



**Community Action Partnership of Madera County, Inc.
Board of Directors Meeting**

Revised Agenda

**Thursday, August 8, 2024
CAPMC Conference Room 1 / 1a
1225 Gill Avenue
Madera, CA 93637
5:30 pm**

Supporting documents relating to the items on this agenda that are not listed as “Closed Session” are available for inspection during the normal business hours at Community Action Partnership of Madera County, Inc., 1225 Gill Avenue, Madera, CA 93637.

Supporting documents relating to the items on the agenda that are not listed as “Closed Session” may be submitted after the posting of the agenda and are available at Community Action Partnership of Madera County, Inc. during normal business hours.

Please visit www.maderacap.org for updates.

CALL TO ORDER BOARD OF DIRECTORS

ROLL CALL – Kelly Ryan

PLEDGE OF ALLEGIANCE – Eric LiCalsi, *Chairperson*

A. PUBLIC COMMENT

The first ten minutes of the meeting are reserved for members of the public to address the Board of Directors on items of interest to the public that are within the subject matter jurisdiction of the agency. Speakers shall be limited to three minutes. Attention is called to the fact that the Board is prohibited by law from taking any action on matters discussed that are not on the agenda, and no adverse conclusion should be drawn if the Board does not respond to the public comments at this time.

B. ADOPTION OF THE AGENDA

B-1 ADDITIONS TO THE AGENDA: Items identified after posting the Agenda for which there is a need to take immediate action and cannot reasonably wait for the next regularly scheduled Board meeting. Two-third vote, or unanimous vote if quorum is less than full board, required for

consideration. (Government code 54954.2(g) (2)) Any items added to the agenda will be heard following all Discussion/Action Items (Section E).

B-2 ADOPTION OF AGENDA: Adoption of agenda as presented or with approved additions.

C. TRAINING/ADVOCACY ISSUES

None

D. CONSENT ITEMS

All items listed under the Consent Calendar are considered to be routine and will be enacted by one motion. For discussion of any Consent Item, it will be made a part of the Discussion Items at the request of any member of the Board or any person in the audience.

D-1 Review and consider approving the Minutes of the Regular Board of Directors Meeting – July 11, 2024.

D-2 Review and consider approving the Minutes for the Madera Migrant/Seasonal Head Start Policy Council Committee Meeting – July 9, 2024.

D-3 Review and consider approving the Minutes for the Fresno Migrant/Seasonal Head Start Policy Council Committee Meeting – July 10, 2024.

D-4 Review and consider accepting the Bank of America Credit Card Statements:

- July 2024

D-5 Review and consider accepting the America Express and All Other Credit Card Statements:

- June 2024

D-6 Review and consider approving the following **Madera Migrant and Seasonal Head Start** Reports:

- In-Kind Report – June 2024
- CACFP Program Report – June 2024
- Program Information Report – June 2024

D-7 Review and consider approving the following **Fresno Migrant and Seasonal Head Start** Reports:

- Monthly Enrollment Report – June 2024
- In-Kind Report – June 2024
- CACFP Program Report – June 2024

D-8 Review and consider approving the 2024-2025 Madera Migrant/Seasonal Head Start program process for conducting the self-assessment.

D-9 Review and consider approving CAPMC Migrant/Seasonal Head Start in Collaboration with California Department of Social Services, Migrant Child Care and Development 2024-2025 Program Philosophy, Goals and Objectives and Parent Handbook.

D-10 Review and consider approving the 2023-2024 Fresno/Seasonal Head Start Program procedure and Plan for Conducting the self-assessment.

- D-11 Review and consider approving the 2024-2025 Fresno Migrant/Season Head Start's Planning Process/Procedure and Calendar.
- D-12 Review and consider approving the 2024-2024 Reimbursement Policy for the Policy Committee Members representing Fresno Migrant/Seasonal Head Start Program.
- D-13 Review and consider approving the Child Care Alternative Payment Program – Parent & Provider Handbook of Written Policies for FY 2024-25.
- D-14 Review the Madera County Child Advocacy Center Report for July 2024. (Informational Only).
- D-15 Review the Child Care Alternative Payment and Resource & Referral Program Report for July 2024. (Informational Only).
- D-16 Review the Community Services Program Report for July 2024. (Informational Only).
- D-17 Review the Homeless Engagement for Living Program (H.E.L.P) Center Report for July 2024. (Informational Only).
- D-18 Review the Victim Services Report for June 2024. (Informational Only).

E. DISCUSSION ITEMS

- E-1 Review and consider approving Community Action Partnership of Madera County 2023-2024 Basic, Blended, and One-time Carryover Comparison Budget Revisions to Stanislaus County Office of Education (SCOE). Comparison Budgets included.
- E-2 Review and consider approve Community Action Partnership of Madera County 2023-2024 Basic Comparison Budget Revision to Community Action Partnership of San Luis Obispo.
- E-3 Ratify and approve the submission of the Madera County Encampment Resolution Fund (ERF-3-R) Project application.
- E-4 Review and consider approving the selected candidate for the Chief Financial Officer position.
- E-5 Review and consider approving the updated employee compensation schedules and salary schedule for Community Action Partnership of Madera County (CAPMC) to reflect a 2.5% cost of living adjustment for all programs.

