds, less allowable selling costs, to the federal agency. (*45 CFR Part 75.320(e)*)
4. The Program grant manager shall determine whether a specific award with a federal agency includes additional equipment requirements or thresholds and requirements that differ from those described above.
5. A physical inventory of all equipment purchased with federal funds shall be performed at least once every two years. The results of the physical inventory shall be reconciled to the accounting records of and federal reports filed by EHSD.

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**Establishment and Maintenance of a Fixed Asset Listing**

All capitalized property and equipment shall be recorded in a property log. This log shall include the following information with respect to each asset:

1. Date of acquisition
2. Cost
3. Description (including color, model, and serial number or other identification number)
4. Source of the equipment, including the federal award number, if applicable
5. Whether the title vests in CAP or the federal government
6. Information to calculate the federal share of the cost of the equipment, if applicable
7. Location, use, and condition
8. Depreciation method
9. Estimated useful life
10. Ultimate disposition data including the date of disposal and sale price

A physical inventory of all assets capitalized under the preceding policies will be taken on every two years. This physical inventory shall be reconciled to the property log and adjustments made as necessary. All adjustments resulting from this reconciliation will be approved by the CFO of the Fiscal Department.

**Receipt of Newly-Purchased Equipment**

At the time of arrival, all purchased equipment and furniture shall be examined for obvious physical damage. If an asset appears damaged or is not in working order, it shall be returned to the contractor immediately.

In addition, descriptions and quantities of assets per the packing slip or bill of lading shall be compared to the assets delivered. Discrepancies should be resolved with the contractor immediately.

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**Depreciation and Useful Lives**

All capitalized assets are maintained in the special property and equipment account group and are not included as an operating expense. Property and equipment are depreciated over their estimated useful lives using the straight-line method.

In the year of acquisition, depreciation is recorded based on the number of months the asset is in service, counting the month of acquisition as a full month (Example: an asset purchased on the 15<sup>th</sup> day of the fifth month shall have eight full months of depreciation (eight-twelfths of one year) recorded for that year.)

Estimated useful lives of capitalized assets shall be determined by the head of the Fiscal Department in conjunction with the department or employee that shall utilize the asset. The following is a list of the estimated useful lives of each category of fixed asset for depreciation purposes:

Automobiles	5 years
Furniture and fixtures	Up to 10 years
General office equipment	5 years
Computer hardware and peripherals	3–5 years
Computer software	2–3 years
Leased assets	Life of lease
Leasehold improvements	Remaining lease term

For accounting and interim financial reporting purposes, depreciation expense will be recorded on an annual basis.

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**APPENDIX 17: EHSD DELEGATE ONSITE MONITORING TOOL**



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**Delegate Onsite Monitoring Tool**

This monitoring tool can be adapted as needed by the user. Please line out the steps rather than deleting them if they are not needed for the review you are conducting and provide a justification in the comment section. Add steps as needed based on your preliminary review prior to your monitoring visit.

**Please complete the following section:**

<b>Subrecipient Name:</b>		
<b>Subaward Number:</b>		
<b>Subaward Amount:</b>		
<b>Funding Sources and AL No.:</b>		
<b>Analyst conducting the review:</b>		<b>Date:</b>
<b>Subrecipient's Fiscal Officer:</b>		

Before using this onsite monitoring tool, answer the following questions:

<b>Pre-Onsite Monitoring Activities Questions:</b>	<b>YES / NO</b>
1. Was the Annual Subrecipient/Contractor Determination checklist completed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Was the determination made that the entity is a subrecipient?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Was the Single Audit Certification sent to the Subrecipient?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Did the subrecipient indicate on Single Audit Certification form that the subrecipient entity is subject to 45 CFR 75 Subpart F - Single Audit Requirements?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. If the answer is yes to 4, did EHSD receive the latest subrecipient single audit and was the Single Audit Review checklist completed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Was the Annual Subrecipient Questionnaire sent to the subrecipient?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. Were the subrecipient's responses to the Annual Subrecipient Questionnaire and Single Audit Review Checklist used to complete the Risk Analysis Matrix?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. Was the subrecipient risk level assessed HIGH upon reviewing the risk categories listed in the Risk Assessment Matrix?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9. If the answer to 8 is no, was the subrecipient risk level assessed MODERATE and did the subrecipient have finding(s) in the previous EHSD monitoring report or finding(s) in the prior year Single Audit?	<input type="checkbox"/> Yes <input type="checkbox"/> No

