



ADMINISTRATION FOR
CHILDREN & FAMILIES

Office of Head Start | 4th floor Switzer Memorial Building, 330 C Street SW, Washington DC | eclkc.ohs.acf.hhs.gov

To: Board Chairperson

Judge Tano E. Tijerina
Board Chairperson
Webb County Commissioners
5904 West Drive, Suites 6 & 7
Laredo, TX 78044-2397

From: Responsible HHS Official

Dr. Blanca Enriquez
Director, Office of Head Start

Blanca E. Enriquez / 10/17/16
Date

Overview of Findings

On 9/13/2016, the Administration for Children and Families (ACF) conducted a monitoring review of the Webb County Commissioners Head Start and Early Head Start programs to determine whether the previously identified findings had been corrected. We wish to thank the governing body, Policy Council, staff, and parents of your program for their cooperation and assistance during the review. This Head Start Review Report has been issued to Judge Tano E. Tijerina, Board Chairperson, as legal notice to your agency of the results of the program review.

- Based on the information gathered during our review, we have closed the previously identified findings. Accordingly, no corrective action is required at this time. If you have questions about this report, please contact your ACF Regional Office.

Distribution of the Head Start Review Report

Copies of this report will be distributed to the following recipients:

Ms. Kimberly Chalk, Regional Program Manager

Mr. David Ramirez, Policy Council Chairperson

Aliza Oliveros, CEO/Executive Director/Head Start Director

Overview Information

Review Type: *Desk/FTL Solo*
Organization: *Webb County Commissioners*
Program Type: *Head Start and Early Head Start*
Field Lead: *Mr. Alfredo Huerta*
Funded Enrollment HS: *1218*
Funded Enrollment EHS: *72*

Glossary

A glossary of terms has been included to explain the various terms used throughout this report.

Term	Definition
Compliance Measure (CM)	The specific statements that collectively assess the level of program performance for each Key Indicator, focusing on one or more Federal regulations critical to the delivery of quality services and the development of strong management systems.
Strength	A new and/or unique way of reaching the community.
Compliant	No findings. Meets requirements of Compliance Measure.
Concern	An area or areas of performance which need improvement or technical assistance. These items should be discussed with the Regional Office and do not include a timeframe for correction.
Noncompliance	A finding that indicates the agency is out of compliance with Federal requirements (including, but not limited to, the Head Start Act or one or more of the performance standards) in an area or areas of program performance, but does not constitute a deficiency. Noncompliances require a written timeline of correction and possible technical assistance (TA) or guidance from their program specialist, and if not corrected within the specified timeline, can become a deficiency.
Deficiency	<p>An area or areas of performance in which an Early Head Start or Head Start grantee agency is not in compliance with State or Federal requirements (including but not limited to, the Head Start Act or one or more of the regulations) and which involves:</p> <p>(A) A threat to the health, safety, or civil rights of children or staff;</p> <p>(B) A denial to parents of the exercise of their full roles and responsibilities related to program governance;</p> <p>(C) A failure to perform substantially the requirements related to Early Childhood Development and Health Services, Family and Community Partnerships, or Program Design and Management; or</p> <p>(D) The misuse of Head Start grant funds.</p> <p>(ii) The loss of legal status or financial viability, as defined in part 1302 of this title, loss of permits, debarment from receiving Federal grants or contracts or the improper use of Federal funds; or</p> <p>(iii) Any other violation of Federal or State requirements including, but not limited to, the Head Start Act or one or more of the performance standards of this title, and which the grantee has shown an unwillingness or inability to correct within the period specified by the responsible HHS official, of which the responsible HHS official has given the grantee written notice of pursuant to section 1304.61.</p>

Summary of Findings

Finding Type	Applicable Standards	Program Type	Grant	Timeframe	Status
Safe Learning Environments	1304.52(i)(1)(iv)	HS and EHS	06CH7137	N/A	Corrected

Status of Previously Identified Areas of Noncompliance

Finding	Status
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PART 1304 - Program Performance Standards For Operation Of Head Start Programs By Grantees And Delegate Agencies Corrected

1304.52 Human Resources Management.

(i) Standards of conduct.

(1) Grantee and delegate agencies must ensure that all staff, consultants, and volunteers abide by the program's standards of conduct. These standards must specify that

(iv) They will use positive methods of child guidance and will not engage in corporal punishment, emotional or physical abuse, or humiliation. In addition, they will not employ methods of discipline that involve isolation, the use of food as punishment or reward, or the denial of basic needs.

EnvHS - 4/4/2016 - Noncompliance

The grantee did not ensure staff used positive methods of child guidance. An incident occurred in which a teacher and teacher assistant harshly redirected a 3-year-old male child.

It is critical for teaching staff and classroom support persons to understand and adhere to supervision and discipline practices to ensure the safety of children, and it is the program's responsibility to provide ongoing oversight to ensure compliance with the established procedures. Programs need to look closely at the systems in place, as well as at how staff are supervised, and supported in their interactions with children to mitigate these risks.

