September 22, 2010

TO: Yvette Sanchez Fuentes  
Director, Office of Head Start  
Administration for Children and Families

FROM: /George M. Reeb/  
Acting Deputy Inspector General for Audit Services


Attached, for your information, is an advance copy of our final report on Albany Community Action Partnership’s (the Grantee) compliance with Head Start health and safety standards. We will issue this report to the Grantee within 5 business days. The Administration for Children and Families, Office of Head Start, requested this review.

If you have any questions or comments about this report, please do not hesitate to call me, or your staff may contact Lori S. Pilcher, Assistant Inspector General for Grants, Internal Activities, and Information Technology Audits, at (202) 619-1175 or through email at [Lori.Pilcher@oig.hhs.gov](mailto:Lori.Pilcher@oig.hhs.gov) or James P. Edert, Regional Inspector General for Audit Services, Region II, at (212) 264-4620 or through email at [James.Edert@oig.hhs.gov](mailto:James.Edert@oig.hhs.gov). Please refer to report number A-02-09-02018.

Attachment
September 23, 2010

Report Number: A-02-09-02018

Ms. Kathleen Cloutier
Executive Director
Albany Community Action Partnership
333 Sheridan Avenue
Albany, NY 12206

Dear Ms. Cloutier:

Enclosed is the U.S. Department of Health & Human Services (HHS), Office of Inspector General (OIG), final report entitled *Review of Head Start Health and Safety Standards at Albany Community Action Partnership*. We will forward a copy of this report to the HHS action official noted on the following page for review and any action deemed necessary.

The HHS action official will make final determination as to actions taken on all matters reported. We request that you respond to this official within 30 days from the date of this letter. Your response should present any comments or additional information that you believe may have a bearing on the final determination.


If you have any questions or comments about this report, please do not hesitate to call me, or contact John J. Madigan, Audit Manager, at (518) 437-9390, extension 224, or through email at [John.Madigan@oig.hhs.gov](mailto:John.Madigan@oig.hhs.gov). Please refer to report number A-02-09-02018 in all correspondence.

Sincerely,

/Richard Schlitt/ for
James P. Edert
Regional Inspector General
for Audit Services

Enclosure
Direct Reply to HHS Action Official:

Ms. Carolyn Baker-Goode
Acting Regional Program Manager
Administration for Children and Families
26 Federal Plaza, Room 4114
New York, NY  10278
Department of Health & Human Services
OFFICE OF
INSPECTOR GENERAL

REVIEW OF HEAD START
HEALTH AND SAFETY STANDARDS AT
ALBANY COMMUNITY ACTION PARTNERSHIP

Daniel R. Levinson
Inspector General

September 2010
A-02-09-02018
The mission of the Office of Inspector General (OIG), as mandated by Public Law 95-452, as amended, is to protect the integrity of the Department of Health & Human Services (HHS) programs, as well as the health and welfare of beneficiaries served by those programs. This statutory mission is carried out through a nationwide network of audits, investigations, and inspections conducted by the following operating components:

**Office of Audit Services**

The Office of Audit Services (OAS) provides auditing services for HHS, either by conducting audits with its own audit resources or by overseeing audit work done by others. Audits examine the performance of HHS programs and/or its grantees and contractors in carrying out their respective responsibilities and are intended to provide independent assessments of HHS programs and operations. These assessments help reduce waste, abuse, and mismanagement and promote economy and efficiency throughout HHS.

**Office of Evaluation and Inspections**

The Office of Evaluation and Inspections (OEI) conducts national evaluations to provide HHS, Congress, and the public with timely, useful, and reliable information on significant issues. These evaluations focus on preventing fraud, waste, or abuse and promoting economy, efficiency, and effectiveness of departmental programs. To promote impact, OEI reports also present practical recommendations for improving program operations.

**Office of Investigations**

The Office of Investigations (OI) conducts criminal, civil, and administrative investigations of fraud and misconduct related to HHS programs, operations, and beneficiaries. With investigators working in all 50 States and the District of Columbia, OI utilizes its resources by actively coordinating with the Department of Justice and other Federal, State, and local law enforcement authorities. The investigative efforts of OI often lead to criminal convictions, administrative sanctions, and/or civil monetary penalties.

**Office of Counsel to the Inspector General**

The Office of Counsel to the Inspector General (OCIG) provides general legal services to OIG, rendering advice and opinions on HHS programs and operations and providing all legal support for OIG’s internal operations. OCIG represents OIG in all civil and administrative fraud and abuse cases involving HHS programs, including False Claims Act, program exclusion, and civil monetary penalty cases. In connection with these cases, OCIG also negotiates and monitors corporate integrity agreements. OCIG renders advisory opinions, issues compliance program guidance, publishes fraud alerts, and provides other guidance to the health care industry concerning the anti-kickback statute and other OIG enforcement authorities.
Notices

THIS REPORT IS AVAILABLE TO THE PUBLIC
at http://oig.hhs.gov

Section 8L of the Inspector General Act, 5 U.S.C. App., requires that OIG post its publicly available reports on the OIG Web site.

OFFICE OF AUDIT SERVICES FINDINGS AND OPINIONS

The designation of financial or management practices as questionable, a recommendation for the disallowance of costs incurred or claimed, and any other conclusions and recommendations in this report represent the findings and opinions of OAS. Authorized officials of the HHS operating divisions will make final determination on these matters.
EXECUTIVE SUMMARY

BACKGROUND

Within the U.S. Department of Health & Human Services, the Administration for Children and Families, Office of Head Start (OHS), administers the Head Start and Early Head Start programs. We refer collectively to both programs as the Head Start program. In fiscal year (FY) 2009, Congress appropriated $7.1 billion to fund the program’s regular operations. The American Recovery and Reinvestment Act of 2009, P.L. No. 111-5 (Recovery Act), provides an additional $2.1 billion for the Head Start program during FYs 2009 and 2010.

Albany Community Action Partnership (the Grantee) provides early learning services to children aged 3 to 5 years and families through the Head Start program at 13 facilities throughout the Albany, New York, area. For program year March 1, 2009, through February 28, 2010, OHS awarded approximately $4.35 million in Federal Head Start funds to the Grantee to provide services to 469 children. On July 2, 2009, the Grantee also received $253,887 in Recovery Act funding.

OBJECTIVE

Our objective was to determine whether the Grantee complied with applicable Federal and State requirements on ensuring the health and safety of children in its care.

SUMMARY OF FINDINGS

The Grantee did not fully comply with Federal and State requirements on ensuring the health and safety of children in its care. Specifically, as of June 2009:

- The files on 38 of the Grantee’s 110 Head Start employees and 1 of the 6 contracted busdrivers showed that the Grantee had not obtained (1) criminal background checks, (2) timely criminal background checks, or (3) child abuse and maltreatment checks. The files on the 72 remaining employees had all required documents. However, none of the Grantee’s six contracted busdrivers had been screened for tuberculosis.

