



Subpar t J Program Management and Quality Improvement t

Policies and Procedures

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Start Program Performance
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1302.100 – 1302.102)

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SUBPART J - PROGRAM MANAGEMENT AND QUALITY

IMPROVEMENT PURPOSE (Standard 1302.100)

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

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

MANAGEMENT SYSTEMS (Standard 1302.101)

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

- (1) Ensures a program, fiscal, and human resource management structure that provides effective management and oversight of all program areas and fiduciary responsibilities to enable delivery of high-quality services in all of the program services described in subpart C, D, E, F, G, and H of this part;**
- (2) Promotes clear and reasonable roles and responsibilities for all staff and provides regular and ongoing staff supervision with meaningful and effective employee engagement practices.**
- (3) Ensures budget and staffing patterns that promote continuity of care for all children enrolled, allow sufficient time for staff to participate in appropriate training and professional development, and allow for provision for the full range of services described in subparts C, D, E, F, G, and H of this part; and,**
- (4) Maintains an automated accounting and record keeping system adequate for effective oversight; and,**
- (5) Ensures all staff are trained to implement reporting procedures in 1302.102(d)(1)(ii).**

PROCEDURES

1. See Agency Organizational Chart for management structure. The organizational structure for CSNT Head Start/Early Head Start ensures effective management and oversight in all areas of the program.
 2. All areas of the program are monitored on an on-going basis daily, weekly, monthly, and annually. See Monitoring Plan. Monitoring data is collected, analyzed, and reported to the Program Monitor. The data is used by the Head Start Director to plan and implement Professional Development Trainings for the staff. (See Monitoring Plan)
 3. The organizational structure and staffing patterns for the program assure that children and families enrolled in the program receive high-quality care on a daily basis. See CSNT Head Start Preschool/Early Head Start Training and Professional Development Plan. Staff are given time for professional development training including coaching/mentoring.
 4. Technology is utilized within the Agency and the Program to efficiently and effectively oversee the program. The Fiscal accounting system is Abila Sage MIP, the program record keeping system is ChildPlus and the child assessment system is CIRCLE CLI Engage and Frog Street AIM. All of these systems allow the program to pull reports and track data on a regular basis. Prior to the beginning of each five-year grant cycle, these systems will be reviewed to see if they are still the best option for the program.
 5. Supervisory staff receive training on how to engage with their employees to create a team atmosphere. They learn how to implement a team approach where each employee feels safe, seen, heard, and encouraged. All staff receive orientation to the Agency, the Head Start Program, and their respective locations.
- (b) Coordinated approaches:** (Standard 1302.101(b)) At the beginning of each program year, and on an on-going basis throughout the year, a program must design and implement program-wide coordinated approaches that ensure:
- (1)** The training and professional development system, as described in 1302.92, effectively supports the delivery and continuous improvement of high-quality services;
 - (2)** The full and effective participation of children who are dual language learners and their families, by

- (i) Utilizing information from the program's community assessment about the language spoken throughout the program service area to anticipate child and family needs;
 - (ii) Indemnifying community resources and establishing ongoing collaborative relationships and partnerships with community organizations consistent with the requirements in 1302.53(a); and,
 - (iii) Systematically and comprehensively addressing child and family needs by facilitating meaningful access to program services, including, at a minimum, curriculum, instruction, staffing, supervision, and family partnerships with bilingual staff, oral language assistance and interpretation, or translation of essential program materials, as appropriate.
- (3)** The full and effective participation of children with disabilities, including but not limited to children eligible for services under IDEA, by providing services with appropriate families, program materials, curriculum, instruction, staffing, supervision, and partnerships, at a minimum, consistent with section 504 of the Rehabilitation Act and the Americans with Disabilities Act18 , and,
- (4)** The management of program data to effectively support the availability, usability, integrity, and security of data. A program must establish procedures on data management, and have them approved by the governing body and policy council, in areas such as quality of data and effective use and sharing of data, while protecting the privacy of child records in accordance with Subpart C of part 1303 of this chapter and applicable federal, state, local, and tribal laws.