F. ADMINISTRATIVE/COMMITTEE REPORTS TO THE BOARD OF DIRECTORS

- F-1 Finance Committee Report – None
- F-2 Personnel Committee Report – None
- F-3 Executive Director Monthly Report – July 2024
- F-4 Financial Statements – June and July 2024
- F-5 Head Start Policy Council/Committee Reports
- F-6 Work Related Injury Report – July 2024

F-7 CAPMC Board of Directors Attendance Report – July 11, 2024
F-8 Staffing Changes Report for June 1, 2024 – July 19, 2024

G. CLOSED SESSION

None

H. CORRESPONDENCE

H-1 Correspondence from the Department of Community Services and Development (“CSD”) regarding the results of a desk review of the following CSBG contracts:

- 2023 CSBG Annual 23F-4023
- 2023 Discretionary 23F-4023
- 2024 CSBG Annual 24F-3023
- 2024 Discretionary 24F-3023

H-2 Correspondence from the Office of Head Start regarding Fiscal Year 2025 Monitoring Process for Head Start and Early Head Start Recipients.

H-3 Correspondence from the Office of Head Start regarding the approval of hiring the new Chief Financial Officer.

I. ADJOURN

I, Kelly Ryan, Grant Management and Compliance Administrator / Executive Director Support, declare under penalty of perjury that I posted the above agenda for the regular meeting of the CAPMC Board of Directors for July 11, 2024, in the Lobby of CAPMC as well as on the agency website by 5:00 p.m. on August 2, 2024.

Kelly Ryan

Grant Management and Compliance Administrator / Executive Director Support.

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.
Regular Board of Directors Meeting
July 11, 2024
1225 Gill Ave, Madera, CA 93637

ACTION SUMMARY MINUTES

The Board of Directors Meeting was called to order at 5:32 p.m. by Chairperson Eric LiCalsi.

Members Present

Eric LiCalsi, Chair
David Hernandez, Vice-Chair
Sherrif Tyson Pogue, Secretary/Treasurer
Vivian Garcia (Alternate)
Debi Bray
Donald Holley
Richard Gutierrez
Diana Palmer
Molly Hernandez
Aurora Flores

Members Absent

Supervisor Leticia Gonzalez
Council Member Steve Montes
Council Member Jeff Troost
Otilia Vasquez
Martha Garcia

Personnel Present

Mattie Mendez
Kelly Ryan
Daniel Seeto
Irene Yang
Maritza Gomez-Zaragoza
Xai Vang
Jennifer Coronado

Public – Other Present

None

A. PUBLIC COMMENT

Jennifer Coronado, Victim Services Program Manager, shared a Victims of Crime Act (VOCA) update. The state approved 103 million to offset the 200 million cut from federal VOCA funding. This will enable the Oakhurst site to remain open.

B. ADOPTION OF THE AGENDA

ADDITIONS TO THE AGENDA: Items identified after posting of the Agenda for which there is a need to take immediate action and cannot reasonably wait for the next regularly scheduled Board meeting. Two-thirds vote, or unanimous vote if quorum is less than full board, required for consideration. (Government Code 54954.2(g) (2)) Any items added to the agenda will be heard following all Discussion/Action Items (Section E).

ADOPTION OF THE AGENDA: Adoption of the agenda.

Motion: APPROVED WITH THE ADDITION TO ITEM E-3 AS AN INFORMATIONAL UPDATE

Moved by Donald Holley and Debi Bray, Seconded by David Hernandez

Vote: Carried Unanimously

C. TRAINING/ADVOCACY ISSUES

None

D. BOARD OF DIRECTOR'S CONSENT CALENDAR

All items listed under Consent Calendar are considered to be routine and will be enacted by one motion. For discussion of any Consent Item, it will be made a part of the Discussion Items at the request of any member of the Board or any person in the audience.

- D-1 Review and consider approving the Minutes of the Regular Board of Directors Meeting – June, 2024
- D-2 Review and consider approving the Minutes for the Madera Migrant/Seasonal Head Start Policy Council Committee Meeting – June 13, 2024
- D-3 Review and consider approving the Minutes for the Fresno Migrant/Seasonal Head Start Policy Council Committee Meeting – June 11, 2024.
- D-4 Review and consider accepting the Bank of America Credit Card Statements:
- May 2024
 - June 2024
- D-5 Review and consider accepting the America Express and All Other Credit Card Statements:
- April 2024
 - May 2024
 - June 2024
- D-6 Review and consider approving the following **Madera Migrant and Seasonal Head Start** Reports:
- Monthly Enrollment Report – May and June 2024
 - In-Kind Report – May 2024
 - CACFP Program Report – May 2024
 - Program Information Report – May 2024
- D-7 Review and consider approving the following **Madera Mariposa Regional Head Start** reports:
- Monthly Enrollment Report – May 2024
 - In-Kind Report – April and May 2024
 - CACFP Program Report – May 2024
- D-8 Review and consider approving the following **Madera Mariposa Regional Early Head Start** reports:
- Monthly Enrollment Report – May 2024
 - In-Kind Report – May 2024
- D-9 Review and consider approving the following **Fresno Migrant and Seasonal Head Start** Reports:
- Monthly Enrollment Report – May and June 2024
 - In-Kind Report – May 2024
 - CACFP Program Report – May 2024

