



ADMINISTRATION FOR
CHILDREN & FAMILIES

Office of Head Start | 4th Floor – Switzer Memorial Building, 330 C Street SW, Washington DC 20024 eclkc.ohs.acf.hhs.gov

Program Performance Summary Report

To: Authorizing Official/Board Chairperson

Mr. Cory Stine

Great Lakes Community Action Partnership

127 S Front St

Fremont, OH 43420 - 3021

From: Responsible HHS Official

Date: 09/13/2024

Mr. Khari M. Garvin

Director, Office of Head Start

On July 15, 2024, the Administration for Children and Families (ACF) conducted a monitoring review of Great Lakes Community Action Partnership. We wish to thank the governing body, policy council, staff, and parents of your program for their cooperation and assistance during the review. This monitoring report has been issued to Mr. Cory Stine, as legal notice to your agency of the results of the program review.

Based on the information gathered during our review, a determination has been made that Great Lakes Community Action Partnership is a recipient with at least one area of deficiency in its Head Start program.

If you anticipate that you will not be able to correct all deficiencies within the correction time specified in this report, you must submit a letter to your ACF Regional Office requesting an extension, with an explanation as to why an extension is necessary. The letter requesting an extension must be submitted prior to the expiration of the original corrective action time period. In order to allow for sufficient time to consider extension requests, we ask that you submit your request within 10 days following receipt of this report. Extension requests shall not be considered approved unless you receive such approval in writing before the deadline for correction.

The report provides you with detailed information in each area where program performance did not meet applicable Head Start Program Performance Standards, laws, regulations, and policy requirements. Please contact your ACF Regional Office with any questions or concerns you may have about this report.

DISTRIBUTION OF THE REPORT

Copies of this report will be distributed to the following:

Ms. Sandra Carton, Regional Program Manager

Mrs. Ruthann House, Chief Executive Officer/Executive Director

Mrs. Jacquie Wells, Head Start Director

Grant(s) included as part of this review

Grant Recipient Name	Grant Number(s)
Great Lakes Community Action Partnership	90CM009853

Glossary of Terms

Term	Definition
Area of Concern (AOC)	An area in which the agency needs to improve performance. These issues should be discussed with the grant recipient's Regional Office for possible technical assistance.
Area of Noncompliance (ANC)	An area in 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 for correction and possible technical assistance or guidance from the grant recipient's program specialist. If not corrected within the specified timeline, this status becomes a deficiency.
Deficiency	<p>As defined in the Head Start Act, the term "deficiency" means:</p> <p>(A) a systemic or substantial material failure of an agency in an area of performance that the Secretary determines involves:</p> <ul style="list-style-type: none"> (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; <p>(B) systemic or material failure of the governing body of an agency to fully exercise its legal and fiduciary responsibilities; or</p> <p>(C) an unresolved area of noncompliance.</p>

Performance Summary

This section contains an overview of compliance information identified in each Performance Area for all Content Areas. Detailed information can be found in the Review Details section.

Failure to correct a deficiency within the approved timeline may result in termination of the grant.

Compliance Information

Content Area	Performance Area	Grant Number(s)	Compliance Level	Applicable Standards	Timeframe for Correction
Significant Health and Safety Incidents	Safety Practices	90CM009853	Area of Noncompliance	1302.90(c)(1)(ii)	120 days
Program Design, Management, and Improvement	Systems for Program Management and Improvement	90CM009853	Deficiency	1302.102(d)(1)(ii)	30 days

Review Details

This section of the report provides details on findings in applicable Content Areas reviewed during this monitoring event.

Significant Health and Safety Incidents

Performance Area: Safety Practices

Area of Noncompliance - 1302.90(c)(1)(ii)

Summary

Grant Number(s) Cited: 90CM009853

Timeframe for Correction: 120 days

Performance Standard Details

Regulation Text: 1302.90 Personnel policies. (c) Standards of conduct. (1) A program must ensure all staff, consultants, contractors, and volunteers abide by the program's standards of conduct that: (ii) Ensure staff, consultants, contractors, and volunteers do not maltreat or endanger the health or safety of children, including, at a minimum, that staff must not: (A) Use corporal punishment; (B) Use isolation to discipline a child; (C) Bind or tie a child to restrict movement or tape a child's mouth; (D) Use or withhold food as a punishment or reward; (E) Use toilet learning/training methods that punish, demean, or humiliate a child; (F) Use any form of emotional abuse, including public or private humiliation, rejecting, terrorizing, extended ignoring, or corrupting a child; (G) Physically abuse a child; (H) Use any form of verbal abuse, including profane, sarcastic language, threats, or derogatory remarks about the child or child's family; or, (I) Use physical activity or outdoor time as a punishment or reward.

Finding Details

- The grant recipient did not ensure all staff abided by the standards of conduct to refrain from maltreating and endangering the health and safety of children, including using inappropriate discipline.

Additional details from this review event:

- The grant recipient had an incident of a staff member using inappropriate discipline methods with a 3-year-old child.
- On June 11, 2024, a teacher assistant at the Shiloh Center grabbed the child by the upper arm and, in a quick motion, roughly pulled them away from the bookshelf before letting go of the child, causing them to fall to the floor.