On Wednesday, December 16, 2015, a teacher and teacher assistant at the Sierra Vista Center were observed by another teacher to be mishandling a 3-year-old male child. A review of a February 17, 2016 Texas Department of Family and Protective Services Child Care Inspection form found it detailed allegations stating improper discipline was used with children, and there was improper supervision by caregivers. The report also stated a review of video determined the teacher aide did not redirect the student in a positive manner but was harsh in handling him, restraining him while attempting to force him to sit down. It also stated the video indicated the caregiver restrained the child while he was having a difficult time calming down.

In an interview, the Director stated she was not notified of the incident until the evening of Tuesday, January 19, 2016, and said she immediately informed the teacher who reported the incident she was in violation of the program's Child Abuse Reporting Policy for not reporting the incident immediately. A report was submitted the following day: Wednesday, January 20, 2016. The teacher who reported the incident did not follow the Mandated Reporter Policy and the program's Safety Policy. As a result, the teacher was written up Thursday, January 21, 2016, for failure to follow instructions and violation of the Safety Policy.

The child's parent was notified of the incident and resulting Child Protective Services (CPS) investigation Monday, February 1, 2016. The Director delayed reporting the incident to the Regional Office pending the outcome of the CPS investigation, and the incident was reported to the Regional Office February 29, 2016.

A review of documentation of the incident provided by the Director determined the teacher who restrained the child was removed from the classroom Wednesday, January 20, 2016, and the teacher assistant was removed from the classroom Thursday, January 21, 2016. A review of documentation provided by the Director found it further stated the teacher and teacher assistant resigned January 28, 2016, prior to a Policy Council meeting during which an Executive Session was scheduled to report the incident and recommend termination of employment for both.

The grantee did not ensure staff used positive methods of child guidance; therefore, it was not in compliance with the regulation.

Desk/FTL Solo (9/13/2016) - Corrected

The grantee ensured staff used positive methods of child guidance. The grantee revised its Policies and Procedures and provided additional training for all staff.

In an interview, the Head Start Director stated the grantee revised the agency's Child Abuse and Neglect plan and re-trained staff on the Head Start standards of conduct to ensure everyone understood the health and safety of the children was the number one priority of the program. She further stated staff were trained on child abuse and their reporting responsibilities and added observations of classroom staff continued to be conducted; cameras were placed in the classrooms to observe staff; and the monitoring process was improved to enable the program to detect potential problems before they occurred.

A review of Class Environment Checklists and Classroom Assessment Scoring System observation records for the Sierra Vista Center found they were used to provide individualized feedback on teacher performance, including targeted areas for improvement. A review of the grantee's corrective action plan found it stated the grantee was to provide more frequent classroom monitoring to improve effective teaching practices and ensure all classrooms maintained a positive environment. In an interview, the Center Director for the Sierra Vista Center stated the program was conducting more classroom observations--not just in her center, but in the rest of the agency's centers.

In an interview, the Associate Head Start Director stated the grantee reviewed the standards of conduct with all agency staff to make sure such an issue would not occur again. She further stated the grantee provided additional child abuse and health and safety training immediately after the incident and during pre-service in August 2016. A review of the Webb County Head Start Code of Conduct for Employees, Partners, Consultants, Volunteers and Student Interns found it required the use of redirection, positive reinforcement, and consistency in managing children's behavior and stated staff were not to engage in corporal punishment, emotional or physical abuse, humiliation, or any discipline involving isolation or denial of children's basic needs.

A review of a training agenda and sign-in sheets found training on child abuse and neglect was provided to all teaching staff shortly after the December 16, 2015 incident. Training was provided at the centers between February 5 and 19, 2016, and the Director stated all staff were required to attend training after the incident occurred. A review of an August 17, 2016 training agenda, handouts, and sign-in sheets found all Education staff were provided training including discussions of child abuse and the grantee's internal reporting procedures. The session included a post-test to assess the effectiveness of the presentation.

A review of the August 31, 2016 annual Webb County Head Start training agenda and attendance rosters found supervisors, including administrative staff, coordinators, Family Service Workers, and Area Service Managers were trained on the Procedures for Reporting Child Abuse and Neglect, which included a statement indicating all employees were mandated to immediately report incidents. In addition, the procedures stated any employee who had a Child Protective Services report filed against him or her would immediately be removed from contact with or control over children and would be reassigned to another position. If staff did not report incidents, it could lead to termination. In addition, employees were required to sign an acknowledgement indicating they received the policy.

In interviews, a Policy Council member and a Board member stated they were made aware of the incident when it occurred and were informed of the steps taken by the program, which included reviewing the Head Start standards of conduct and revising and improving the agency's Policies and Procedures.

The grantee ensured staff used positive methods of child guidance. This area of noncompliance is corrected.

— END OF REPORT —