- D-10 Review and consider approving the results of the Weatherization Program's Monitoring visit.
- D-11 Review and consider approving the 2024-2025 Madera Migrant/Seasonal Head Start Planning Process Policy/Procedure and Calendar.
- D-12 Review and consider approving the Impasse Procedure between the Community Action Partnership of Madera County Inc. Board of Directors and the Madera Migrant/Seasonal Head Start Policy Committee.
- D-13 Review and consider approving the 2024-2025 Reimbursement Policy for the Policy Committee Members representing Madera Migrant/Seasonal Head Start program.
- D-14 Review the Madera County Child Advocacy Center Report for June 2024. (Informational Only)
- D-15 Review the Community Services Program Report for June 2024. (Informational Only)
- D-16 Review the Homeless Engagement for Living Program (H.E.L.P) Center Report for June 2024. (Informational Only)

Motion: APPROVE AS PRESENTED

Moved by Donald Holley, Seconded by Aurora Flores

Vote: Carried Unanimously

Board Member Richard Gutierrez entered the room.

E. DISCUSSION / ACTION ITEMS

E-1 Review and consider authorizing the Executive Director to submit the 2024 Community Services Block Grant Discretionary Grant application

Mattie Mendez, Executive Director, presented regarding ratifying the Executive Director to sign and submit the 2024 Community Services Block Grant (CSBG) Discretionary Grant application. CSBG is designed to provide a range of services to assist low-income families and individuals attain the skills, knowledge, and motivation necessary to achieve self-sufficiency. CAPMC plans to support domestic violence victims with the additional funding of \$19,000. Due to budget cuts and a reduction in Federal funding from the Office of Victims of Crime, (VOCA), the Office of Emergency Services has reduced funding to Crime Victim Services by over 45%. Funds will be used to pay for wages of the Shelter Aide to continue providing coverage 7 days a week. The contract period is from June 15, 2024, through December 31, 2024.

Motion: APPROVE AS PRESENTED

Moved by Donald Holley, Seconded by Richard Gutierrez

Vote: Carried Unanimously

E-2 Review and consider approving the updated employee compensation schedules and salary schedule for Community Action Partnership of Madera County Inc.

Daniel Seeto, Chief Financial Officer, presented regarding the updated employee compensation schedules and salary schedule for Community Action Partnership of Madera County (CAPMC). The updated compensation and salary schedules for Head Start programs reflect changes to the starting range for a variety of positions, as approved from various Board of Director's meetings when a corresponding budget or revision for each program was presented. The Compensation Schedules and Salary Schedule reflects the 5% range adjustments effective as follows: June 1, 2024, for all Head Start programs.

Motion: APPROVE AS PRESENTED

Moved by Tyson Pogue, Seconded by Aurora Flores

Vote: Carried Unanimously

E-3 Informational of the CAPMC Welfare Benefit 2023 Form 5500 tax return by the Chief Financial Officer.

Daniel Seeto, Chief Financial Officer, shared information on the CAPMC Welfare Benefit 2023 Form 5500 tax return by the Chief Financial Officer. The item will be presented in a future Board of Directors Meeting.

F. ADMINISTRATIVE/COMMITTEE REPORTS TO BOARD OF DIRECTORS

- F-1 Finance Committee Report – None
- F-2 Personnel Committee Report – None
- F-3 Executive Director Monthly Report – CFO Departure – CFO Interviews – VOCA cuts restored
- F-4 Financial Statements – June 2024
- F-5 Head Start Policy Council/Committee Reports – None
- F-6 Work Related Injury Report – None
- F-7 CAPMC Board of Directors Attendance Report – June 2024
- F-8 Staffing Changes Report for – None

G. CLOSED SESSION

None

H. CORRESPONDENCE

- H-1 Correspondence from the Office of Head Start regarding Strategies and Recommendations for Supporting Mental Health
- H-2 Correspondence from the Office of Head Start regarding the New Eligibility Provisions for Migrant and Seasonal Head Start programs
- H-3 Correspondence from the Office of Head Start regarding the New Eligibility Provisions for American Indian and Alaska Native programs

I. ADJOURN

Chair, Eric LiCalsi, adjourned the Board of Directors Meeting at 5:56 pm

Motion: APPROVE AS PRESENTED

Moved by Donald Holley, seconded by Aurora Flores

Vote: Carried Unanimously

Community Action Partnership of Madera County
Madera Migrant/Seasonal Head Start Policy Council Meeting
Tuesday, July 09, 2024

Minutes

The Madera Migrant/Seasonal Policy Committee called to order at 5:32 p.m. by Catalina Venegas.

Committee Members Present

Yuritsi Ortiz
Catalina Venegas
Delldi Fuentes
Ramon Garcia
Irene Juarez
Lidia Tinajero
Guadalupe Galvez
Juana Perez Lopez
Pedro Angel
Maria Rios de los ángeles
Fabiola Rendon

Committee Members Absent

Luis Pinacho

Personnel Present

Maribel Aguirre, Parent and Governance Specialist
Jissel Rodriguez, Executive Administrative Assistant
Maru Sanchez, Deputy Director of Direct Services

Others

None

A. Public Comment

Maribel mentioned everyone should have a copy of the Bylaws, which was not included with the packet.