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Pre-Onsite Monitoring Activities Questions:	YES/NO
10. Regardless of the answers to 8 and 9, the subrecipient is subject to quarterly onsite monitoring. See monitoring Plan #4.	<input type="checkbox"/> Yes <input type="checkbox"/> No

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### Onsite Review Planning Phase

A	Steps	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
1.	<p>Contact program analyst before notifying subrecipient about the onsite monitoring review and obtain the following information:</p> <ul style="list-style-type: none"> <li>• Date of last program review or site visit</li> <li>• Copy of report if subrecipient had program findings or service concerns</li> <li>• Copy of subrecipient corrective action plan and timeline</li> </ul>	
2.	<p>Gain an understanding of the rules and regulations applicable to the subrecipient Federal subawards:</p> <ul style="list-style-type: none"> <li>• Obtain AL number and program name</li> <li>• Obtain UEI number</li> <li>• Review fiscal section of grant agreement, if applicable</li> <li>• Review contract special conditions</li> <li>• Review Federal Cost Principles section in 2 CFR 200, 45 CFR 75 or other applicable CFRs</li> <li>• Review applicable State guidance on fiscal compliance</li> </ul>	
3.	<p>Gain an understanding of the subrecipient fiscal conditions by reviewing the following documents:</p> <ul style="list-style-type: none"> <li>• Latest subrecipient Single Audit and completed Single Audit Review checklist</li> <li>• Subrecipient's responses to Annual Subrecipient Questionnaire</li> <li>• Completed Risk Assessment Matrix</li> <li>• Annual contract budget</li> <li>• Monthly Financial Reports (demands)</li> <li>• Contract Budget v. Actual by line item Report</li> <li>• Obtain and review payment history from the Auditor-Controller's Intranet site</li> </ul>	

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A	Steps	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
4.	<p>Review subrecipient submitted monthly and year-to-date expenditures and determine type of costs to be reviewed during on-site visit. Consider prior EHSD monitoring results, single audit findings and areas of risk identified during preliminary review in determining the selection of cost items.</p> <p>Sample at least one monthly demand based on following considerations:</p> <ul style="list-style-type: none"> <li>• Dollar amount of demand relative to total contract (subaward)</li> <li>• Determine the major cost elements by calculating the percentage to total by cost element in the subrecipient's annual contract budget</li> <li>• Major cost elements as measured by percentage to total annual contract budget (i.e. salaries, facilities and supportive services) represented on sampled demand</li> <li>• If prior monitoring or audit findings, attempt to select a demand that will allow the monitor to assess whether the corrective action plan was adequately implemented</li> </ul>	
5.	<p>Inform subrecipient of onsite monitoring visit and request list of items.</p> <ul style="list-style-type: none"> <li>• Prepare and mail notification letter to subrecipient with a copy to program analyst</li> <li>• Inform the subrecipient that the fiscal monitor will review the responses/ statements to the Annual Subrecipient Questionnaire sent earlier during the fiscal year. Cost items claimed on the sampled monthly demand will be verified during the onsite monitoring visit for allowability, allocability and reasonableness</li> <li>• Attach to notification a request for items to be re-</li> </ul>	

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A	Steps	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
	<p>viewed before and during onsite monitoring General Items</p> <ul style="list-style-type: none"> <li>o Cost Allocation Plan</li> <li>o Indirect Cost Agreement, if applicable</li> <li>o Chart of Accounts</li> <li>o Personnel Manual</li> <li>o Accounting Policies</li> <li>o Purchasing Guidelines</li> <li>o If responses to Annual Subrecipient Questionnaire were incomplete (i.e. org chart not provided) or unclear, request that the information be provided prior or during the onsite monitoring visit</li> </ul>	
	<p><u>For Monthly Sample Demand</u></p> <ul style="list-style-type: none"> <li>o Detailed Expenditures and Revenue Transaction Ledger</li> <li>o Check Registers</li> <li>o Payroll Registers</li> <li>o Time Studies/Time Sheets</li> <li>o Invoices and purchase orders/contract</li> <li>o Cancelled Checks or detailed bank statement showing check numbers</li> <li>o Travel Vouchers</li> <li>o Property Inventory Control Listing, if applicable</li> </ul>	

A	Steps	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
6.	Review and evaluate documents received from subrecipient in response to the request. Make a list of missing documents.	
7.	Prepare a list of questions for the entrance conference and	