- The Grantee’s nine childcare facilities that we reviewed did not meet all Federal Head Start and State regulations on protecting children from unsafe materials and equipment.

- Four of the nine childcare facilities that we reviewed did not provide a fully secure environment for the children in their care.

These deficiencies occurred because the Grantee did not have adequate procedures or did not consistently follow procedures that were in place to ensure that it complied with Federal and State health and safety requirements. The Grantee’s failure to follow these requirements jeopardized the health and safety of children in its care.
RECOMMENDATIONS

We recommend that the Grantee develop and consistently follow procedures to ensure that:

- all employee and contracted busdriver files contain documentation of timely criminal background checks and child abuse and maltreatment register checks,

- all contracted busdrivers have an initial health examination that includes screening for tuberculosis,

- all unsanitary and unsafe conditions are corrected in a timely manner, and

- all facilities are secure.

GRANTEE COMMENTS

In written comments on our draft report, the Grantee generally concurred with our findings and described its completed and ongoing actions to address deficiencies that we identified. In addition, the Grantee provided documentation showing that it had obtained criminal record checks on three employees and State child abuse and maltreatment register checks on four other employees. The Grantee also provided evidence that Ogden Mills Head Start had the required number of sanitary toilets. Additionally, the Grantee provided technical comments. The Grantee’s comments, excluding attachments containing sensitive information, are included as Appendix C.

OFFICE OF INSPECTOR GENERAL RESPONSE

Although the Grantee’s additional documentation showed that the Grantee had performed criminal record checks on three employees, these checks were performed after we began our fieldwork and were untimely. We accepted the documentation showing that the Grantee had obtained State child abuse and maltreatment register checks on four employees and that Ogden Mills Head Start had the required number of toilets. We revised our findings accordingly, and we addressed the Grantee’s technical comments as appropriate.
# TABLE OF CONTENTS

## INTRODUCTION

### BACKGROUND
- Federal Head Start Program
- Federal Regulations for Head Start Grantees
- Albany Community Action Partnership
- Office of Inspector General Audits

### OBJECTIVE, SCOPE, AND METHODOLOGY
- Objective
- Scope
- Methodology

## FINDINGS AND RECOMMENDATIONS

### PREEMPLOYMENT CHECKS
- Criminal Background Checks
- Child Abuse and Maltreatment Register Checks
- Health Examinations

### MATERIAL AND EQUIPMENT SAFETY
- Federal and State Regulations
- Grantee’s Compliance With Material and Equipment Safety Regulations

### FACILITY SECURITY
- Federal and State Regulations
- Grantee’s Compliance With Facility Security Regulations

### INADEQUATE OR INCONSISTENTLY FOLLOWED PROCEDURES

### RECOMMENDATIONS

### GRANTEE COMMENTS

### OFFICE OF INSPECTOR GENERAL RESPONSE
APPENDIXES

A: LACK OF COMPLIANCE WITH HEALTH AND SAFETY REGULATIONS

B: LACK OF COMPLIANCE WITH FACILITY SECURITY REGULATIONS

C: GRANTEE COMMENTS
INTRODUCTION

BACKGROUND

Federal Head Start Program

Title VI of the Omnibus Budget Reconciliation Act of 1981 established Head Start as a Federal discretionary grant program. The major program objectives include promoting school readiness and enhancing the social and cognitive development of low-income children by providing health, educational, nutritional, and social services. In 1994, the Head Start program was expanded to establish Early Head Start, which serves children from birth to 3 years of age. We refer collectively to both programs as the Head Start program.

Within the U.S. Department of Health & Human Services, the Administration for Children and Families (ACF), Office of Head Start (OHS), administers the Head Start program. In fiscal year (FY) 2009, Congress appropriated $7.1 billion to fund Head Start’s regular operations.

The American Recovery and Reinvestment Act of 2009, P.L. No. 111-5 (Recovery Act), provides an additional $2.1 billion for the Head Start program during FYs 2009 and 2010. These funds are intended for activities such as expanding enrollment, funding cost-of-living wage increases for grantees, upgrading centers and classrooms, and bolstering training and technical assistance.

Federal Regulations for Head Start Grantees

Pursuant to Federal Head Start regulations (45 CFR § 1304.53(a)(7)), Head Start grantees must provide for the maintenance, repair, safety, and security of all Head Start facilities. These regulations also specify that facilities used by Head Start grantees for regularly scheduled, center-based activities must comply with State and local licensing regulations. Alternatively, if State and local licensing standards are less stringent than the Head Start regulations or if no State licensing standards are applicable, grantees must ensure that their facilities comply with the Head Start Program Performance Standards related to health and safety (45 CFR § 1306.30(c)).

Albany Community Action Partnership

Albany Community Action Partnership (the Grantee), a nonprofit community action agency, provides early learning services to children aged 3 to 5 years and families through the Head Start program at 13 licensed facilities throughout the Albany, New York, metropolitan area. For program year March 1, 2009, through February 28, 2010, OHS awarded approximately $4.35 million in Federal Head Start funds to the Grantee to provide services to 469 children. On July 2, 2009, the Grantee also received $253,887 in Recovery Act funding.

1 The Grantee’s legal name is Albany County Opportunity, Inc.; however, it does business as Albany Community Action Partnership.
Office of Inspector General Audits

This audit is one of a series of audits that address the health and safety of children who attend Head Start programs. We are conducting these audits in response to the $2.1 billion in Recovery Act funds appropriated for the Head Start program in FYs 2009 and 2010.

OBJECTIVE, SCOPE, AND METHODOLOGY

Objective

Our objective was to determine whether the Grantee complied with applicable Federal and State requirements on ensuring the health and safety of children in its care.

Scope

Our review covered the Grantee’s employee records and 9 of its 13 facilities as of June 2009. To gain an understanding of the Grantee’s operations, we conducted a limited review of the Grantee’s internal controls as they related to our audit objective.

We performed our fieldwork from June 1 through July 1, 2009, at the Grantee’s administrative office and at 9 of its 13 childcare facilities in Albany, New York.

Methodology

To accomplish our objective, we:

- selected the Grantee based on prior risk analyses and discussions with ACF officials;
- reviewed Federal and State laws, regulations, and policies related to Federal grant awards and the Head Start program;
- reviewed the Grantee’s current grant award documents;
- reviewed the Grantee’s files on all 110 current Head Start employees;
- reviewed the transportation contractor’s files on all 6 of the Grantee’s busdrivers;
- reviewed the Grantee’s licenses and documentation of fire inspections;
- visited 9 of the Grantee’s childcare facilities; and
- discussed our preliminary findings with Grantee and ACF officials.

---

2 We excluded four Head Start facilities operated by the Grantee within public schools.

3 The 110 current employees were partially or fully funded by the Head Start grant award.
We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objective.