B. Training

None.

C. Adoption of the Agenda

C-1 Catalina Venegas asked for a motion to approve the agenda as presented. Motion made by Yuristi Ortiz, seconded motion by Ramon Garcia to approve the agenda as presented. The motion approved unanimously.

D. Adjourn to Closed Session - None

E. Approval of Minutes

E-1 – Catalina Venegas requested a motion to approve the minutes of the meeting on June 11, 2024. Motion made by Pedro Angel, seconded motion by Juana Perez Lopez to approve the minutes of the meeting. The motion approved unanimously.

F. Discussion / Action Items –

F-1 First reading of the 2024-2025 Bylaws for the Madera Migrant/Seasonal Head Start Policy Committee and make any suggested changes or modifications – Ms. Aguirre went over the updated Bylaws. She noted that everything in red are the items being removed from the Bylaws. The item is only informational.

F-2 Review and consider approving the 2024-2025 Madera Migrant/Seasonal Head Start Planning Process Policy/Procedure and Calendar – Ms. Sanchez went over the planning calendar for the current season. She noted which are important meetings and when trainings will be held.

Catalina Venegas requested a motion to approve the 2024-2025 Madera Migrant/Seasonal Head Start Planning Process Policy/Procedure and Calendar. Yuritsi Ortiz made the first motion, seconded by Ramon Garcia. Motion carried unanimously

F-3 Review and consider approving the Impasse Procedure between the Community Action Partnership of Madera County Board of Directors and the Madera Migrant/Seasonal Head Start Policy Committee – Ms. Sanchez mentioned a procedure if both Board and Policy committee cannot come to an agreement, they are something in place.

Catalina Venegas requested a motion to the Impasse Procedure between the Community Action Partnership of Madera County Board of Directors and the Madera Migrant/Seasonal Head Start Policy Committee. Fabiola Rendon made the first motion, seconded by Juana Perez Lopez. Motion carried unanimously.

F-4 Review and consider approving the 2024-2025 Reimbursement Policy for the Policy Committee Members representing Madera Migrant/Seasonal Head Start program – Ms. Sanchez mentioned parents are not being paid to attend meetings Catalina Venegas requested a motion to approving the 2024-2025 Reimbursement Policy for the Policy Committee Members representing Madera Migrant/Seasonal Head Start program. Guadalupe Galvez made the first motion, seconded by Pedro Angel. Motion carried unanimously.

G. Administrative Reports

G-1 Staff Changes – (April & June 2024) Ms. Aguirre went over the staff changes.

G-2 Bank of America Credit Card Account Statement – Agency and other credit cards: (June 2024) – Ms. Aguirre reviewed the charges for the month. There were no questions about the charges.

G-3 Budget Report (May 2024) – Ms. Aguirre reviewed the budget. No questions asked.

G-4 In-kind Report (May 2024) – Ms. Aguirre reviewed the In-kind percentage.

G-5 Report of enrollment in the program and attendance report (May 2024) – Ms. Aguirre went over the enrollment for the MHS programs and the attendance.

G-6 CACFP Monthly Report (May 2024) – Ms. Aguirre reviewed CACFP and noted that the reimbursement for the month of May was \$21,067.56 for 7,856 meals. There were no questions.

G-7 PIR Program Information Monthly Report (May 2024) – Ms. Aguirre went over the program report.

H. Policy Committee Members Reports

H-1 Center Reports – **Fabiola (LN)**: the center is doing a plant project.

H-2 Board of Directors Report – The meeting will be held Thursday. All items discussed today will be presented at the next meeting.

H-3 Active Supervision, Challenges and Best Practices Report – Ms. Sanchez mentioned this is the time when parents can present their concerns.

I. Correspondence

I-1 Information Memorandum notice from the Office of Head Start regarding, *Strategies and Recommendation for Support Mental Health*; Issuance Date: 05/09/2024

I-2 Program Instruction notice from the Office of Head Start regarding, *New Eligibility Provisions for Migrant and Seasonal Head Start Programs*; Issuance Date: 05/13/2024

I-3 Program Instruction notice from the Office of Head Start regarding, *New Eligibility Provisions for American Indian and Alaska Native Program*; Issuance Date; 05/13/2024

J. Future Agenda Items

J-1 Approve of the 2024-2025 Bylaws

J-2 Approve the No Fee Policy

J-3 Approve Self-Assessment Procedure

J-4 State Parent Handbook/Goals and Objectives (CMIG)

J-5 Training: CLASS

K. Adjournment

Catalina Venegas requested a motion to adjourn the session. Motion made by Ramon Garcia to adjourn the meeting at 6:54 p.m., in the afternoon, seconded by Fabiola Rendon. Motion approved unanimously.

Community Action Partnership of Madera County
Fresno Migrant/Seasonal Head Start Policy Council Meeting
Wednesday, July 10, 2024

Minutes

The Fresno Migrant/Seasonal Policy Committee called to order at 5:56 p.m. by Maritza Gomez-Zaragoza.

Committee Members Present

Karina Garcia
Marianayelly Angeles
Rosalia Ceja
Patricia Garcia
Josselyn Hurtado Soto
Marlim Contreras
Yesenia Estrada

Committee Members Absent

Jhoana Casillas Reynosa
Aurora Flores

Personnel Present

Maritza Gomez-Zaragoza, Head Start Program Director
Maribel Aguirre, Parent and Governance Specialist
Jissel Rodriguez, Executive Administrative Assistant
Olga Moreno, Area Manager

Others

None

A. Public Comment

None.