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A	Steps	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
	on-site visit that are <b>tailored to the areas of risk</b> identified during the review of responses to Subrecipient Questionnaire and submitted documents.	
	<b>Conflict of Interest</b>	
8.	Review Conflict of Interest in the Subrecipient Contract General Conditions.	
9.	Verify if there is a modification of the Conflict of Interest provisions in the Subrecipient Contract Special Conditions Section. Review the additional language for compliance with 45 CFR Part 75.327(c) in its entirety.	
10.	Research the applicable Code of Federal Regulations on Conflict of Interest for additional guidance.	
11.	Review subrecipient's conflict of interest policy and verify if the policy is in alignment with the Subrecipient Contract General Conditions and Special Conditions, if applicable.	
	<b>Other Steps as Needed</b>	

**FFATA Reporting**

As required by the Federal Accountability and Transparency Act of 2006 (FFATA), Federal agencies, and non-federal agencies receiving federal funds, are required to report to the federal government specific information associated with subrecipients of subawards (i.e., grants) over \$30,000, as well as executive compensation amounts for the five most highly compensated executives of your organization should you meet certain threshold reporting requirements as listed below.

Executive Compensation Questions (see definitions on next page)	Place an X under Yes or No	
Our organization received 80 percent or more of its annual gross revenues from Federal procurement contracts (and subcontracts) and Federal financial assistance subject to the <i>Transparency Act</i> , as defined at 2 CFR 170.320 (and subawards)	Yes <input type="checkbox"/>	No <input type="checkbox"/>

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	Yes	No
Your organization received \$25,000,000 or more in annual gross revenues from federal procurement contracts (and subcontracts), and Federal financial assistance subject to the Transparency Act (and subawards).	<input type="checkbox"/>	<input type="checkbox"/>
The public does NOT have access to information about the compensation of the executives through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986. (To determine if the public has access to the compensation information, see the U.S. Security and Exchange Commission total compensation filings at <a href="http://www.sec.gov/answers/excomp.htm">http://www.sec.gov/answers/excomp.htm</a> .)	Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>
If you answered yes to ALL three executive compensation questions above, complete the table below:		
Names of 5 Mostly High Compensated Executives	Compensation for Preceding Completed Fiscal Year	
1)		
2)		
3)		
4)		
5)		

**During Onsite Review Visit**

	<b>Standard Questions of Head Start funded programs to ensure the seven (7) Findings under Internal Control are not repeated.</b>	<b>NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed</b>
	Does the subrecipient have policies and procedures on internal controls?	
	Does the subrecipient follow the policies and procedures on internal controls? (45 CFR Part 75.303)	

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	<b>Standard Questions of Head Start funded programs to ensure the seven (7) Findings under Internal Control are not repeated.</b>	<b>NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed</b>
	<input type="checkbox"/> <b>1<sup>st</sup> Finding - Accruals not supported by documentation at year end.</b> <ul style="list-style-type: none"> <li>• Are subrecipient accruals supported by documentation, allowable and charged to the correct budget year?</li> </ul> <input type="checkbox"/> <b>2<sup>nd</sup> Finding – Charging HS for insurance costs belonging on other programs.</b> <ul style="list-style-type: none"> <li>• Are all costs charged to Head Start and EHS applicable only to Head Start and EHS and no other programs?</li> <li>• Are there any journal entries indicating transfer of costs out of Head Start to Other programs?</li> </ul> <input type="checkbox"/> <b>3<sup>rd</sup>. Finding – conflict of Interest</b> <ul style="list-style-type: none"> <li>• Have contracts awarded by subrecipient been reviewed for conflict of interest?</li> </ul> <input type="checkbox"/> <b>4<sup>th</sup> Finding – Qualified Contractor</b> <ul style="list-style-type: none"> <li>• Does the subrecipient ensure contractors are qualified and not debarred?</li> </ul> <input type="checkbox"/> <b>5<sup>th</sup> Finding – Compensation:</b> <ul style="list-style-type: none"> <li>• Are employees paid according to approved Payroll and Personnel records and consistent with HR policies and procedures?</li> </ul> <input type="checkbox"/> <b>6<sup>th</sup> Finding – Vacation Accruals</b> <ul style="list-style-type: none"> <li>• Are employees paid only up to the agency approved vacation rollover threshold?</li> </ul> <input type="checkbox"/> <b>7<sup>th</sup> Fixed Assets</b>	