FINDINGS AND RECOMMENDATIONS

The Grantee did not fully comply with Federal and State requirements on ensuring the health and safety of children in its care. Specifically, as of June 2009:

- The files on 38 of the Grantee’s 110 Head Start employees and 1 of the 6 contracted busdrivers showed that the Grantee had not obtained (1) criminal background checks, (2) timely criminal background checks, or (3) child abuse and maltreatment checks. The files on the 72 remaining employees had all required documents. However, none of the Grantee’s six contracted busdrivers had been screened for tuberculosis.

- The Grantee’s nine childcare facilities that we reviewed did not meet all Federal Head Start and State regulations on protecting children from unsafe materials and equipment.

- Four of the nine childcare facilities that we reviewed did not provide a fully secure environment for the children in their care.

These deficiencies occurred because the Grantee did not have adequate procedures or did not consistently follow procedures that were in place to ensure that it complied with Federal and State health and safety requirements. The Grantee’s failure to follow these requirements jeopardized the health and safety of children in its care.

PREEMPLOYMENT CHECKS

Criminal Background Checks

Pursuant to section 648A(g) of the Head Start Act (42 U.S.C. § 9843a(g)), a Head Start grantee may not hire an individual on a permanent or nonpermanent basis until it obtains (1) a State, tribal, or Federal criminal record check covering all jurisdictions where the grantee provides Head Start services to children; (2) a State, tribal, or Federal criminal record check as required by the law of the jurisdiction where the grantee provides Head Start services; or (3) a criminal record check as otherwise required by Federal law.

In New York State, child daycare centers must perform criminal history record checks on employees and volunteers pursuant to section 390-b.1.(a) of the New York Social Services Law.4

---

4 Child daycare centers in New York were required to perform criminal history records checks on employees and volunteers hired prior to December 5, 2000, upon applying for license renewal.
In addition, pursuant to section 509-d(2)(a) of the New York Vehicle and Traffic Law, motor carriers are required to request that the Department of Motor Vehicles initiate criminal history checks for persons employed as drivers of school buses.\(^5\)

Our review of the Grantee’s files on all 110 current employees and the transportation contractor’s files on all 6 contracted busdrivers found that the Grantee did not comply with all Federal and State preemployment requirements. Specifically:

- The files on two teacher assistants contained no evidence of criminal record checks.
- Thirty-five employees and one contracted busdriver did not have timely criminal record checks.\(^6\)

**Child Abuse and Maltreatment Register Checks**

Section 424-a.1.(b)(i) of the New York Social Services Law requires that childcare agencies query the State’s central register for child abuse and maltreatment by any applicant who potentially will have regular and substantial contact with children.

Employee files did not contain evidence that the Grantee had queried the State’s child abuse and maltreatment register for 1 of its 110 employees.

**Health Examinations**

Pursuant to 45 CFR § 1304.52(k)(1), grantees must ensure that each staff member has an initial health examination that includes screening for tuberculosis. Pursuant to 45 CFR § 1304.3(a)(18), “staff” is defined as “paid adults who have responsibilities related to children and their families who are enrolled in Early Head Start and Head Start programs.” Moreover, pursuant to 45 CFR § 1310.16(b)(3), Head Start agencies must conduct a medical examination on busdrivers before they can begin work.

Neither the Grantee’s files nor the transportation contractor’s files contained evidence that any of the Grantee’s six contracted busdrivers had an initial health examination that included screening for tuberculosis.

---

\(^5\) State regulations define “school bus” as including “every motor vehicle which … has a seating capacity of 11 or more adult passengers in addition to the driver, and which is used for the transportation of persons under the age of 21 … to a place of vocational, academic or religious instruction or religious service, including nursery schools, day care centers and camps” (15 NYCRR § 6.2(b)(2)). The buses operated by the Grantee’s contracted motor carrier met this definition.

\(^6\) After our site visits, Grantee officials said that they had not obtained a criminal record check on a teacher because the State Department of Education had obtained the check. However, documentation of the criminal record check was not included in the employee’s file. After our fieldwork, the Grantee obtained documentation of a criminal record check on this employee.
By not ensuring that all employees and contracted busdrivers who supervised or had routine unsupervised contact with children met all preemployment requirements, the Grantee potentially jeopardized the safety of children in its care.

**MATERIAL AND EQUIPMENT SAFETY**

**Federal and State Regulations**

Federal Head Start regulations require grantees to provide for the maintenance, repair, and safety of all Head Start facilities, materials, and equipment (45 CFR § 1304.53(a)(7)). In addition, readily available and well-supplied first aid kits must be maintained at each Head Start facility (45 CFR § 1304.22(f)). Further, indoor and outdoor premises must be cleaned daily and kept free from undesirable and hazardous materials and conditions (45 CFR § 1304.53(a)(10)(viii)).

Pursuant to 45 CFR § 1306.30(c), grantees must ensure that Head Start facilities comply with State and local licensing requirements. If these licensing standards are less comprehensive or less stringent than the Head Start regulations or if no State or local licensing standards are applicable, grantees must ensure that their facilities comply with the Head Start Program Performance Standards related to health and safety.

State regulations (Title 18 § 418-1 of the New York Compilation of Codes, Rules, & Regulations (NYCRR)) specify requirements for buildings and equipment and for health and safety at child daycare facilities, including:

- All matches, lighters, medicines, drugs, cleaning materials, detergents, aerosol cans, and other poisonous or toxic materials must be kept in a place inaccessible to children.

- Protective caps, covers, or permanently installed obstructive devices must be used on all electrical outlets that are accessible to children.

- Convenient, adequate, and sanitary toilet facilities must be provided in a separate, properly ventilated room readily accessible to children.

- Garbage receptacles must be covered and cleaned as needed after emptying.

- Handbags, backpacks, or briefcases belonging to adults must be stored in such a manner that they are not accessible to children.

- Each center must be equipped with a portable first aid kit that is accessible for emergency treatment. The first aid kit must be stocked to treat a broad range of injuries and situations and must be restocked as necessary. The first aid kit and any other first aid supplies must be kept in a clean container or cabinet not accessible to children.

- Peeling or damaged paint or plaster must be repaired promptly.
• Suitable precautions must be taken to eliminate all conditions that pose a safety or health hazard in areas accessible to children.

• Outdoor equipment such as swings, slides, and climbing apparatus must be installed and used in accordance with the manufacturer’s specifications and instructions, be in good repair, and be placed in a safe location. In addition, materials and play equipment used by children must be sturdy and free from rough edges and sharp corners.

**Grantee’s Compliance With Material and Equipment Safety Regulations**

The Grantee’s childcare facilities did not meet all Federal Head Start and State health and safety regulations on protecting children from unsafe conditions. We noted deficiencies at all nine facilities that we reviewed.

