## **Program Performance Summary Report**

To: Authorizing Official/Board Chairperson

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From: Responsible HHS Official

Date: 05/18/2021

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On behalf of Dr. Bernadine Futrell Director, Office of Head Start

From March 22, 2021 to March 26, 2021, the Administration for Children and Families (ACF) conducted a Focus Area One (FA1) monitoring review of the Community Action, Inc. Head Start and Early Head Start programs. This report contains information about the grantee's performance and compliance with the requirements of the Head Start Program Performance Standards (HSPPS) or Public Law 110-134, Improving Head Start for School Readiness Act of 2007.

The Office of Head Start (OHS) would like to thank your governing body, policy council, parents, and staff for their engagement in the review process. The FA1 review allows the OHS to understand how programs are progressing in providing services in the 5-year grant cycle. The report includes the performance measures used to understand grantee progress towards program goals. You can use this report to identify where your program was able to describe progress toward implementing program services that promote quality outcomes for children and families. Please contact your Regional Office for guidance should you have any questions or concerns. Your Regional Office will follow up on the content of this report and can work with you to identify resources to support your program's continuous improvement.

## DISTRIBUTION OF THE REPORT

Ms. Marina Winkler, Regional Program Manager

Ms. Kerri Sheeran Perry, Chief Executive Officer/Executive Director

Ms. Kathie Cote, Head Start Director

Ms. Kathie Cote, Early Head Start Director

## **Glossary of Terms**

Opportunity for Continuous Improvement (OCI)	An OCI is identified when the grantee is determined compliant in an area; however, through intentional, continuous improvement strategies, the agency has the opportunity to enhance overall program quality.
Area of Concern (AOC)	An area for which the agency needs to improve performance. These issues should be discussed with the grantee's Regional Office of Head Start for possible technical assistance.
Area of Noncompliance (ANC)	An area for which the agency is out of compliance with Federal requirements (including but not limited to the Head Start Act or one or more of the regulations) in one or more areas of performance. This status requires a written timeline of correction and possible technical assistance or guidance from the grantee's program specialist. If not corrected within the specified timeline, this status becomes a deficiency.
Deficiency	As defined in the Head Start Act, the term "deficiency" means:  (A) a systemic or substantial material failure of an agency in an area of performance that the Secretary determines involves:  (i) a threat to the health, safety, or civil rights of children or staff;  (ii) a denial to parents of the exercise of their full roles and responsibilities related to program operations;  (iii) a failure to comply with standards related to early childhood development and health services, family and community partnerships, or program design and management;  (iv) the misuse of funds received under this subchapter;  (v) loss of legal status (as determined by the Secretary) or financial viability, loss of permits, debarment from receiving Federal grants or contracts, or the improper use of Federal funds; or  (vi) failure to meet any other Federal or State requirement that the agency has shown an unwillingness or inability to correct, after notice from the Secretary, within the period specified;  (B) systemic or material failure of the governing body of an agency to fully exercise its legal and fiduciary responsibilities; or  (C) an unresolved area of noncompliance.



## Program Design, Management, and Quality Improvement

### **Program Design**

The grantee's program design and structure takes into account community strengths and needs.

#### **Program Management and Quality Improvement**

The grantee has an approach for providing effective management and oversight of all program areas and fiduciary responsibilities.

#### **Program Governance**

The grantee maintains a formal structure for program governance that includes a governing body, a policy council (or policy committee for delegates), and parent committees.

## Program Design, Management, and Quality Improvement Summary

Community Action, Inc. used community and program data to inform service delivery and provide oversight in northeastern Massachusetts' Essex County. The grantee, the governing Board, and the policy council members reviewed data and identified increasing unemployment, a lack of affordable housing, and the need for extended child care as prevailing needs facing Head Start and Early Head Start families. The grantee made referrals to community resources for families seeking employment, such as the Cummings Foundation workforce development program that provided training to obtain a commercial driver's license. Other families received referrals to a community partner that offered child development associate credential classes, followed by encouragement to apply for Head Start employment once they completed the program. To assist with housing needs, staff helped families apply for a \$1,000 Community Action, Inc. grant to offset housing costs. Finally, to address parents' child care needs, the grantee extended hours in select Head Start classrooms to support working parents and helped families apply for child care vouchers. Community Action, Inc. provided services tailored to the needs of its children and families through community partnerships.

In addition to using data to guide services, the grantee also used it for oversight purposes and realized the available program data was not always accurate or consistent. The grantee determined this issue was partly due to the lack of a central data management system, as some staff used ChildPlus while others used Excel spreadsheets. Having data in multiple formats and locations limited the management team's ability to review and analyze it comprehensively. In response, the grantee created a director of grants and data compliance position to provide ChildPlus training to staff, oversee data entry, and promote data integrity. The management team supported these integrity efforts by prioritizing data entry and agreeing on a shared language. Examples of the language that complicated data analysis included "absent" versus "out," "family crisis" versus "concern," and "service" versus "referral". The implementation of shared language became an important focus after the director's initial ChildPlus review identified 42 parent "referrals" entered as "services," causing the number of parent referrals to be misrepresented. Additionally, the regional office provided training and technical assistance to newer content area managers on using data to develop program goals and provide ongoing oversight. The use of community and program data supported program design and service delivery.