B. Training

School Readiness Goals: Ms. Moreno went over the school readiness goals. She explained how the teachers collect the data and how the data is used for setting school readiness goals.

C. Adoption of the Agenda

C-2 Maritza Gomez-Zaragoza asked for a motion to approve the agenda as presented. Motion made by Marianayelly Angeles, seconded motion by Rosalia Ceja to approve the agenda as presented. The motion approved unanimously.

D. Adjourn to Closed Session - None

E. Approval of Minutes

E-1 – Maritza Gomez-Zaragoza requested a motion to approve the minutes of the meeting on April 10, 2024. Motion made Marianayelly Angeles, seconded motion by Rosalia Ceja to approve the minutes of the meeting. The motion approved unanimously.

F. Discussion / Action Items –

F-1 Nominate and Elect Interested Policy Committee members to serve as officers; as per By-Laws, Article 10, Sections 1 and 2 –

Position	Representative
Chair Person	Marianayelly Angeles
Vice Chair Person	Rosalia Ceja
Secretary	Karina Garcia

Marianayelly Angeles nominated themselves for the Chair Person position. Rosalia Ceja nominated themselves for the Vice Chair Person. Karina Garcia nominated themselves for the position of Secretary. Yeseina Estrada made the motion to approve the nominations, Marilm Contreras seconded. Motion carried unanimously.

F-2 Nominate and Elect one member of the Policy Committee to serve on the Executive Committee – Patricia Garcia nominated herself for the Executive Committee. Marianayelly Angeles made the first motion, seconded by Yeseina Estrada. Motion carried unanimously.

F-3 Nominate and Elect three (3) representatives and (1) one alternate to serve on the 2024-2025 Community Action Partnership of San Luis Obispo Migrant Head Start Policy Council –

Representative	Alternates
Marianayelly Angeles	Patricia Garcia
Karina Garcia	
Rosalia Ceja	

Maritza Gomez-Zaragoza requested a motion to approve the Elect three (3) representatives and (1) one alternate to serve on the 2024-2025 Community Action Partnership of San Luis Obispo Migrant Head Start Policy Council. Yesenia Estrada made the first motion, seconded by Marlim Contreras. Motion carried unanimously

F-4 Review and consider accepting the auditor reports and the audited financial statements for the year ended June 30, 2023 – Ms. Gomez Zaragoza mentioned the agency has a financial audit every year. The report shows there were no findings.

Maritza Gomez-Zaragoza requested a motion to approve the auditor reports and the audited financial statements for the year ended June 30, 2023. Yesenia Estrada made the first motion, seconded by Marianayelly Angeles. Motion carried unanimously.

G. Administrative Reports

G-1 Staff Changes (April - June 2024) – Ms. Aguirre went over the staffing changes.

G-2 Bank of America Credit Card Account Statement – Agency and other credit cards: (May & June 2024) – Ms. Aguirre reviewed the charges for the month. There were no questions about the charges.

G-3 Budget Report (May 2024) – Ms. Aguirre reviewed the budget.

G-4 In-kind Report (May 2024) – Ms. Aguirre reviewed the In-kind percentage.

G-5 Report of enrollment in the program and attendance report (May & June 2024) – Ms. Aguirre went over the enrollment for the FMHS programs and the attendance.

G-6 CACFP Monthly Report (May 2024) – Ms. Aguirre reviewed CACFPs.

H. Policy Committee Members Reports

H-1 Center Reports – None.

H-2 Board of Directors Report – None.

H-3 Active Supervision, Challenges and Best Practices Report – None.

I. Correspondence

I-1 Program Instruction notice from the Office of Head Start regarding *Fiscal Year 2024 (FY 2024) Head Start Funding Increase*; Issuance Date: 4/24/2024

I-2 Information Memorandum notice from the Office of Head Start regarding, *Strategies and Recommendations for Supporting Mental Health*; Issuance Date: 05/09/2024

I-3 Program Instruction notice from the Office of Head Start regarding, *New Eligibility Provisions for Migrant and Seasonal Head Start programs*; Issuance Date: 05/13/2024

J. Future Agenda Items

J-1 First Reading of the 2024-2025 Bylaws

J-2 Planning Process Policy with Planning Calendar

J-3 2024-2025 Reimbursement Policy

J-4 Approve Self-Assessment Procedure

J-5 Program Goals and Objectives Update

K. Adjournment

Maritza Gomez-Zaragoza requested a motion to adjourn the session. Motion made by Yesenia Estrada to adjourn the meeting at 6:39 p.m., in the afternoon, seconded by Marianayelly Angeles. Motion approved unanimously.