*Albany Community Action Partnership Early Learning Center (visited June 1, 2009)*

• A children’s bathroom had no paper towels.

• A handbag belonging to an adult was accessible to children.

• Carpets in the classrooms were not secured to the floor and presented tripping hazards.

• A first aid kit contained expired items. For example, antiseptic cream was nearly 5 years past its expiration date (Appendix A, Photograph 1).

• Paint above a base molding in a classroom was peeling (Appendix A, Photograph 2).

• Boxes in a corner of the gymnasium presented a toppling hazard (Appendix A, Photograph 3).

*Lincoln Square Head Start (visited June 1, 2009)*

• Cleaning materials and other toxic materials were accessible to children. For example, a bottle of floor cleaner was on the floor of a closet accessible to children (Appendix A, Photograph 4).

• Electrical outlets in the classrooms lacked protective caps.

• Children’s bathrooms had no toilet paper (Appendix A, Photograph 5).

• A garbage receptacle in a children’s bathroom was not covered.

• A first aid kit contained expired items.

• A bookcase in a classroom was unstable and presented a toppling hazard.
• Carpets in the classrooms were not secured to the floor and presented a tripping hazard.

• An outdoor climbing apparatus was not in good repair and contained sharp edges. Specifically, a structural support pole was not attached to the apparatus and presented a hazardous condition (Appendix A, Photograph 6).

**Olivia Rorie Head Start (visited June 1, 2009)**

• Electrical outlets in a classroom lacked protective caps.

• A children’s bathroom had no paper towels.

• Garbage receptacles in the children’s bathrooms were not covered.

• Carpets in the classrooms were not secured to the floor and presented a tripping hazard.

**Ann Klose Head Start (visited June 2, 2009)**

• Electrical outlets in the classroom lacked protective caps (Appendix A, Photograph 7).

• Children’s bathrooms had no paper towels.

• A first aid kit contained expired items.

• Paint on a wall in the classroom was chipped.

• Carpet in the classroom was not secured to the floor and presented a tripping hazard.

**Kings Kids Head Start (visited June 2, 2009)**

• Cleaning materials and other toxic materials were accessible to children in the classroom.

• A garbage receptacle in the classroom was not covered (Appendix A, Photograph 8).

• A first aid kit contained expired items.

• A rake and shovel were left in the main entrance walkway.

**North Albany YMCA (visited June 2, 2009)**

• Garbage receptacles in the children’s bathroom and classroom were not covered.
Ogden Mills Head Start (visited June 2, 2009)

- Employees’ handbags were accessible to children in the classroom (Appendix A, Photograph 9).
- Carpet in the classroom was not secured to the floor and presented a tripping hazard (Appendix A, Photograph 10).

Watervliet Head Start (visited June 2, 2009)

- Electrical outlets in the classroom lacked protective caps.
- Carpet in the classroom was not secured to the floor and presented a tripping hazard.

Ravena Head Start (visited June 3, 2009)

- Garbage receptacles in the classroom were not covered.
- A first aid kit contained expired items.
- Carpet in the classroom was not secured to the floor and presented a tripping hazard.

By not ensuring that all facilities were kept free from unsafe conditions, the Grantee jeopardized the safety of children in its care.

FACILITY SECURITY

Federal and State Regulations

Pursuant to 45 CFR § 1304.53(a)(7), grantees must provide for the security of all Head Start facilities. Pursuant to 45 CFR § 1306.30(c), grantees also must ensure that Head Start facilities comply with any State and local licensing requirements.

State regulations (18 NYCRR § 418-1.5(f)) state that child daycare centers must provide and use barriers to restrict children from unsafe areas.

Grantee’s Compliance With Facility Security Regulations

The Grantee’s childcare facilities did not meet all Federal Head Start and State health and safety regulations on ensuring facility security. We defined “facility security” as limiting public access to the facilities and preventing children from leaving the facilities. We noted deficiencies at four of the nine facilities that we reviewed.
**Albany Community Action Partnership Early Learning Center (visited June 1, 2009)**

- An unlocked hallway door led to a stairwell and a door to the outside. Children could exit the facility through these doors (Appendix B, Photograph 1).

**Ann Klose Head Start (visited June 2, 2009)**

- An open exterior door was accessible to children and could permit unauthorized persons to enter the facility (Appendix B, Photograph 2).

**Ogden Mills Head Start (visited June 2, 2009)**

- The main hallway was accessible to the public through an unlocked exterior door and could permit unauthorized persons to enter classrooms (Appendix B, Photograph 3).

**Watervliet Head Start (visited June 2, 2009)**

- The facility was accessible to the public through an unlocked main door, which had an “Unlocked Door” sign (Appendix B, Photograph 4).

By not ensuring that all facilities were secure, the Grantee jeopardized the safety of children in its care.

**INADEQUATE OR INCONSISTENTLY FOLLOWED PROCEDURES**

These deficiencies occurred because the Grantee did not have adequate procedures or did not consistently follow procedures that were in place to ensure that it complied with Federal and State health and safety requirements.

**RECOMMENDATIONS**

We recommend that the Grantee develop and consistently follow procedures to ensure that:

- all employee and contracted busdriver files contain documentation of timely criminal background checks and child abuse and maltreatment register checks,
- all contracted busdrivers have an initial health examination that includes screening for tuberculosis,
- all unsanitary and unsafe conditions are corrected in a timely manner, and
- all facilities are secure.
GRANTEE COMMENTS

In written comments on our draft report, the Grantee generally concurred with our findings and described its completed and ongoing actions to address deficiencies that we identified. In addition, the Grantee provided documentation showing that it had obtained criminal record checks on three employees and State child abuse and maltreatment register checks on four other employees. The Grantee also provided evidence that Ogden Mills Head Start had the required number of sanitary toilets. Additionally, the Grantee provided technical comments. The Grantee’s comments, excluding attachments containing sensitive information, are included as Appendix C.

OFFICE OF INSPECTOR GENERAL RESPONSE

Although the Grantee’s additional documentation showed that the Grantee had performed criminal record checks on three employees, these checks were performed after we began our fieldwork and were untimely. We accepted the documentation showing that the Grantee had obtained State child abuse and maltreatment register checks on four employees and that Ogden Mills Head Start had the required number of toilets. We revised our findings accordingly, and we addressed the Grantee’s technical comments as appropriate.
APPENDIXES
APPENDIX A: LACK OF COMPLIANCE WITH HEALTH AND SAFETY REGULATIONS


Photograph 2 – Taken at ACAP Early Learning Center on 6/1/2009 showing paint peeling from a wall above the base molding in a classroom.
Photograph 3 – Taken at ACAP Early Learning Center on 6/1/2009 showing boxes in a corner of the gymnasium that presented a toppling hazard.

