



**Office of Head Start  
Monitoring Protocol  
Staff and Child File Guides  
FY 2012**

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## File Review Guides

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### Staff File

#### Management Systems Compliance Framework #3—Human Resources

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- ▶ Has a tuberculosis screening been completed?

**SYS 3.3**

- ▶ Has the initial health examination, including screenings, been completed?

**SYS 3.3**

- ▶ Has a re-examination been completed as needed? (Re-examinations may need to occur only once, or they may need to be periodic)

*Applies only to bus drivers*

**SYS 3.3**

- ▶ Is there documentation of a medical examination before performing duties, establishing that the bus driver possesses the physical ability to perform job related functions with any necessary accommodations?

**SYS 3.3**

- ▶ Did the program obtain one of the following for the staff member?

- ▶ A State, Tribal, or Federal criminal record check covering all jurisdictions where the grantee provides Head Start services to children
- ▶ A State, Tribal, or Federal criminal record check as required by the law of the jurisdiction where the grantee provides Head Start services
- ▶ A criminal record check as otherwise required by Federal law

**SYS 3.4**



- ▶ Was the criminal record check conducted prior to employment?

*Select N/A if the employee was hired prior to 12/12/2007*

### SYS 3.4

## Child Development & Education Compliance Framework #5—Quality of Teaching and Learning

- ▶ Please enter the qualification of the preschool teacher:
  - ▶ A baccalaureate or advanced degree in early childhood education,
  - ▶ A baccalaureate or advanced degree and coursework equivalent to a major relating to early childhood education, with experience teaching preschool-age children
  - ▶ An associate degree in early childhood education
  - ▶ An associate degree in a related field and coursework equivalent to a major relating to early childhood education, with experience teaching preschool-age children
  - ▶ A baccalaureate degree and has been admitted into the Teach For America program
  - ▶ Program has a waiver regarding preschool teacher qualifications
  - ▶ Does not meet qualifications

### CDE 5.1

- ▶ Please enter the qualification of the infant-toddler teacher:
  - ▶ A minimum of a current infant/toddler child development associate credential and have been trained (or have equivalent coursework) in early childhood development, including topics required under 1304.52(f)
  - ▶ Does not meet qualifications

### CDE 5.1



- ▶ Please enter the qualification of the FCC provider:
  - ▶ Previous ECE experience, current CDA
  - ▶ Previous ECE experience, enrolled in a CDA program
  - ▶ Previous ECE experience and Associate's degree in child development or ECE (attained within two years of beginning service provision)
  - ▶ Previous ECE experience and Bachelor's degree in child development or ECE (attained within two years of beginning service provision)
  - ▶ Previous EVE experience and enrolled in an Associate's or Bachelor's degree program in child development or ECE (within 6 months of beginning service provision)
  - ▶ Does not meet qualifications

### CDE 5.2

- ▶ Is there a professional development plan on file?  
*Applies only to ECD staff providing direct services to children*

### CDE 5.3



## Child File

### ERSEA Compliance Framework #2—Eligibility

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- ▶ Is there a signed statement in the file verifying the child’s eligibility?

**ERSEA 2.1**

- ▶ Did the signed statement indicate which documents, in accordance with 1305.4(d), were examined to determine if the child is eligible to participate in the program?

**ERSEA 2.1**

- ▶ Did the signed statement indicate the eligibility status of the child?

**ERSEA 2.1**

- ▶ In which eligibility category did the program enroll the child?

**ERSEA 2.2**

### Child Health & Safety Framework #1—Child Health and Safety

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- ▶ Has a determination been made by a health care professional as to whether the child was up to date on a schedule of age-appropriate preventive and primary health care (including EPSDT)?

*Note: Indicate “No” in all instances where the determination has not been made, even if the program has been in operation less than 90 days (30 days for Migrant and Seasonal programs)*

**CHS 1.1**

- ▶ Was the child up to date on a schedule of appropriate preventive and primary health care (including EPSDT)?

**CHS 1.1**



- ▶ Did the program assist parents in making arrangements to bring their children up to date on a schedule of primary and preventive health care?

*The child file should contain documentation that provides evidence of staff collaboration with parents.*

**CHS 1.1**

- ▶ Does the child have an observable, known, or suspected health or developmental problem?

**CHS 1.2**

- ▶ Did the child receive further diagnostic testing, evaluation, and treatment by an appropriate licensed or certified professional?

*Select N/A if the child did not require further diagnostic testing, evaluation, and treatment by an appropriate licensed or certified professional.*

**CHS 1.2**

- ▶ Did the program develop a follow-up plan for the child?

*Select N/A if the program recently reviewed results but has not yet had the opportunity to develop a follow up plan.*

**CHS 1.2**

- ▶ Did the program implement the follow-up plan?

*Select N/A if the program has not yet had the opportunity to implement the follow up plan.*

**CHS 1.2**

- ▶ Did the child receive health or developmental procedures administered or scheduled through the program?

**CHS 1.4**



- ▶ Did the file contain evidence of parent/guardian consent for health and developmental procedures administered or scheduled through the program?

**CHS 1.4**

- ▶ Did the file contain evidence that the consent was obtained prior to the performance of the procedure?

**CHS 1.4**

### Child Health & Safety Framework #2—Screening and Referrals

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- ▶ Were all sensory screenings completed? Includes vision and hearing screenings.

*Note: Indicate “No” in all instances where the screening has not been completed, even if the program has been in operation less than 45 days (30 days for Migrant and Seasonal programs)*

**CHS 2.1**

- ▶ What was the latest date on which sensory (visual or hearing) screening was completed?

**CHS 2.1**

- ▶ Were all developmental screenings completed? Includes motor, language, cognitive, and perceptual screenings.

*Note: Indicate “No” in all instances where the screening has not been completed, even if the program has been in operation less than 45 days (30 days for Migrant and Seasonal programs).*

**CHS 2.1**

- ▶ What was the latest date on which the developmental screenings were completed?

**CHS 2.1**



- ▶ Were all additional developmental screenings completed? Includes social, emotional, and behavioral screenings.

*Note: Indicate “No” in all instances where the screening has not been completed, even if the program has been in operation less than 45 days (30 days for Migrant and Seasonal Programs)*

### CHS 2.1

- ▶ What was the latest date on which the social, emotional, or behavioral screening was completed?

### CHS 2.1

- ▶ List the screenings that were completed more than 45 days after the child’s entry into the program (30 days for Migrant and Seasonal Programs). Indicate the date of each screening and how many days after the 45 (30) day timeframe each screening was completed.

### CHS 2.1

- ▶ Does the child have a disability? (Includes children with a current IEP or IFSP as well as children with screening results which should have led the program to suspect the child of having a disability)

### CHS 2.2

- ▶ Did the disabilities coordinator make a prompt referral to the LEA or Part C Agency?

*Note: A prompt referral should occur as soon as possible but at least within a few weeks. If you note a concern with the promptness of the referral, please record the dates that the child was identified by the program and referred to the LEA or Part C Agency in notes box provided. Select N/A if the child already had an active IEP/IFSP prior to enrolling in the program or it is still within a few weeks and the disabilities coordinator has not completed the referral.*

### CHS 2.2



- ▶ Did the program obtain consent from a parent prior to the child receiving initial evaluation?

CHS 2.3

- ▶ Did the program obtain consent from a parent prior to the child receiving a follow-up evaluation, if necessary?

CHS 2.3