**Bank of America Business Card
Credit Card Charges**

July 2024 Statement

Mattie Mendez / Administration

Date of Transaction	Name of Vendor	PO #	Description of Purchase	Amount of Purchase	Account Charged	Receipt
6/25/2024	SURVEYMONKEY	No	IT Communication Software	\$288.00	200.0-6130-2.0-000-90	Yes
6/27/2024	SAVEMART #77 MADERA	No	Drinks and ice for extended breakroom and Administration	\$101.37	200.0-6121-2.0-000-90	Yes
6/30/2024	MARSHALLS #1233	No	Kitchen supplies for extended breakroom	\$57.35	200.0-6122-2.0-000-90	Yes
6/30/2024	SAVEMART #77 MADERA	No	Food and kitchen supplies for extended breakroom	\$38.03	200.0-6122-2.0-000-90	Yes
7/1/2024	ME N EDS PIZZERIA - 50	No	Lunch for the opening of extended breakroom – see attached flyer	\$725.51	200.0-6121-2.0-000-90	Yes
			Total	\$1,210.26		

I certify that the items and charges above are true and correct and that the charges inquired have been for business purposes only.
Receipts are attached (if available)

Mattie Mendez, Executive Director

Date: July 12, 2024

Bank of America Business Card
Credit Card Charges

July 2024 Statement (2)

Mattie Mendez / Administration

Date of Transaction	Name of Vendor	PO #	Description of Purchase	Amount of Purchase	Account Charged	Receipt
Pending	FERNICO	26585	Cortexflo Maintenance Agreement Renewal (12 Months)	\$2,250.00	535.0-6112-5.0-000-00	Yes
7/15/2024	OFFICE DEPOT #648	No	Office supplies for administration	\$83.29	200.0-6110-2.0-000-90	Yes
7/11/2024	DICICCOS I	No	Housing Our Homeless Committee Meeting	\$350.41	200.0-6121-2.0-000-90	Yes
7/10/2024	MAILCHIMP *MISC	No	IT Mass Communication/Newsletter Software	\$60.00	200.0-6130-2.0-000-90	Yes
7/10/2024	DICICCOS I	No	Board of Directors Meeting	\$293.83	200.0-6121-2.0-000-90	Yes
			Total	\$3,037.53		

I certify that the items and charges above are true and correct and that the charges inquired have been for business purposes only.
Receipts are attached (if available)

Mattie Mendez, Executive Director

Date: July 23, 2024

**Bank of America Business Card
Credit Card Charges**

July 2024 Statement

Irene Yang / Human Resources

Date of Transaction	Name of Vendor	PO #	Description of Purchase	Amount of Purchase	Account Charged	Receipt
6/10/2024	Biometrics4all, Inc.	No	Livescan relay fees	0.75	200.0-6852-2.0-000-90	Yes
				0.75	311.0-6852-3.1-000-00	
				3.75	321.0-6852-3.2-000-00	
				0.75	331.0-6852-3.3-000-00	
				0.75	426.0-6852-4.0-000-00	
				1.50	500.0-6852-5.0-000-00	
				1.50	501.0-6852-5.0-000-00	
				1.50	508.0-6852-5.0-000-00	
6/20/2024	Hobby-Lobby	No	Materials Wellness initiative	43.33	Allocation sheet is attached	Yes
6/1/2024	Indeed	No	Vacancy posting	180.74	272.0-6312-2.0-000-00	Yes
				44.25	426.0-6312-4.0-000-00	
				44.25	427.0-6312-4.0-000-00	
				44.25	428.0-6312-4.0-000-00	
TOTAL:				369.57		

**Bank of America Business Card ending 8462
Credit Card Charges**

July 2024 Statement
Ana Ibanez / Community Services

Date of Transaction	Name of Vendor	PO #	Description of Purchase	Amount of Purchase	Account Charged	Receipt
6/4/2024	GOB Oaxaca E com Tlalixtac de foreign currency	No	Foreign currency exchange rate	7.12	246.0-6810-2.0-000-74	Yes
6/26/24	Wal-Mart	NO	Fans for Shunammite Place	121.24	224.0-6130-2.0-000-60	Yes
6/26/24	Monterey Plaza Hotel	No	CalCAPA Sail into the Sixties conference – hotel stay	340.20	207.0-6714-2.0-000-00	Yes
6/26/24	Monterey Plaza Hotel	No	CalCAPA Sail into the Sixties conference – hotel stay	340.20	207.0-6714-2.0-000-00	Yes
6/5/24	International Transaction Fee	No	International Transaction Fee for GOB Oaxaca	.22	246.0-6810-2.0-000-74	No
			Total	\$808.98		

I certify that the items and charges above are true and correct, and that the charges inquired have been for business purposes only. Receipts are attached (if available)

July 8, 2024

Ana Ibanez, Program Manager
Community Services

**Bank of America Business Card
Credit Card Charges**

JULY 2024 Statement

Leticia Murillo/Child Care Alternative Payment and Resource & Referral Program

Date of Transaction	Name of Vendor	Description	P. O. Number	Amount	Account Charged	Receipt
6/18/2024	COMMUNITY ACTION PARTNERSHIP - ANNUAL CONVENTION	ATTENDEE: LETICIA MURILLO		\$251.25 \$412.05 \$201.00 \$140.70	401.0-6742-4.0-000-00 426.0-6742-4.0-000-00 427.0-6742-4.0-000-00 428.0-6742-4.0-000-00	YES
6/28/2024	REGAL CINEMAS	APP/R&R WELLNESS STAFF MEETING		\$38.67 \$63.43 \$30.93 \$21.65	401.0-6875-4.0-000-00 426.0-6875-4.0-000-00 427.0-6875-4.0-000-00 428.0-6875-4.0-000-00	YES
6/28/2024	WESTWOODS BBQ & SPICE RESTAURANT	APP/R&R WELLNESS STAFF MEETING		\$79.75 \$130.79 \$63.79 \$44.66	401.0-6742-4.0-000-00 426.0-6742-4.0-000-00 427.0-6742-4.0-000-00 428.0-6742-4.0-000-00	YES
6/29/2024	ZOOM VIDEO COMMUNICATIONS	ZOOM TO BE USED FOR VIRTUAL MEETINGS		\$159.90	424.0-6112-4.0-000-00	YES
TOTAL				\$1,638.57		

