



ADMINISTRATION FOR
CHILDREN & FAMILIES

Office of Head Start | 330 C St., SW, 4th Floor, Washington DC 20201 | eclkc.ohs.acf.hhs.gov

August 27, 2024

Great Lakes Community Action Partnership

Re: Grant No. 90CM009853

Dear Grant Recipient:

The Administration for Children and Families (ACF), Office of Head Start (OHS) recently conducted a monitoring review of your program. The attached report contains information about your agency's performance and compliance with the requirements of the Head Start Program Performance Standards, Public Law 110-134, Improving Head Start for School Readiness Act of 2007, and other applicable regulations.

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.

If the report has findings the corrective action period will begin 72 hours from the time this email was sent.

Sincerely,

OHS Monitoring Team



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

A handwritten signature in black ink that reads "Khari M. Garvin".

Date: 08/26/2024

Mr. Khari M. Garvin

Director, Office of Head Start

From June 18, 2024 to June 24, 2024, the Administration for Children and Families (ACF) conducted a monitoring review of Great Lakes Community Action Partnership Head Start program to determine whether the previously identified findings had been corrected. The Office of Head Start (OHS) would like to thank your 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, Authorizing Official/Board Chair, as legal notice to your agency of the results of the program review.

Based on the information gathered during this review, we have closed the previously identified findings which are included in this report. For any previous findings that are not included in this report and remain open, the recipient will receive a future follow-up review to determine the compliance status of those findings.

Please contact your Regional Office for guidance should you have any questions or concerns.

DISTRIBUTION OF THE REPORT

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

Ms. Sandra Carton, Regional Program Manager

Mrs. Ruthann House, Chief Executive Officer/Executive Director

Mrs. Jacquie Wells, Head Start Director

Glossary of Terms

Compliant	No findings. Meets requirements of Head Start Program Performance Standard.
Area of Concern	An area for which the agency needs to improve performance. These issues should be discussed with the recipient's Regional Office of Head Start for possible technical assistance.
Area of Noncompliance	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 area of performance. This status requires a written timeline of correction and possible technical assistance or guidance from the 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

Service Area	Applicable Standards	Grant Number(s)	Primary Review Finding Status(s)	Timeframe for Correction	Follow-up Compliance Level
Monitoring and Implementing Quality Health Services	1302.47(b)(1)(iii)	90CM009853	DEF	N/A	Corrected

Safety Practices (Health Data Tour)

RAN **11/06/2023** **DEF** **1302.47(b)(1)(iii)** **Timeframe for Correction: 168 days**

1302.47 Safety practices. (b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with 1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety. This system must ensure: (1) Facilities. All facilities where children are served, including areas for learning, playing, sleeping, toileting, and eating are, at a minimum: (iii) Free from pollutants, hazards and toxins that are accessible to children and could endanger children's safety.

The grant recipient did not develop and implement a system of management to ensure all facilities where children were served were free from pollutants, hazards, and toxins that were accessible to and could endanger children's safety. On October 24, 2023, an Early Head Start (EHS) teacher in class 1 at the Napoleon Center used a spray containing melatonin and essential oils in the air and on the cots and blankets of 5 children between 18 months and 2 years old.

A review of the incident report and witness statements found that on October 24, 2023, the EHS co-teacher told the center specialist that the other EHS teacher used a spray containing melatonin, lavender, and other essential oils in the air and on the children's cots and blankets to soothe them to sleep during naptime. The center specialist went to the classroom and found the spray on the counter next to the sink. When asked, the EHS teacher admitted using the spray to help the children sleep. The grant recipient estimated the EHS teacher used the spray for less than 1 week.

The Head Start director stated the incident resulted from a lack of training. The program planned to work with the Regional Training and Technical Assistance Network to schedule training and identify additional action steps to be taken.

The Head Start director reported the program contacted all parents to inform them of what had occurred. The program reported to state licensing on October 24 and to the ACF Regional Office on October 25, 2023. The program terminated the EHS teacher on October 24, 2023, for violating the standards of conduct, negligence that endangered the life of another, and violating the licensing standards.

The grant recipient did not develop and implement a system of management to ensure all facilities where children were served were free from pollutants, hazards, and toxins that were accessible to and could endanger children's safety; therefore, it was not in compliance with the regulation.

Follow-up

Corrected

Timeframe for Correction: N/A

The grant recipient developed and implemented a system of management to ensure all facilities where children were served were free from pollutants, hazards, and toxins that were accessible to and could endanger children's safety.

The grant recipient revised policies, trained staff, and increased monitoring.

In an interview, the Head Start director stated the grant recipient revised its safe environments policy to prohibit sleeping aids and toxic substances on the premises. A review of the policy confirmed the revisions.

Additionally, a review of the grant recipient's revised center plans found that teachers were required to store their personal belongings in a locked closet or cabinet.

The grant recipient received training from the Regional Training and Technical Assistance team on implementing a culture of safety and active supervision. The grant recipient also trained staff members on safe environments. A review of training agendas and sign-in sheets confirmed the training occurred.

The grant recipient implemented a daily health and safety checklist to ensure the classroom was free from pollutants, hazards, and toxins and that all medications were approved. A review of completed checklists confirmed staff utilized the daily form.

The health advocates conducted unannounced and announced classroom visits monthly to verify compliance with the health and safety checklist. Management reviewed the completed health and safety checklists to identify and address concerns. A review of completed health and safety checklist monitoring forms found no safety issues reported by the health advocates.

The grant recipient developed and implemented a system of management to ensure all facilities where children were served were free from pollutants, hazards, and toxins that were accessible to and could endanger children's safety. This area of deficiency is corrected.

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