

ACF Administration for Children and Families	U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES	
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PROGRAM INSTRUCTION

TO: All Head Start and Early Head Start Grantees, including Early Head Start-Child Care Partnership Grantees

SUBJECT: Full Enrollment Initiative

INSTRUCTION:

The Office of Head Start (OHS) is committed to preparing America's most vulnerable children to succeed by providing grantees with resources needed to deliver services to children and families in core areas of early learning, health, and family well-being. To achieve this, Head Start programs must provide services to 100 percent of the children they are funded to serve. Section [642\(g\)](#) of the Head Start Act requires each Head Start agency to enroll 100 percent of its funded enrollment and maintain an active waiting list at all times with ongoing outreach to the community and activities to identify underserved populations.

This Program Instruction (PI) reiterates the importance of full enrollment. It also outlines the authority of OHS to designate an agency as Chronically Underenrolled and recapture, withhold, or reduce the base grant for programs that are not fully enrolled.

Enrollment Requirements

All Head Start grantees are required to report monthly enrollment in the Head Start Enterprise System (HSES) by program within each grant ([641A\(h\)\(2\)](#)). Reporting for the previous month is due on the seventh of each month. Grantees can make edits to reported monthly enrollment until a new reporting period opens.

A grantee must maintain its funded enrollment level and fill any vacancy as soon as possible. Grantees may report any slots that were vacant for less than 30 days as enrolled for the month. After 30 days, the slot can no longer be counted as an enrolled slot ([45 CFR § 1302.15\(a\)](#)).

OHS Enrollment Review

Section [641A\(h\)\(3\)](#) of the Head Start Act requires the Secretary of the U.S. Department of Health and Human Services (HHS) to determine which agencies are operating with an actual enrollment in their Head Start and/or Early Head Start program that is less than the funded enrollment based on not less than four consecutive months of data. The count of consecutive

months underenrolled does not restart after a program has been closed, typically for the summer break, or after the agency begins a new noncompetitive project period. For example, if a program is underenrolled in April and May, closes June–August for summer break, and after opening remains underenrolled in September and October, October would constitute the fourth consecutive month.

Grantees with four or more consecutive months of underenrollment in any Head Start and/or Early Head Start program will receive an Underenrollment Letter from the Regional Office. Grantees must develop, in collaboration with the Regional Office, a plan and timetable for reducing or eliminating underenrollment. The 12-month period for determining chronic underenrollment starts 10 calendar days from the date the Underenrollment Letter is sent.

OHS Authority to Designate Grantee as Chronically Underenrolled

Achieve and Maintain 97 Percent Funded Enrollment

If the grantee is meeting at least 97 percent enrollment after the 12-month period has concluded, OHS will continue to evaluate to ensure the grantee maintains at least 97 percent enrollment for six consecutive months. Where the grantee has achieved and maintained at least 97 percent enrollment for six consecutive months following the 12-month period, a Letter of Completion will be sent to the grantee. The Letter of Completion will serve as official notice of successful completion of the underenrollment plan.

Fall Short of 97 Percent Funded Enrollment

If the grantee is less than 97 percent of funded enrollment after the 12-month period has concluded, OHS has the authority to designate the agency as Chronically Underenrolled and take actions authorized under Section 641A(h)(5). These actions include recapturing, withholding, or reducing the annual funding and funded enrollment. OHS is committed to continuing to support such agencies in achieving and maintaining full enrollment. Any reduction in funding will adjust the funded enrollment to be consistent with the historical, actual enrollment level.

Agencies designated as Chronically Underenrolled will receive a Chronically Underenrolled Designation Letter. The Chronically Underenrolled Designation Letter will inform the grantee of their designation, any subsequent action, and an opportunity to appeal a recapture, withholding, or reduction in funding to the Administration for Children and Families (ACF) within 30 days of delivery of the Chronically Underenrolled Designation Letter.

Appeal Process

Grantees who decide to appeal a recapture, withholding, or reduction in funding must submit a written appeal with supporting evidence to OHS.Enrollment@acf.hhs.gov. Grantees may request a hearing with the written appeal. Failure to submit an appeal in the manner described in this PI will result in immediate implementation of the reduction in funding described in the Chronically Underenrolled Designation Letter.

If a grantee requests a hearing as part of their appeal, a hearing will be scheduled no later than 60 days following receipt of the written appeal and request for a hearing. The hearing will be by

telephone or web meeting and the grantee may present witness testimony or written witness statements to explain or support evidence previously submitted in the written appeal. Testimony at the hearing should be limited to no more than one hour.

Within 30 days following the date of the hearing, ACF will communicate its decision to the agency in writing and the decision will be immediately implemented. The appeal decision is final.

Removing the Chronically Underenrolled Designation

Agencies designated as Chronically Underenrolled will maintain their designation until successfully demonstrating six consecutive months of enrollment not less than 97 percent of funded enrollment at its new funded enrollment level. When the grantee has achieved six consecutive months of at least 97 percent enrollment, a Chronically Underenrolled Designation Removal Letter will be sent to the grantee. The Designation Removal Letter will serve as official notice that the designation of Chronically Underenrolled has been lifted.

Should the grantee remain designated as Chronically Underenrolled, OHS may further recapture, withhold, or reduce the annual funding and funded enrollment. The agency will again have the opportunity to appeal.

Grantees are asked to review the Enrollment User Guide in HSES to assure accurate reporting.

Please direct any questions regarding this PI to your Regional Office.

Thank you for the work you do on behalf of children and families.

/ Dr. Deborah Bergeron /

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Director
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