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	<b>Standard Questions of Head Start funded programs to ensure the seven (7) Findings under Internal Control are not repeated.</b>	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
	<ul style="list-style-type: none"> <li>• Does the subrecipient ensure they follow 45 CFR Part 75.320 and have an updated inventory list?</li> </ul>	

B	General Steps	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
1.	Conduct entrance conference. Collect sign-in sheet with list of attendees.	
2.	Meet with fiscal officer to go over contract monitoring questionnaire and submitted documents. Clarify items as needed and obtain the missing documents, if any, from the requested document list.	
3.	<p>Ask fiscal officer to describe the process in place for the following items:</p> <ul style="list-style-type: none"> <li>• Preparation of monthly/quarterly invoice (demand)</li> <li>• Org chart in relation to accounting functions, internal control and signature authority</li> <li>• Personnel costs billed to contract               <ul style="list-style-type: none"> <li>○ Time sheet completion and sign off</li> <li>○ Determination of cost centers for time charges and cost allocation plan</li> <li>○ Payroll process from timesheet completion to printing/ETF to posting of payroll to ledger</li> <li>○ Employee benefits and payroll taxes</li> </ul> </li> </ul>	

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B	General Steps	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
4.	<ul style="list-style-type: none"> <li>• Non-personnel costs billed to contract                             <ul style="list-style-type: none"> <li>○ Accounts payable process from purchase authorization (requisition/purchase order) to processing vendor payment and issuing checks/ETF</li> <li>○ Space cost billed to contract, including lease agreement and cost allocation plan</li> <li>○ Vendor and sub-recipient agreement and issuance of payment</li> <li>○ Process for selecting vendors and sub-recipients</li> <li>○ Process for authorizing and reimbursing employee travel</li> </ul> </li> </ul>	
5.	<ul style="list-style-type: none"> <li>• In-Kind/Cash Match reported to EHSD (only if the contract requires a match)                             <ul style="list-style-type: none"> <li>○ Valuation system for In-Kind services and donated goods</li> <li>○ Maintenance of records system for In-Kind services and donated goods</li> <li>○ Tracking system for reporting cash match</li> </ul> </li> </ul>	
6.	Obtain and review written accounting procedures for the above items and pertinent policies (travel, purchasing).	
7.	Request supporting documentation for selected items of cost from the sampled monthly/quarterly invoice (demand). Selected items of cost may vary based on result of risk assessment. See boxes below for additional details.	
	<b>Conflict of Interest</b>	
8.	Perform onsite interviews on a sample basis with various management staff overseeing functions such as finance, procurement and governance.	
9.	Identify potential risk and issues using the below sample of questions.	

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B	General Steps	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
	<ul style="list-style-type: none"> <li>Have any of the key executives or Board Members been associated with other organizations in the past with which you have a business relationship and, if yes, what was the nature of those organizations and relationships?</li> </ul>	
	<ul style="list-style-type: none"> <li>Can you describe how you monitor Conflict of Interest in your organization?</li> </ul>	
	<ul style="list-style-type: none"> <li>Have managers at all levels expressed their commitment to the policy?</li> </ul>	
	<ul style="list-style-type: none"> <li>If you have a subrecipient under this contract, how do you monitor conflict of interest?</li> </ul>	
	<ul style="list-style-type: none"> <li>Is the policy easily accessible to everyone within the organization and to external partners/vendors?</li> </ul>	
	<ul style="list-style-type: none"> <li>Have managers and staff received adequate training in how to manage and/or report conflicts of interest?</li> </ul>	
	<ul style="list-style-type: none"> <li>Is conflict of interest policy and awareness incorporated into your recruitment, selection and procurement processes?</li> </ul>	
	<b>How to Solve Conflict of Interest</b>	
10.	Address conditions under which outside activities, relationships, or financial interests are proper or improper; (accepting gifts, disclosing confidential information, outside employment).	
11.	Outline how financial conflicts of interest may be addressed.	
12.	Identify when and how the subrecipient must provide disclosure, written notification, possible outside activities, relationships, or financial interests to EHSD.	