## **Designing Quality Education and Child Development Program Services**

#### **Alignment with School Readiness**

The grantee's approach to school readiness aligns with the expectations of receiving schools, the Head Start Early Learning Outcomes Framework (HSELOF), and state early learning standards.

## **Effective and Intentional Teaching Practices**

The grantee has strategies to ensure teaching practices promote progress toward school readiness.

## **Supporting Teachers in Promoting School Readiness**

The grantee has an approach for ensuring teachers are prepared to implement the curriculum and support children's progress toward school readiness.

#### **Home-based Program Services**

The grantee has strategies to ensure home-based program services help parents to provide high-quality learning experiences.

## Designing Quality Education and Child Development Program Services Summary

Community Action, Inc. used child outcomes data to inform continuous improvement efforts and support children's school readiness. Management staff used program data to establish school readiness goals aligned with the Massachusetts Early Learning Guidelines for Infants, Toddlers, and Preschool. The grantee used the Desired Results Developmental Profile (DRDP) and the Ages and Stages Questionnaire: Social-Emotional in all program options. The grantee used the Teaching Strategies GOLD assessment in past years but switched because teachers felt the DRDP was more user-friendly when completing anecdotal notes, observations, and progress assessments. After changing the assessment tool, the education managers stated they saw better documentation of anecdotal notes with more timely and intentional information.

Once staff collected each child's data, they created individual SMART goals, which they discussed with families and used to guide classroom and home-based interactions and activities. In addition to using data to guide individual interactions, the grantee also used it to make program-wide changes. For example, when May 2018 data showed only about half of children were meeting social-emotional outcomes, the grantee implemented a new curriculum targeted at this developmental domain.

Community Action, Inc. also adopted the Center on the Social and Emotional Foundations for Early Learning Pyramid Model and used an external coach to develop teacher improvement plans, provide staff training, and facilitate bi-monthly meetings to discuss outcomes. As a result of these improvement efforts, May 2019 child outcomes data showed 76 percent of children were meeting social-emotional expectations. The use of child outcomes data to inform educational strategies supported children's school readiness.



## **Designing Quality Health Program Services**

#### **Child Health Status and Care**

The grantee has an approach for ensuring the delivery of high-quality health services.

#### **Safety Practices**

The grantee implements a process for monitoring and maintaining healthy and safe environments and ensuring all staff have complete background checks.

## **Designing Quality Health Program Services Summary**

Community Action, Inc. supported the medical, dental, and mental health needs of children and families. Massachusetts required medical insurance for all children and up-to-date physicals and well-baby checkups within 30 days of entering a child care setting. These state requirements helped the grantee reach 100 percent compliance for children's immunizations and over 90 percent compliance with Early and Periodic Screening, Diagnostic, and Treatment services. The program helped children receive lead blood tests and hemoglobin level checks with on-site testing and partnerships with the Women, Infants, and Children (WIC) and Lead Poison Prevention programs. The grantee partnered with Tuft Dental to provide dental screening and fluoride treatments annually and helped families access community providers for follow-up services. During COVID-19, the grantee struggled to secure dental exams for children due to office closures and parents' fear of exposing children to the virus by visiting dental offices. The health director stated approximately 75 percent of center-based children, 50 percent of homebased, and 46 percent of children participating in virtual services had up-to-date dental exams. Parent educators and family advocates continued to communicate with parents about dental health and needs, and the health director reviewed ChildPlus Reports to monitor status.

The program's Health Service Advisory Committee (HSAC) members also supported access to health services for children and families: 85 percent of enrolled children received services at the offices of 2 pediatricians who served on the HSAC. Committee members also discussed COVID-19 reopening procedures, helped the grantee stay up to date on pandemic information, and provided family resources on interpersonal interaction while social distancing. The grantee used three licensed therapists and two mental health consultants to support the social-emotional needs of children, families, and staff. Consultants met with education staff monthly to discuss concerns and provide strategies to address challenging behaviors and personal stress. They also provided staff training on stress, trauma, and self-care during COVID-19 and recognizing the signs of depression and stress in adults and children. Staff, community partners, HSAC members, and consultants worked together to help children and families stay healthy and ready to learn.

Community Action, Inc. provided safe and clean learning environments. The grabtee required daily and weekly safety inspections and cleaning practices, which staff recorded on classroom and playground checklists. The grantee also used the Family Child Care Environment Rating Scale-Revised (FCCERS-R) and the Early Childhood Environment Rating Scale (ECERS) to complete annual inspections that influenced safety changes and updates. Additionally, classrooms were protected with electronic locks that required passwords for entry and safety latches on the inside to ensure children could not exit the classroom unsupervised. Some centers also had a buzzer system with a camera and intercom that did not allow entrance without being admitted by staff or by override using a code. The grantee's approach ensured children were able to learn in safe environments.



## **Designing Quality Family and Community Engagement Services**

#### **Family Well-being**

The grantee has an approach for collaborating with families to support family well-being.