PROCEDURES

1. Policies and Procedures are established to implement coordinated services throughout the program. (See Operating Manuals Policies and Procedures)
2. Training and Professional Development implementation ensures that staff are able to deliver high-quality services.
3. The Community Assessment and Updates provide information to the program about languages spoken throughout the program service area so that the program can ensure that families have access to the services that they need.
4. The *Parent and Staff Handbook* lists the resources within the

- service area available to dual language children and families.
5. The program has ongoing collaborations/partnerships with public schools in the use of ESL/bi-lingual staff for children dually enrolled with the District and Head Start.
 6. All curriculums/teaching materials used in the program are valid and reliable for dual language learners. There is also one management staff person who has experience/education in ESL/bi-lingual instruction. This person assists teaching staff with Dual Language Instruction.
 7. At least one Family Empowerment Advocate (FEA) is bi-lingual in the second language most prominent in the program service area. This FSW is able to assist other staff with interpretations and translations, as appropriate. (See Family and Community Engagement/ERSEA Policies and Procedures)
 8. Children with disabilities are enrolled in the Program and receive services through the Program, public school system, and the appropriate special education program within the service area. All curriculums/materials used within the program are valid and reliable for children with disabilities. Wherever possible, the special education teacher or licensed counselor will assist teaching staff in providing services to the children with special needs. (See Disabilities Content Area/ERSEA Policies and Procedures).
 9. Program data is monitored for accuracy on a daily, weekly, and monthly basis. It is distributed, discussed and analyzed at monthly staff meetings through data reports. No personal identifiable information is listed on data reports. The program follows the Family Educational Rights and Privacy Act (FERPA) to safeguard child records. (See FINANCIAL AND ADMINISTRATIVE REQUIREMENTS - Subpart C - Protection for the Privacy of Child Records)

PROGRAM GOALS, CONTINUOUS IMPROVEMENT, AND REPORTING.
(Standard 1302.102)

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

- (1) Strategic long-term goals for ensuring programs are and remain responsive to community needs as identified in their community assessment as described in subpart A of this part;
- (2) Goals for the provision of educational, health, nutritional, and family and community engagement program services as

described in the program performance standards to further promote the school readiness of enrolled children;

- (3) School readiness goals that are aligned with the *Head Start Early Learning Outcomes Framework: Ages Birth to Five*, state and tribal learning standards, as appropriate, and requirements and expectations of schools Head Start children will attend, per the requirements of subpart B of part 1304 of this part; and,
- (4) Effective health and safety practices to ensure children are safe at all times, per the requirements in 1302.47, 1302.90(b), 1302.92(c)(1), and 1302.94 and part 1303 subpart F, of this chapter.

PROCEDURES

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

(b) Monitoring program performance. (Standard 1302.102(b))

- (1) **Ongoing 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 the process;
 - (ii) Correct quality and compliance issues immediately, or as quickly as possible.

- (iii) Work with the governing body and the policy council to address issues during the ongoing oversight and correction process and during federal oversight; and,
- (iv) Implement procedures that prevent recurrence of previous quality and compliance issues, including previously identified deficiencies, safety incidents, and audit findings.

PROCEDURES

1. See Monitoring Plan

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

- (i) Conduct a self-assessment that used program data including aggregated child assessment data, and professional development
and parent and family engagement data as appropriate, to evaluate the program's progress towards meeting goals established under paragraph (a) of this section, compliance with program performance standards throughout the program year, and the effectiveness of the professional development and family engagement systems in promoting school readiness;
- (ii) Communicate and collaborate with the governing body and policy council, program staff, and parents of enrolled children when conducting the annual self-assessment; and,
- (iii) Submit findings of the self-assessment, including information listed in paragraph (b)(2)(i) of this section to the responsible HHS official.

PROCEDURES

1. A program self-assessment is completed annually.
2. The Self-Assessment process begins with the Detailed Monitoring Committee approving the assessment tool, dates, assigned assessment areas and the team leaders for those areas. (Team Leaders facilitate assessment areas they are responsible for implementing.)
3. The designated Team Leaders selects members for each team from currently employed staff, board members, policy council

members, and community partners. Other members are assigned, as appropriate.

4. After completing the detailed Monitoring, each team leader completes a Progress Summary that includes areas of strengths, systemic weaknesses, innovations, and recommendations in the area that they assessed.
5. The Quality Assurance Specialist compiles the data from each area that was assessed. This creates the Program Improvement Plans.
6. Program Improvement Plan (PIPs) are created for each area where there is a systemic weakness. The staff with implementation responsibility for that area are responsible for correcting the issues on the Program Improvement Plan (PIPs).
7. All PIPs are monitored and tracked for completion. All areas where there are obstacles in completing the PIPs, require a meeting to discuss solutions to the obstacles. Efforts to find solutions are documented.
8. The Detailed Monitoring findings, On-Going Monitoring Data, and any other relevant data such as progress on program goals, is brought before the SA Committee for approval. Once the SA findings are approved, the document is sent to the Policy Council and Governing Board for approval.
9. The current SA findings are uploaded into the Head Start Enterprise System (HSES) as part of the grant application.