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B	General Steps	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
13.	Explain the consequences of non-disclosure may result in additional conditions and could result in suspension or debarment.	
14.	Document and demonstrate compliance efforts.	
	<b>Other Steps as Needed</b>	

C	Selected Cost Item - Personnel cost	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
1.	Select one or two employees listed on invoice and compare to org chart to ensure they are working on the programs funded by the contract being monitored.	
2.	Obtain timesheet for each employee and trace cost center code to chart of accounts. If hours worked by the selected employee are pooled, compare the cost pool allocation methodology from the subrecipient's cost allocation to how the hours were allocated to the benefiting programs. Verify that the base of allocation is reasonable and adequately supported by actual numbers.	
3.	Obtain payroll register and compare employee total salary to documented salary in employee's personnel file.	
4.	Compare check number on payroll register to bank statement to verify that the check cleared. If the subrecipient uses EFT, verify that the check number is on the positive pay file submitted to the bank. Then verify that the total amount from the positive pay file cleared the bank per the bank statement.	

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5.	Trace cost from payroll register to general ledger. Use time-sheet to calculate cost center hours to-total hours ratio. Apply ratio to employee salary from payroll register and compare calculated amount to amount in the general ledger for the cost center code designated for this contract. This step may need to be modified depending on the sub-recipient's payroll process in place. The calculated amount should match the general ledger and sampled monthly invoice.	
	<b>Other Steps as Needed per Risk Level</b>	

D	Selected Cost Item - Non-personnel cost (space)	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
1.	Obtain total cost and square footage from lease agreement and calculate monthly rent.	
2.	Request detailed ledger disclosing rent transaction and associated documentation supporting rent cost billed on sampled monthly invoice.	
3.	Review A/P supporting documentation and verify that the correct amount of payment was made to landlord listed on lease agreement. Compare check number to bank statement to verify that the check cleared.	
4.	Determine space allocation methodology from the sub-recipient's cost allocation plan.	
5.	Verify that the share of rent billed to the contract for the sampled monthly invoice was appropriately allocated in accordance with the cost allocation plan. If cost allocation plan is not provided (may result in an administrative finding), verify that the share of rent cost billed to the contract is reasonable based on a sound methodology. If methodology is not sound or adequately supported by accounting records/lease, this may result in a cost disallowance.	
	<b>Other Steps as Needed per Risk Level</b>	

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D	Selected Cost Item - Non-personnel cost (space)	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed

E	Selected Cost Item - Non-personnel cost (vendor/sub-recipient)	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
1.	<p>Request detailed ledger disclosing transaction and associated documentation supporting cost (i.e. office supplies, contracted services) billed on sampled monthly invoice. Documentation should include the following:</p> <ul style="list-style-type: none"> <li>• Authorization to purchase (requisition, PO, etc.) with appropriate signature in accordance with organization’s signature authority.</li> <li>• For contracted services, obtain a copy of the contract to verify payment conditions.</li> <li>• Price reasonableness.</li> </ul>	

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	<ul style="list-style-type: none"> <li>Indicator showing that the goods/services were received and vendor invoice.</li> </ul>	
2.	Verify that the goods/services purchased benefitted program funded by contract being monitored and that the cost is recorded in the appropriate cost center.	
3.	Compare check number to bank statement to verify that the check cleared. Verify that the check was made to the appropriate party.	
	<b>Other Steps as Needed per Risk Level</b>	

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F	Selected Cost Item - Non-personnel cost (travel)	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
1.	<p>Request detailed ledger disclosing transaction and associated documentation supporting travel cost billed on sampled monthly invoice. Documentation should include the following:</p> <ul style="list-style-type: none"> <li>• Authorization to travel and travel reimbursement form with appropriate signature in accordance with organization's signature authority.</li> <li>• Travel receipts for hotel, airfare and other travel cost. If organization uses per diem, verify that the per diem does not exceed the federal per diem schedule. If per diem is higher, an additional step maybe necessary to determine reasonableness of the per diem (not supported by receipt).</li> </ul>	
2.	Verify that the cost is recorded in the appropriate cost center.	
3.	Compare check number to bank statement to verify that the check cleared. Verify that the check was made to the appropriate party.	
<b>Other Steps as Needed per Risk Level</b>		

G	Exit Conference and Other Items	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
1.	<p>Make copies of evidence supporting findings, if any.</p> <p>During the review, cross reference contract and CFR/OMB references supporting findings, if any.</p>	
2.	<p>Conduct exit conference. Collect sign-in sheet with list of attendees.</p> <p>Inform attendees of potential administrative findings and cost disallowance, if any.</p>	
3.	Be prepared to write monitoring report.	
<b>Other Steps as Needed per Risk Level</b>		