Program Design, Management, and Improvement

Performance Area: Systems for Program Management and Improvement

Deficiency - 1302.102(d)(1)(ii)

Summary

Grant Number(s) Cited: 90CM009853

Timeframe for Correction: 30 days

Performance Standard Details

Regulation Text: 1302.102 Achieving program goals. (d) Reporting. (1) A program must submit: (ii) Reports, as appropriate, to the responsible HHS official immediately or as soon as practicable, related to any significant incidents affecting the health and safety of program participants, circumstances affecting the financial viability of the program, breaches of personally identifiable information, or program involvement in legal proceedings, any matter for which notification or a report to state, tribal, or local authorities is required by applicable law.

Finding Details

- The grant recipient did not report to the responsible Health and Human Services official immediately or as soon as practicable, any significant incident affecting the health and safety of program participants.

Additional details from this review event:

- The grant recipient had a child health and safety incident occur on June 11, 2024; however, the recipient did not report the incident to the ACF Regional Office.
- The ACF Regional Office learned of the incident after it was reported to the Early Childhood Learning and Knowledge Center on June 21, 2024, through a complaint.

----- End of Report -----



September 20, 2024

Sandra Carton, Regional Program Manager
Department of Health and Human Services
Administration for Children and Families
Region XII Office of Head Start
220 C Street, SW
Washington, DC 20024

Dear Ms. Carton,

As a result of the area of non-compliance and deficiency notification given to GLCAP during the July 15, 2024, monitoring review of an incident in the Migrant and Seasonal Head Start program, GLCAP will develop comprehensive corrective action plans to prevent the occurrence of incidents of this nature in the future.

To successfully implement corrective action, GLCAP requests approval to extend the amount of time to correct the deficiency from October 20, 2024, to April 30, 2025. A key component of correcting the deficiency will be the review and revision of the incident reporting procedure as well as development of flow chart to ensure proper incident reporting. Staff training will be provided on the revised procedure and the new reporting system as well.

In addition, GLCAP requests approval to extend the amount of time to correct the area of non-compliance from January 19, 2025, to April 30, 2025. Key components of correcting the area of non-compliance will be the review and revision of existing procedures, and staff training, particularly on the new Standards of Conduct in the revised Head Start Program Performance Standards.

This extension will ensure GLCAP has adequate time available to develop a reasonable and obtainable corrective action plan including the development of a new management system for incident reporting and staff training on the incident reporting system, standards of conduct and behavior management strategies. Given that staff are laid off as early as November 1, 2024, and return as late as April 28, 2025, we need additional time to ensure staff are fully trained on the components of the corrective action plans. The development of corrective action plans is currently in process and will be completed in partnership with the T/TA team prior to the staff's return from layoff. Training will be provided to all staff on these new systems and procedures

as they return from layoff beginning in January 2025 and will conclude on or before April 30, 2025.

Your consideration of this request is appreciated. If you have any questions or need additional information, please let me know.

Sincerely,

A handwritten signature in blue ink, appearing to read "Cory Stine". The signature is fluid and cursive, with the first name "Cory" and last name "Stine" clearly distinguishable.

Cory Stine
Board Chairperson



ADMINISTRATION FOR
CHILDREN & FAMILIES

Office of Head Start | Region 12 | Office of Grants Management, 330 C Street, 3rd Floor, SW, Washington, DC 20024
www.eclkc.ohs.acf.hhs.gov

September 24, 2024

Cory Stine, Board Chairperson
Great Lakes Community Action Partnership (GLCAP)
27 S. Front Street
P.O. Box 590
Fremont, Ohio 43420

Grant Numbers: 90CM009853

Mr. Stine:

Great Lakes Community Action Partnership (GLCAP) monitoring review report, received by the organization on September 16, 2024 specified a correction period of 120 days for one non compliance related to 1) supervision of children and 30 days for one deficiency related to 2) timely reporting. In your letter dated September 20, 2024 GLCAP requested an extension of the correction period until April 30, 2025 to allow the organization sufficient time to fully correct this deficiency and noncompliance.

GLCAP's request for an extension indicated sufficient time is not available to implement all corrective action steps prior to the correction period end date of October 20, 2024 for the deficiency January 19, 2024, for the noncompliance to ensure you can create and implement a corrective action plan. Taking into consideration that staff are on staggered layoff status until March and April of 2025 you are not able to implement and evaluate your proposed plan to correct these monitoring report findings. With this extension you will be able to fully implement training, focus groups, and new processes to ensure the findings are corrected and will be able to determine the effectiveness of the plan once implemented across the program.

Region XII Office approves the request for an extension of the correction period. The new date for correction is May 1, 2025. A follow-up review will be conducted immediately following the end of the corrective action period to validate full correction of each finding.

If you have any questions regarding this letter or require technical assistance, please contact Linda Cooper, Program Specialist, at (240) 486-3025 or email @ Linda.Cooper@acf.hhs.gov.

Sincerely,

Sandra Carton
Regional Program Director, Region XII
Office of Head Start

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cc: Jacquie Wells, MSHS Head Start Director
Ruthann House, CEO/Executive Director
Heather O'Connor, Policy Council Chair,
MSHS