Photograph 4 – Taken at Lincoln Square on 6/1/2009 showing a bottle of floor cleaner on the floor of a closet accessible to children.
Photograph 5 – Taken at Lincoln Square on 6/1/2009 showing an empty toilet paper dispenser.

Photograph 6 – Taken at Lincoln Square on 6/1/2009 showing an outdoor climbing apparatus that was not in good repair and contained sharp edges. A structural support pole was not attached to the apparatus and presented a hazardous condition.
Photograph 7 – Taken at Ann Klose on 6/2/2009 showing uncovered electrical outlets in the classroom.

Photograph 8 – Taken at Kings Kids on 6/2/2009 showing an uncovered garbage receptacle in the classroom.
Photograph 9 – Taken at Ogden Mills on 6/2/2009 showing unsecured personal handbags in the classroom.

Photograph 10 – Taken at Ogden Mills on 6/2/2009 showing carpet edges not bound or fastened to the floor.
APPENDIX B: LACK OF COMPLIANCE WITH FACILITY SECURITY REGULATIONS

Photograph 1 – Taken at ACAP Early Learning Center on 6/1/2009 showing an unsecured door on the right with access to a stairwell and the outside.

Photograph 2 – Taken at Ann Klose on 6/2/2009 showing an open exterior door accessible to children and the public.
Photograph 3 – Taken at Ogden Mills on 6/2/2009 showing the main hallway, which was accessible to the public through an unlocked exterior door and permitted unauthorized persons to enter classrooms.

Photograph 4 – Taken at Watervliet on 6/2/2009 showing the facility’s main door with a sign that read “Unlocked Door.”
APPENDIX C: GRANTEE COMMENTS

Mr. James Edert
Regional Inspector General for Audit Services
Federal Building
26 Federal Plaza Room 3900
New York, NY 10278

RE: Report #A-02-09-02018

July 25, 2010

Dear Mr. Edert,

Thank you for providing the opportunity to comment on the above referenced draft report of the Head Start Health and Safety Review conducted at our agency on June 1, 2009. It is our practice to positively use the feedback and recommendations elicited from any audit and monitoring review to further improve the quality of our services; and we value your substantive recommendations. We also appreciated the professionalism that your field staff exhibited both while they were here, and in their subsequent interactions with us.

Although the report’s recommendations are very useful to us; we feel that, especially when dealing with child Health & Safety issues, the agency and our customers would gain the most benefit if the observations were brought to our attention at an exit interview, rather than only in a subsequent report. This will ensure that unsafe conditions can be rectified immediately. Fortunately, as you will see from our response, many of the observations were addressed long before we received the written report.

Before we comment on the actions we’ve taken to address your recommendations, I would like to draw your attention to the following discrepancies in your report draft, which I have also discussed with your staff:

- Our legal name is actually Albany County Opportunity, Inc. d/b/a Albany Community Action Partnership
- On Pg 4 there is a reference to the Executive Director’s file when it is actually referring to the Head Start Director’s file. On Pg 4 there is a reference to a teacher whose file contained no evidence of a criminal record check; however we have sent evidence that there was an FBI background check completed in 2007 by NYS Dept of Education that was required in order to receive her state NYS teacher certification
- On Pg 4 there is a reference to a family development specialist whose file contained no evidence of a criminal record check; however we have sent evidence that there was a background check completed on 4/23/09.
- On pg 4 there is a reference to fire employee files that did not contain evidence that we had queried the State's fire certification records, however we have sent evidence that 4 of the 5 employees had been cleared in the NY State Department of Health Fire Registry; a teacher on 9/22/08; a teacher assistant on 9/22/08; and two teacher assistants on 6/1/09.
the power of change

- On Pg 6 the report states "We noted deficiencies at all nine facilities that we reviewed and reported the deficiencies to Grantee officials after completion of our fieldwork." Although we were notified of deficiencies in our personnel files by the field staff, your staff agree that we were not notified of the specific deficiencies at the facilities until receipt of this draft report in July 2010.
- On Pg 7 under Ogden Mills Head Start the report states the number of toilets was inadequate, because there were only 5 toilets for 60 children. We have sent evidence that in fact there are 4 toilets in the facility.

As to the other findings and recommendations, we have included with our comments, a corrective action plan identifying the action taken to correct the issue and what policies and/or procedures that we've implemented to prevent these issues from recurring.

In the past, we had followed the New York State Office of Children and Family Services (OCFS) childcare licensing regulations regarding employee criminal record checks as standard practice for checking employees at our licensed Head Start facilities. The results of the employee criminal record checks done by OCFS often take several weeks before being received. OCFS regulations allow staff to begin work prior to our receiving the results, as long as the person is not left alone with children, which had been, until your review, our standard practice.

Since learning of the Head Start regulation that requires the employee criminal record check to be completed prior to hire, we now solicit a criminal background check electronically through a national service at the same time that we check personal and professional references. This electronic system provides results within 24 hours, and we now use it in addition to the required OCFS background checks to comply with both Head Start and New York regulations.

In April 2009, in connection with our review of worker's compensation claims, we requested a representative from the New York State Insurance Fund (NYSIF) to complete a comprehensive safety inspection of all our facilities and make recommendations to improve the safety of our work areas. The safety inspection was completed by NYSIF on May 11, 2009, and as a result of their June 30th report, we implemented a comprehensive agency-wide safety program which addresses the concerns identified in your report, inclusive of your recommendations. We have provided mandatory safety training for all employees, and have created an agency-wide safety committee responsible for, among other things, conducting monthly safety checks and holding managers accountable for addressing safety concerns timely. I have included a letter from NYSIF verifying the implementation and comprehensiveness of our current safety program.

Implemented corrective actions for each finding can be found in our attached detailed corrective action plan.