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<b>G</b>	Exit Conference and Other Items	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed

### Post Activities after Onsite Review

<b>H</b>	Exit Conference and Other Items	NOTE: Document what was asked, response, list documents reviewed and state findings or results/conclusion if no findings. Add Comment(s) if Noncompliance is Detected or Improvements are Needed
1.	Write draft monitoring report within 10 days of the visit unless there are extenuating circumstances	
2.	Provide copy of draft monitoring report to Fiscal Officer or his/her designee for review.	
3.	Finalize monitoring report and mail to subrecipient.	
4.	If findings are in monitoring report, request corrective action plan with timetable.	
5.	Follow up with subrecipient on corrective action plan per timetable and verify during the next annual monitoring that is implemented.	
6.	File electronically monitoring documents and inform Compliance Accountant of monitoring outcomes.	
	<b>Other Steps as Needed per Risk Level</b>	

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Contra Costa County  
Employment & Human Services Department  
Community Services Bureau  
**Cost Allocation Plan**

Most childcare program costs are allocated based on **funded slots**. Program slots (including partnerships) are placed on a grid by funding source.

**COLLABORATION BETWEEN CHILD DEVELOPMENT & HEAD START/EARLY HEAD START**

Eligible children in certain classrooms are enrolled in both Head Start, Early Head Start, Early Head Start Child Care Partnership and Child Development programs. This partnership serves to:

1. Enhance existing services
2. Increase the number of Full-Day Full-Year days funded in State Pre-School

The collaboration between these programs requires a method of sharing program costs that is both equitable and approved by both funding sources. At Contra Costa County, accounting for these program slots has evolved into two fiscal models:

**Comprehensive Services Model** (State/Head Start and Early Head Start Programs)

CCTR & CSPP (Full-day) are full-day, full-year programs. Head Start and Early Head Start provide an “umbrella” of additional services, including comprehensive services, additional training resources, additional staff and/or resources,. In this model, all site and classroom costs are charged to Child Development program. All cost of comprehensive services applicable to Head Start are charged to Head Start. Comprehensive services include but not limited to health, mental health, family services, etc.

**Cost Allocation Model (Extended Services to Full Day ) (State Pre-School Programs, Part-Day)**

Eligible children are enrolled in both the Head Start and Child Development programs in order to allow an increase in the number of full-day full-year slots funded. Costs are allocated between Head Start and Child Development based on the **service hours** provided by each program.

Under both models, costs of Comprehensive Services such as Mental Health, Family Services and certain facilities, equipment and non-consumable supplies are not allocated but are charged as direct costs to the Head Start and Early Head Start Grants.

Certain one time costs like renovation, building improvement, purchase of major equipment, etc. are charged to Head Start with prior approval from ACF.

**ALLOCATED COSTS**

**Site Costs:**

Contra Costa County  
Employment & Human Services Department  
Community Services Bureau  
**Cost Allocation Plan**

Site Supervisors, building occupancy charges, utilities, telephone and center supplies are charged to the cost center for each site. Accountants allocate the costs based on the funded slots at the site.

**Room Costs:**

Teachers and supplies are charged to the cost center for each room. Where rooms have multiple funding sources, the accountants allocate those cost centers based on the funded slots in that room.

**Other Staff Charges:**

Comprehensive Services staff charge their time to Head Start or Early Head Start accordingly since they are part of the Comprehensive Services provided by Head Start and Early Head Start.

Administrative Staff (including Assistant Directors) charge their time directly to Head Start or Early Head Start admin cost centers.

Other positions charge actual time worked directly to the programs or to a cost center that is then allocated to the programs based on funded slots (e.g. Child Care Food Program, Facilities Management, etc.).

**Child Care Food Program:**

The meal reimbursement rates are determined by the USDA. Expenses are allocated based on funded slots. Revenues are allocated based on the same monthly allocation worksheet. CDE and Head Start funding cover the excess of expenditures over reimbursements.

**Administrative Charges:**

Direct Admin charges are allocated from one cost center based on funded slots.

Indirect Admin charges and Community Services Bureau's portion of the County Overhead is allocated based on the approved County Indirect Cost Rate.

**DIRECT PROGRAM CHARGES**

Some costs are charged directly to one funding source and do not need to be allocated. Some examples are:

1. Training (and related travel) targeted for a specific program
2. Equipment to be funded through a specific program
3. Facilities to be funded through a specific program
4. Allocated based on the number of staff