Comments:

MBNA America Business Card
Credit Card Charges
July / julio 2024 Statement
Maritza Gomez / Regional & Migrant Head Start

Date of Transaction	Purchase Order #	Name of Vendor	Description	Amount	Account Charged	Receipt
06/05/2024	NA	Health & Safety	Prevention Health & Safety Training	\$100.00	321.0-6742-3.2-000-00	Yes
06/04/2024	NA	CPS HR Consulting	CDSS Training	\$4.85	331.0-6742-3.3-000-00	Yes
06/05/2024	NA	Deli Delicious	MHS Training Meal	\$164.93	321.0-7116-3.2-000-00	Yes
06/04/2024	NA	Cherry Training	Center Director Training	\$99.00	331.0-6742-3.3-000-00	Yes
06/06/2024	NA	Black Bear Dinner	RHS PC Meal	\$133.20	311.0-7116-3.1-000-00	Yes
06/07/2024	NA	Teachstone	Trainer re-certification	\$135.00	310.0-6742-3.1-000-00 48% (\$60.00) 320.0-6742-3.2-000-00 52% (\$65.00)	Yes
06/11/2024	NA	Teachstone	Trainer re-certification	\$135.00	310.0-6742-3.1-000-00 48% (\$60.00) 320.0-6742-3.2-000-00 52% (\$65.00)	Yes
06/11/2024	NA	Panda Express	MHS PC Meal	\$143.38	321.0-6130-3.2-000-00	Yes
06/14/2024	NA	Panda Express	Rebates	-\$5.74	321.0-6130-3.2-000-00	No
06/19/2024	NA	Zoom	Video Conferencing system	\$15.99	311.0-6130-3.1-000-00 50%(\$7.99) 321.0-6130-3.2-000-00 50%(\$8.00)	Yes
06/20/2024	NA	Teachstone	Trainer re-certification	\$135.00	311.0-6130-3.1-000-00	Yes
06/21/2024	NA	Zoom	Video Conferencing system	\$15.99	331.0-6130-3.3-000-00	Yes
06/22/2024	NA	Lyft	Transportation from hotel to airport (EHS conf.)	\$39.02	309.0-6130-3.1-012-00	Yes
06/22/2024	NA	Holiday Inn	Hotel reservation charges	\$29.40	309.0-6714-3.1-012-00	No
07/02/2024	NA	Holiday Inn	Refund hotel reservation charges	-\$29.40	309.0-6714-3.1-012-00	No
07/03/2024	NA	Venngage.com	Monthly subscription for flyer software	\$24.50	311.0-6130-3.1-000-00 37% (\$9.07) 312.0-6130-3.1-000-00 5% (\$1.23) 321.0-6130-3.2-000-00 37% (\$9.06) 331.0-6130-3.3-000-00 21% (\$5.14)	No
TOTAL				\$1,140.12		

Comments: I certify that the items and charges above are true and correct and that the charges incurred have been for business purposes only. Receipts are attached (if available).

Maritza Gomez, Head Start Director

Date

MBNA America Business Card
 Credit Card Charges
July / julio 2024 Statement
Maritza Gomez / Fresno Migrant Head Start

Date of Transaction	Purchase Order #	Name of Vendor	Description	Amount	Account Charged	Receipt
06/04/2024	NA	CPS HR Consulting	CDSS Training	\$4.85	331.0-6742-3.3-000-00	Yes
06/04/2024	NA	Cherry Training	Center Director Training	\$99.00	331.0-6742-3.3-000-00	Yes
06/21/2024	NA	Zoom	Video Conferencing system	\$15.99	331.0-6130-3.3-000-00	Yes
07/03/2024	NA	Venngage.com	Monthly subscription for flyer software	\$5.14	331.0-6130-3.3-000-00 21%	No
TOTAL				\$124.98		

Comments: I certify that the items and charges above are true and correct and that the charges inquired have been for business purposes only. Receipts are attached (if available).