Best Regards,

Kathleen Cloutier, ACAP Executive Director
<table>
<thead>
<tr>
<th>OIG Finding</th>
<th>ACAP Corrective Action</th>
<th>Date Completed</th>
<th>ACAP Policy/Procedure Changes</th>
</tr>
</thead>
<tbody>
<tr>
<td>No paper towels in children's bathroom</td>
<td>Children at many of the program sites will often use excessive amounts of paper towels and dispose of them in the toilet. To address this issue, classroom staff dispenses towels on an individual basis to each child who uses the bathroom.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Olivia Rorie</td>
<td>(1) A sign will be placed on each paper towel dispenser indicating &quot;Paper towels dispensed by classroom staff.&quot;</td>
<td>8/1/2019</td>
<td>None at this time.</td>
</tr>
<tr>
<td>- ACAP Early Learning Center</td>
<td>(2) Research will be done to determine alternative options for paper towel dispensers which may better meet the needs of the children and program.</td>
<td>9/30/2019</td>
<td></td>
</tr>
<tr>
<td>- Ann Klose</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A hand bag belonging to an adult was accessible to children</td>
<td>Secured storage space is provided at each Head Start location in the form of locking cabinets, file cabinets or closets.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- ACAP Early Learning Center</td>
<td>(1) Employees will be retrained regarding the need and rationale for securing personal items, such as hand bags prior to the beginning of the school year 2010-2011.</td>
<td>9/10/2010</td>
<td>As part of new employee safety orientation, train classroom staff to use daily safety assessment which includes secure storage of personal items such as hand bags, protective covers on electrical outlets, as well as rationale for these safety needs.</td>
</tr>
<tr>
<td>- Ogden Mills</td>
<td>(2) In addition, the monthly OCFS Fire and Safety Assessment will continue to be completed, which emphasizes the need for hand bags and other personal items to be secured where children cannot access them.</td>
<td>8/25/10</td>
<td>(5) Add completion of a daily safety assessment to Policies and Procedures Manual</td>
</tr>
<tr>
<td></td>
<td>(3) Train classroom staff to use daily safety assessment which includes secure storage of personal items such as hand bags, protective covers on electrical outlets, as well as rationale for these safety needs.</td>
<td>Current</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(4) Refer this safety concern to the Agency Safety Committee</td>
<td>9/10/10</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>9/1/10</td>
<td></td>
</tr>
<tr>
<td>OIG Finding</td>
<td>ACAP Corrective Action</td>
<td>Date Completed</td>
<td>ACAP Policy/Procedure Changes</td>
</tr>
<tr>
<td>-------------</td>
<td>------------------------</td>
<td>----------------</td>
<td>-------------------------------</td>
</tr>
<tr>
<td>Carpets in classrooms were not secured to the floor and created tripping hazards. -ACAP Early Learning Center -Lincoln -Olivia Rorie -Ann Klose -Dighton Mill -Watervliet -Ravenna</td>
<td>Area rugs are used in most classrooms and during the summer are taken up to allow for thorough cleaning of the floors within the classrooms. (1) As classrooms are set up prior to the 2010-2011 school year, all area rugs will be secured with double sided tape. (2) The teachers’ manuals will be modified to include reference to securing area rugs with double sided tape and included in pre-service training. (3) Train classroom staff to use daily safety assessment which includes secure storage of personal items such as hand bags, protective covers on electrical outlets, addressing tripping hazards as well as rational for these safety concerns. (4) Refer this safety concern to the Agency Safety Committee</td>
<td>(1)-9/10/10 (2)-9/10/10 (3)-9/10/10 (4)-8/1/10</td>
<td>The teachers’ manuals will be modified to include reference to securing area rugs with double sided tape and included in pre-service and new employee orientation training. As part of new employee safety orientation, train classroom staff to use daily safety assessment which includes secure storage of personal items such as hand bags, protective covers on electrical outlets, as well as rationale for these safety needs. (5) Add completion of a daily safety assessment to Policies and Procedures Manual</td>
</tr>
<tr>
<td>Boxes in gymnasium presented a tripping hazard. -ACAP Early Learning Center</td>
<td>(1) This item has been corrected. (2) Train classroom staff to use daily safety assessment which includes secure storage of personal items such as hand bags, protective covers on electrical outlets, addressing tripping hazards, unsafe storage of items, as well as rationale for these safety needs. (3) Refer this safety concern to the Agency Safety Committee</td>
<td>(1)-6/9/09 (2)-9/10/10 (3)-9/10/10 (4)-8/25/10</td>
<td>As part of new employee safety orientation, train classroom staff to use daily safety assessment which includes secure storage of personal items such as hand bags, protective covers on electrical outlets, as well as rationale for these safety needs. (4) Add completion of a daily safety assessment to Policies and Procedures Manual</td>
</tr>
<tr>
<td>OIG Finding</td>
<td>ACAP Corrective Action</td>
<td>Date Completed</td>
<td>ACAP Policy/Procedure Changes</td>
</tr>
<tr>
<td>-------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------</td>
<td>---------------</td>
<td>---------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>First Aid Kit contained expired items</td>
<td>ACAP Head Start Policy outlines the items that are required to be in the first aid kit(s) at each Head Start location.</td>
<td>(5)-9/23/10</td>
<td>(1) Revise Policy &amp; Procedure Manual regarding First Aid Kits to indicate that they will be checked no less frequently than monthly, that the contents will be checked against a copy of the inventory list for the first aid kit, that expiration dates will be checked each time with expired items or items about to expire removed and replaced, and that the person monitoring the kit will sign off on the process.</td>
</tr>
<tr>
<td></td>
<td>(1) This policy and procedure will be modified to indicate that the first aid kit will be checked no less frequently than monthly, that the contents will be checked against a copy of the inventory list for the first aid kit, that expiration dates will be checked each time with expired items or items about to expire removed and replaced, and that the person monitoring the kit will sign off on the process.</td>
<td>(1)-8/15/10</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(2) This change will be included in pre-service training prior to the beginning of school year 2010 – 2011</td>
<td>(2)-9/10/10</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(3) All first aid kits to be checked by the program Health and Nutrition Coordinator</td>
<td>(3)-9/10/10</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(4) Refer this safety concern to the Agency Safety Committee</td>
<td>(4)-8/1/10</td>
<td></td>
</tr>
<tr>
<td>Paint above base molding in classroom was peeling</td>
<td>This item has been repaired.</td>
<td>(1)-7/15/09</td>
<td>The current Center Director monthly report has been revised to reinforce identification of work order needs such as peeling paint, wall and ceiling damage, etc. and includes a plan for correcting the building issue.</td>
</tr>
<tr>
<td>-ACAP Early Learning Center</td>
<td>(2) The Center Director monthly report has been revised to reinforce the need to identify work order needs such as peeling paint, wall and ceiling damage, etc. with a plan to correct them.</td>
<td>(2)-7/22/10</td>
<td></td>
</tr>
<tr>
<td>Paint on wall was chipped</td>
<td>This item was repaired.</td>
<td>(1)-7/30/09</td>
<td>The current Center Director monthly report has been revised to reinforce identification of work order needs such as peeling paint, wall and ceiling damage, etc. and includes a plan for correcting the building issue.</td>