## **Strengthening Parenting and Parent-Child Supports**

The grantee has an approach for providing services that strengthen parenting skills.

## **Designing Quality Family and Community Engagement Services Summary**

Community Action, Inc. supported children's and caregivers' well-being by encouraging families to participate in goal-setting and providing resources to meet needs and improve skills. The parent advocates helped parents complete a family needs assessment within 30 days of enrollment. This assessment identified family strengths, needs, and the resources necessary for positive change and was used to establish family goals. The top three needs identified by parents were housing, food, and technology assistance. In response to COVID-19, the grantee asked parents to complete two additional needs surveys in May and October 2020, which identified the same three areas of need. Managers and staff used this parent data to discuss options and identify helpful external and internal resources. Internal resources, including \$1,000 grants, Market Basket Grocery store gift cards, and United Way funds, helped families address housing and food needs. The grantee also used Essex County Community Foundation grant funds to provide direct rental, utilities, and fuel assistance payments during COVID-19. External resources included weekly food bags from Fishes and Loaves, school lunches from the public school, and rental assistance from City Hall and Pettengill House. During COVID-19, the grantee also delivered diapers and wipes weekly to families participating in virtual services and referred families to food banks for additional diaper needs.

To help strengthen parenting skills, the grantee implemented the Touchpoints Parenting Program Curriculum. Facilitators, including the family service manager and the family advocates, provided English and Spanish curriculum sessions to reinforce each parent's expertise and encourage positive parent-child relationships. Additional workshops offered to help parent skills included Budget Buddies and Money Matters financial literacy classes and Cooking Matters nutrition classes. The grantee provided families with resources, training, and support to improve family well-being and strengthen their skills.



# Developing Effective Eligibility, Recruitment, Selection, Enrollment, and Attendance (ERSEA) Strategies and Fiscal Infrastructure

#### Eligibility, Recruitment, Selection, Enrollment, and Attendance

At least 10% of the grantee's total funded enrollment is filled by children eligible for services under IDEA or the grantee has received a waiver.

The grantee enrolls children or pregnant women who are categorically eligible or who meet defined income-eligibility requirements.

### **Enrollment Verification**

The grantee maintains and tracks full enrollment.

## Fiscal Infrastructure, Capacity, and Responsiveness

The grantee's fiscal staff have the qualifications needed to provide oversight of the grant.

The grantee has a budget development and revision process that includes stakeholders and appropriate approvals, and ensures continuous alignment with program design, goals, and objectives.

## Developing Effective Eligibility, Recruitment, Selection, Enrollment, and Attendance (ERSEA) Strategies and Fiscal Infrastructure Summary

Community Action, Inc. developed systems to enroll eligible children and families for Head Start and Early Head Start services. The ERSEA manager, ERSEA assistant, director of family services, family manager, family advocates, and parent educators completed in-person or virtual application interviews. Applicants could provide eligibility and income documentation in person or, in response to COVID-19, through email, postal mail, fax, or a drop-off box. All applications underwent a two-party review to verify eligibility, with a third review completed if necessary. Staff used the ChildPlus software to prioritize enrollment based on family needs and maintain a waiting list.

In response to COVID-19, changes were made to the selection criteria, which added points for parents affected by a natural disaster and increased the points given to multiple families living in one household due to finances. The selection criteria also prioritized children with disabilities: over 10 percent of students enrolled had a disability. The staff determining eligibility received training at the time of hire by the director of family services and through Western Kentucky University and Region One training and technical assistance. Additionally, staff completing applications received training at quarterly team meetings and annually when family applications were updated. The grantee implemented an ERSEA process to ensure enrollment of eligible children and families with the greatest need for services.

Community Action, Inc.'s financial management system supported fiscal oversight and budget development and implementation. The grantee managed multiple funding sources, including Federal Early Head Start and Head Start; pass-through money from Early Education and Care subsidies; Temporary Assistance for Needy Families; Women, Infants, and Children (WIC); Child and Adult Care Food Program; and private foundations. The grantee's director of finance oversaw all fiscal practices with the Abila MIP Fund Accounting Software, which established account codes for each funding source and ensured proper cost allocations. The director of finance initiated the annual budget development process, which included input from program staff, managers, content directors, the fiscal committee, the policy council, and the governing Board. The process began by looking at program needs, strategic plans, staff trends and needs, and regulatory changes to ensure the program supported quality services.

For ongoing monitoring of budget implementation, the director of finance met with the program director regularly to review expenditures, remaining funds, and adherence to budget projections. For example, during the 2020 program year, the program noticed salary funds were not spent due to vacant staff positions. This prompted a budget amendment approved by the policy council, governing Board, and the regional office to use \$215,000 for a new playground. In response to COVID-19, the grantee used Coronavirus Aid, Relief, and Economic Security (CARES) Act funds to purchase additional cleaning supplies, personal protective equipment, Wi-Fi-enabled devices for staff and children, various virtual platforms, and outdoor screening

tents. The financial management structure and systems enabled the grantee to maintain accountability of the federal funding.
End of Report