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

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

(2) This process must:

- (i)** Ensure data is aggregated, analyzed and compared in such a way to assist agencies in identifying risks and informing strategies for continuous improvement in all program service areas;
- (ii)** Ensure child-level assessment data is aggregated and analyzed at least three times a year, including for sub-groups, such as dual language learners and children with disabilities, as appropriate, except in programs operating

fewer than 90 days, and used with other program data described in paragraph (c)(2)(ix) of this section to direct continuous improvement related to curriculum choice and implementation, teaching practices, professional development, program design, and other program decisions, including changing or targeting scope of services; and,

- (iii)** For programs operating fewer than 90 days . . . (Not Applicable)
- (iv)** Use information from ongoing monitoring and the annual self-assessment, and program data on teaching practice, staffing and professional development, child-level assessments, family needs assessments, and comprehensive services, to identify program needs, and develop and implement plans for program improvement; and,
- (v)** Use program improvement plans as needed to either strengthen or adjust content and strategies for professional development, change program scope and services, refine school readiness and other program goals, and adapt strategies to better address the needs of sub groups.

PROCEDURES

1. The Program uses several different sources of data to identify program strengths and weaknesses including child assessment data, family partnership goals, data reports created through Child Plus, On-going Monitoring data, financial reports, budget monitoring/analyzing data, Monthly Progress Reports, Self-Assessment data, Program Information Report Monthly data, Maintenance Action Ticket/Supply Ticket data, CLASS Observations, Professional Development Plans/Performance Evaluations, etc.
2. Data is aggregated at least monthly through Program Progress Reports and On-going Monitoring Reports.
3. Corrective Action plans are implemented where there are identified program weaknesses. These plans are tracked/monitored for progress towards improvement.
4. Information from data reports, improvement plans, and assessments are used to guide the program in change of scope and services, plan upcoming professional development, realign program school readiness goals, family partnership goals, and/or strategic program goals.

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

(1) A program must submit:

- (i) Status reports, determined by ongoing oversight data, to the governing body and policy council, at least semi-annually;**
- (ii) Reports, as appropriate, to the responsible HHS official immediately, but no later than (7) calendar days following the incident, related to:**

(A) Any significant incident that affects the health or safety of a child that occurs in a setting where Head Start services are provided and that involves;

(1) A staff member, contractor, or volunteer that participates in either a Head Start Program or a classroom at least partially funded by Head Start, regardless of whether the child received Head Start services; or

(2) A child that receives services fully or partially funded by Head Start or a child that participates in a classroom at least partially funded by Head Start; or

(B) circumstances affecting the financial viability of the program, breaches of personally Identifiable Information, or program involvement in legal proceedings, any matter of which notification or a report to state, tribal, or local authorities is required by applicable law; and;

(iii) Reportable incidents under paragraph (d)(1)(ii) of this section at a minimum:

(A) Any mandated reports regarding agency staff or volunteer compliance with Federal, State, Tribal, or local laws addressing child abuse and neglect or laws governing sex offenders;

(B) Incidents that require classrooms or centers be closed for any reasons;

(C) Legal proceedings by any party that are directly related to program operations;

- (D)** All conditions required to be reported under 1304.12, including disqualification from the Child and Adult Care Food Program (CACFP) and license revocation.
 - (E)** Any suspected or known maltreatment or endangerment of a child by staff, consultants, contactors, and volunteers under 1302.90(c)(1)(ii);
 - (F)** Serious harm or injury of a child resulting from lack of preventative maintenance; and,
 - (G)** Serious harm, injury, or endangerment of a child resulting from lack of supervision; and,
 - (H)** Any unauthorized release of a child.
- (2) Annually, a program must publish and disseminate a report that complies with section 644(a)(2)³⁰ of the Act and includes a summary of a program's most recent community assessment, as described in 1302.11(b), consistent with privacy protection in subpart C of part 1303 of this chapter.
 - (3) If a program has had a deficiency identified, it must submit, to the responsible HHS official, a quality improvement plan as required in section 644(a)(2)³¹ of the Act.

PROCEDURES

1. Head Start Preschool/Early Head Start provides status reports to the governing board and the policy council with oversight data monthly. Governing board and policy council reports include Head Start Director's Report, Finance Report, Child Assessment Reports, CLASS Reports, Monitoring/Self-Assessment Reports, Program Information Reports, Human Resources Reports, Support Services Reports, and Progress on attaining Program Goals, School Readiness Goals, Family Partnership Goals with Progress, and CLASS Reports. (Program Goals, School Readiness Goals, and Family Partnership Goals will be tracked for progress at least (3) times per year.)
2. The Agency completes an Annual Report after the conclusion of the audit each year. The Annual Report discloses information listed under 644(a)(2) of the Act and includes a summary of the most recent community assessment.
3. The Agency submits to the responsible HHS official, a quality improvement plan for any deficiencies identified as required in section 641A(e)(2) of the Act.

4. The Agency follows all reporting requirements for all incidents including safety, endangerment, or harm to a child.

(Insert Organizational Chart Here)