</tr>
<tr>
<td>-Ann Klose</td>
<td>(2) The Center Directors monthly report has been revised to reinforce the need to identify work order needs such as peeling paint, wall and ceiling damage, etc. and plan to correct</td>
<td>(2)-7/22/10</td>
<td></td>
</tr>
<tr>
<td>OIG Finding</td>
<td>ACAP Corrective Action</td>
<td>Date Completed</td>
<td>ACAP Policy/Procedure Changes</td>
</tr>
<tr>
<td>------------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------</td>
<td>---------------</td>
<td>---------------------------------------------------------------------------------------------</td>
</tr>
</tbody>
</table>
| Cleaning Materials and other toxic materials were accessible to children- a bottle of floor cleaner was on the floor of a closet accessible to children. - Lincoln - Kings Kids | 1) This item has been corrected.  
2) Employees will be retrained regarding the need and rational for securing cleaning supplies and other hazardous materials prior to the beginning of the school year 2010-2011.  
3) In addition, the monthly OCFB Fire and Safety Assessment will continue to be completed, which emphasizes the need for cleaning materials and other hazardous items to be secured where children cannot access them.  
4) Train classroom staff to use daily safety assessment which includes secure storage of cleaning materials and other hazardous materials.  
5) Refer this safety concern to the Agency Safety Committee. | 1) 6/22/09  
2) 9/10/10  
3) 8/25/10  
4) 9/10/10  
5) 9/1/10 | As part of new employee safety orientation, classroom staff will be trained to use daily safety assessment and the monthly OCFB Fire and Safety Assessment, which include the need and rationale for securing cleaning supplies and other hazardous materials.  
(6) Add completion of a daily safety assessment to Policies and Procedures Manual |
| Children's bathrooms had no toilet paper - Lincoln | It is the practice of the ACAP Head Start program to ensure that bathrooms are adequately stocked with necessary supplies such as paper towels and soap. It is believed that although the dispenser may have been empty that toilet paper was available in the bathroom.  
1) To better ensure that adequate supplies will be maintained in all bathrooms, signage will be posted in all bathrooms- which remind staff to re-stock necessary bathroom supplies. | 1) 9/10/10 | Signage will be posted in all bathrooms- which remind staff to re-stock necessary bathroom supplies. |
<table>
<thead>
<tr>
<th>OIG Finding</th>
<th>ACAP Corrective Action</th>
<th>Date Completed</th>
<th>ACAP Policy/Procedure Changes</th>
</tr>
</thead>
</table>
| A garbage receptacle in a children's bathroom and/or classroom did not have a cover. | Most classrooms and children's bathrooms have garbage receptacles with covers.  
[1] A full assessment of need for garbage receptacles in classrooms and children's bathrooms will be completed and necessary replacement garbage receptacles obtained.  
[2] Employees will be retrained regarding the need and rationale for having and using garbage receptacles with covers prior to the beginning of the school year 2010-2011.  
[3] Train classroom staff to use daily safety assessment which includes ensuring that covered garbage containers are available and used in classrooms and children's bathrooms.  
[4] Refer this safety concern to the Agency Safety Committee. | (1) 3/29/10  
(2) 3/10/10  
(3) 3/10/10  
(4) 4/1/10 | As part of new employee safety orientation, train classroom staff to use daily safety assessments which includes ensuring that covered garbage containers are available and used in classrooms and children's bathrooms.  
(5) Add completion of a daily safety assessment to Policies and Procedures Manual |
| A rake and shovel were left in the entrance way | [1] This item has been corrected  
[2] Train classroom staff to use daily safety assessment which includes ensuring that any walk ways and exits are free of obstruction.  
[3] In addition, the monthly OCF5 Fire and Safety Assessment will continue to be completed, which requires that play ground equipment is inspected for safety issues.  
[4] Refer this safety concern to the Agency Safety Committee. | (1) 6/22/09  
(2) 3/10/10  
(3) Ongoing and currently being used  
(4) 4/1/10 | As part of new employee safety orientation, train classroom staff to use the daily safety assessment and the monthly OCF5 Fire and Safety Assessment, which includes ensuring that any walk ways and exits are free of obstruction.  
(5) Add completion of a daily safety assessment to Policies and Procedures Manual |
<table>
<thead>
<tr>
<th>OIG Finding</th>
<th>ACAP Corrective Action</th>
<th>Date Completed</th>
<th>ACAP Policy/Procedure Changes</th>
</tr>
</thead>
<tbody>
<tr>
<td>An outdoor climbing apparatus was in disrepair and contained sharp edges</td>
<td>(1) This item has been repaired.</td>
<td>(1) 6/22/10</td>
<td>(6) Add completion of a daily safety assessment to Policies and Procedures Manual</td>
</tr>
<tr>
<td></td>
<td>(2) Employees will be retrained regarding the need and rationale for recognizing and</td>
<td>(2) 8/15/10</td>
<td>As part of new employee safety orientation, train classroom staff to use daily safety</td>
</tr>
<tr>
<td></td>
<td>immediately addressing instances where equipment is in a state of disrepair prior to</td>
<td>(2) 9/10/10</td>
<td>assessment and the monthly OCFS Fire and Safety Assessment, which include ensuring that</td>
</tr>
<tr>
<td></td>
<td>the beginning of the school year 2010-2011.</td>
<td>(3) 9/10/10</td>
<td>any equipment that is in a state of disrepair is removed from service until repaired or</td>
</tr>
<tr>
<td></td>
<td>(3) Train classroom staff to use daily safety assessment which includes ensuring that</td>
<td></td>
<td>replaced.</td>
</tr>
<tr>
<td></td>
<td>any equipment that is in a state of disrepair is removed from service until repaired</td>
<td></td>
<td>(4) in addition, the monthly OCFS Fire and Safety Assessment will continue to be completed,</td>
</tr>
<tr>
<td></td>
<td>or replaced.</td>
<td></td>
<td>which requires that play ground equipment is inspected for safety issues.</td>
</tr>
<tr>
<td></td>
<td>(4) In addition, the monthly OCFS Fire and Safety Assessment will continue to be</td>
<td></td>
<td>(5) Refer this safety concern to the Agency Safety Committee</td>
</tr>
<tr>
<td></td>
<td>completed, which requires that play ground equipment is inspected for safety issues.</td>
<td></td>
<td>(5) 9/1/10</td>
</tr>
<tr>
<td></td>
<td>(5) Refer this safety concern to the Agency Safety Committee</td>
<td></td>
<td>(5) 9/1/10</td>
</tr>
<tr>
<td>The number of toilets was inadequate- 3 toilets were identified- 1 for 20</td>
<td>No Finding</td>
<td>7/21/10</td>
<td>(6) Visitor Control Procedure to be amended to include reference to: exterior doors to</td>
</tr>
<tr>
<td>children</td>
<td>The floor plan that was used to determine this citation was re-submitted, with four (4)</td>
<td></td>
<td>Head Start facilities will be locked from the outside. In the event that an exterior</td>
</tr>
<tr>
<td></td>
<td>bathrooms being identified. As a result, there is an adequate number of</td>
<td></td>
<td>door is not locked from the outside, Head Start</td>
</tr>
<tr>
<td></td>
<td>bathrooms at this location</td>
<td></td>
<td>staff will be present to control access to the building and/or classroom.</td>
</tr>
<tr>
<td>-Ogden Mills</td>
<td></td>
<td></td>
<td>(6) Visitor Control Procedure to be amended to include reference to: exterior doors to</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Head Start facilities will be locked from the outside. In the event that an exterior</td>
</tr>
<tr>
<td>-Watervliet</td>
<td></td>
<td></td>
<td>door is not locked from the outside, Head Start</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>staff will be present to control access to the building and/or classroom.</td>
</tr>
<tr>
<td>ORG Finding</td>
<td>ACAP Corrective Action</td>
<td>Date Completed</td>
<td>ACAP Policy/Procedure Changes</td>
</tr>
<tr>
<td>-------------</td>
<td>------------------------</td>
<td>---------------</td>
<td>------------------------------</td>
</tr>
<tr>
<td>Unlocked hall way door lead to stairwell and unlocked door to outside. -ACAP Early Learning Center</td>
<td>The door in reference is a required emergency exit for all of the building occupants, with lighted exit sign. As a result the door cannot be locked from the inside. This door is locked from the exterior which ensures that there is no unauthorized access through this door. In addition, it is ACAP Head Start Policy for children to be supervised at all times, which ensures that no child will exit the building while unsupervised.</td>
<td>(1) 8/25/10</td>
<td>Visitor Control Procedure to be amended to include reference that exterior doors to Head Start facilities will be locked from the outside. In the event that an exterior door is not locked from the outside, Head Start staff will be present to control access to the building and/or classroom.</td>
</tr>
<tr>
<td>An open exterior door was accessible to children and could permit unauthorized access -AnnRoss</td>
<td>It is ACAP Head Start Policy for children to be supervised at all times, which ensures that no child will exit the building while unsupervised. (1) Revise Policy and Procedure to reflect that exterior doors will remain closed and locked from the exterior. In the event that the main entrance may not be locked, head start staff will be present to control access to the building and/or classroom.</td>
<td>(1) 8/25/10</td>
<td>Visitor Control Procedure to be amended to include reference to: exterior doors to Head Start facilities will be locked from the outside. In the event that an exterior door is not locked from the outside, Head Start staff will be present to control access to the building and/or classroom.</td>
</tr>
<tr>
<td>Two (2) contracted bus drivers did not have timely criminal background checks</td>
<td>In two instances, the record review indicated that criminal background checks had been done with satisfactory results, but the results had been received by the transportation vendor after the drivers had been assigned to the transportation route. (1) A revised Memorandum of Understanding with the transportation vendor will include specific procedures for the vendor to present copies of applicable documentation, inclusive of criminal background checks prior to assigning a driver or monitor to a Head Start transportation route.</td>
<td>(1) 9/15/10</td>
<td>Future Memorandum of Understanding (MOU's) with the transportation vendor will include specific procedures for the vendor to present copies of applicable documentation, inclusive of criminal background checks prior to assigning a driver or monitor to a Head Start transportation route. The systems used by ACAP to conduct timely criminal background checks will be made available to the transportation vendor</td>
</tr>
<tr>
<td>OIG Finding</td>
<td>ACAP Corrective Action</td>
<td>Date Completed</td>
<td>ACAP Policy/Procedure Changes</td>
</tr>
<tr>
<td>---------------------------------------------------------------------------</td>
<td>-----------------------------------------------------------------------------------------------------------------</td>
<td>---------------</td>
<td>-----------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Contracted bus drivers had health examinations that did not contain tuberculosis screening.</td>
<td>Contracted bus drivers completed physical examinations required under Article 15A of the Department of Motor Vehicles. This form contains a Health History section and requires a response regarding history of Tuberculosis which is then to be reviewed by the medical examiner. However, it is acknowledged that there was no PPD or Tine test completed. (1) A revised Memorandum of Understanding with the transportation vendor will include specific requirements for any prospective drivers or monitors to have successfully completed a TB screening and applicable follow up prior to being assigned to a transportation route.</td>
<td>1-9-15/10</td>
<td></td>
</tr>
<tr>
<td>The files on five employees (two teacher assistants, one teacher, one family development specialist, and the executive director) contained no evidence of criminal record checks.</td>
<td>Of the five identified findings, 3 records (ECE Director, Teacher and Family Development Specialist, and the executive director) are disputable since a background check was present on or before the revised date. Supporting documents have been forwarded. The 2 teacher assistants work at a Universal Pre-K program based in the school district. In the past, prior to 2007 fingerprint checks were generally not conducted on Head Start employees who do not work at a site licensed by the state of New York such as a Universal Pre-K program based in a school district. NYS Fingerprinting clearance is now on file for these employees. See Attachment 1 &amp; 2.</td>
<td>06/02/2009 06/08/15/2009 06/02/2009 06/08/14/2009</td>
<td>All Head Start funded staff regardless of if they are licensed by the NYS Office of Children and Family services will be provided with a criminal background check. The NYS fingerprint clearance take up to 30 days after the submission of the paperwork to the state agencies and there is a need to fill vacancies in an effective manner; ACAP has contracted with ADP Screening and Selection services for background checks. This is apart from the fingerprint background checks conducted by the state. The service screens applicants through the following: &quot;Criminal&quot; - &quot;CrmlLink&quot;, ADP's National Criminal History Database Search, screens applicants against 350 million criminal court records across the entire United States, including the National Sex Offender Registry.</td>
</tr>
<tr>
<td>OIG Finding</td>
<td>ACAP Corrective Action</td>
<td>Date Completed</td>
<td>ACAP Policy/Procedure Changes</td>
</tr>
<tr>
<td>---------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------</td>
<td>----------------</td>
<td>-----------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Employee files did not contain evidence that the Grantee had queried the</td>
<td>Of the five identified findings, 4 records (1 teacher, 3 Teacher Assistants) are</td>
<td>06/10/2009 &amp;</td>
<td>All Head Start funded staff regardless of if they are licensed by the NYS Office of Children</td>
</tr>
<tr>
<td>State's child abuse and maltreatment register for 5 of its 110 employees.</td>
<td>disputed since a query of the National Sex Offender Register for child abuse and</td>
<td>08/25/2009</td>
<td>and Family services will be provided with a child abuse and maltreatment register check.</td>
</tr>
<tr>
<td></td>
<td>maltreatment was conducted on or prior to the review date. Supporting documents have</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>been forwarded. 1 Teacher Assist finding accepted and has been resolved. Attachment 2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Thirty two employees did not have timely criminal record checks.</td>
<td>When ACAP became aware of the need for background checks prior to hire, we contracted</td>
<td>06/02/2009</td>
<td>Management signature on the new hire form in the agency triggers the generation of an offer of</td>
</tr>
<tr>
<td></td>
<td>with ADP screening and selection services in 2008 to conduct preliminary background</td>
<td></td>
<td>employment. A new hire is not be authorized by Management without the ADP background check.</td>
</tr>
<tr>
<td></td>
<td>checks since the state background check takes up to 30 days to be processed. This</td>
<td></td>
<td>This is also part of an orientation document checklist.</td>
</tr>
<tr>
<td></td>
<td>process is now strictly followed prior to hire.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>