 Maritza Gomez, Head Start Director

 Date

American Express
Credit Card Charges
JUNE 2024 Statement
 Fiscal

Name of Vendor	Description	Amount	Receipt
ATT	Telephone	29550.70	Yes
Comcast	Net service	1159.89	Yes
Community Playthings	Supplies for centers	19567.92	Yes
Discount School Supply	Supplies for centers	849.34	Yes
Ecolab	Dishwasher rental/repairs	148.31	Yes
Fedex	Postage	467.65	Yes
Lakeshore	Supplies for centers	11865.79	Yes
Matson Alarm	Alarm service	737.00	Yes
Verizon	Wireless devices	5602.28	Yes
Office Depot	Supplies for office/centers	18404.68	Yes
	TOTAL	88353.56	06/28/24
			LA

6/28/24
Jmt

Run: 7/03/2024 at 1:03 PM

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.
A/P Preliminary Register with Accounting Distribution for Check Date 7/03/2024
1-WestAmerica New AP Checking

Page: 1

<u>Organization</u>	<u>Invoice Description</u>	<u>Account Distribution</u>	<u>Amount</u>	<u>Invoice</u>	<u>Invoice Date</u>	<u>Activity Date</u>	<u>Invoice Amount</u>	<u>Pay Amount</u>
[02280] AMERICAN EXPRESS	ATT 088 065 5820 FRES DSL	331.0-6320-3.3-031-00	90.95		6/01/2024	6/01/2024	90.95	90.95
[02280] AMERICAN EXPRESS	ATT 250 427 1103 VS	500.0-6320-5.0-000-00	27.78		6/01/2024	6/01/2024	83.34	83.34
		501.0-6320-5.0-000-00	27.78					
		533.0-6320-5.0-000-00	27.78					
[02280] AMERICAN EXPRESS	ATT 250 427 1104 RR	401.0-6320-4.0-000-00	98.52		6/01/2024	6/01/2024	98.52	98.52
[02280] AMERICAN EXPRESS	ATT 5 ACCTS VS	533.0-6320-5.0-062-00	326.61		6/01/2024	6/01/2024	326.61	326.61
[02280] AMERICAN EXPRESS	ATT 559 661 4574 SHUN	224.0-6320-2.0-000-60	56.74		6/01/2024	6/01/2024	141.85	141.85
		224.0-6320-2.0-000-80	85.11					

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.
A/P Preliminary Register with Accounting Distribution for Check Date 7/03/2024
1-WestAmerica New AP Checking

<u>Organization</u>	<u>Invoice Description</u>	<u>Account Distribution</u>	<u>Amount</u>	<u>Invoice</u>	<u>Invoice Date</u>	<u>Activity Date</u>	<u>Invoice Amount</u>	<u>Pay Amount</u>
[02280]	AMERICAN EXPRESS	200.0-6320-2.0-000-90	38.24		6/01/2024	6/01/2024	3,101.81	3,101.81
	ATT 831 000 4083 IP FLEX EQUIP	224.0-6320-2.0-000-60	167.21					
		224.0-6320-2.0-000-80	2.97					
		311.0-6320-3.1-000-00	93.79					
		311.0-6320-3.1-000-50	3.84					
		311.0-6320-3.1-001-00	163.25					
		311.0-6320-3.1-002-00	163.25					
		311.0-6320-3.1-004-00	163.25					
		311.0-6320-3.1-005-00	163.25					
		311.0-6320-3.1-006-00	163.25					
		311.0-6320-3.1-009-00	163.25					
		311.0-6320-3.1-014-00	163.25					
		311.0-6320-3.1-016-00	163.25					
		312.0-6320-3.1-000-00	36.56					
		312.0-6320-3.1-000-50	0.46					
		321.0-6320-3.2-000-00	117.51					
		321.0-6320-3.2-000-50	5.15					
		321.0-6320-3.2-055-00	163.25					
		321.0-6320-3.2-057-00	163.25					
		331.0-6320-3.3-000-00	252.35					
		331.0-6320-3.3-000-50	4.09					
		331.0-6320-3.3-024-00	163.25					
		331.0-6320-3.3-027-00	163.25					
		331.0-6320-3.3-029-00	163.25					
		331.0-6320-3.3-030-00	163.25					
		362.0-6320-3.2-000-00	1.91					
		371.0-6320-3.1-000-00	6.59					
		380.0-6320-3.1-000-00	9.39					
		380.0-6320-3.1-000-50	0.42					
		401.0-6320-4.0-000-00	5.96					
		407.0-6320-4.0-000-00	1.95					
		424.0-6320-4.0-000-00	0.26					
		426.0-6320-4.0-000-00	6.77					
		427.0-6320-4.0-000-00	2.39					
		428.0-6320-4.0-000-00	2.46					
		500.0-6320-5.0-000-00	7.10					

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.
A/P Preliminary Register with Accounting Distribution for Check Date 7/03/2024
1-WestAmerica New AP Checking

<u>Organization</u>	<u>Invoice Description</u>	<u>Account Distribution</u>	<u>Amount</u>	<u>Invoice</u>	<u>Invoice Date</u>	<u>Activity Date</u>	<u>Invoice Amount</u>	<u>Pay Amount</u>
[02280]	AMERICAN EXPRESS	200.0-6320-2.0-000-90	18.13					
	ATT 831 000 4097 IP FLEX	224.0-6320-2.0-000-60	74.29		6/01/2024	6/01/2024	1,394.67	1,394.67
	VOICE/PLAN	224.0-6320-2.0-000-80	1.33					
		311.0-6320-3.1-000-00	42.17					
		311.0-6320-3.1-000-50	1.72					
		311.0-6320-3.1-001-00	73.40					
		311.0-6320-3.1-002-00	73.40					
		311.0-6320-3.1-004-00	73.40					
		311.0-6320-3.1-005-00	73.40					
		311.0-6320-3.1-006-00	73.40					
		311.0-6320-3.1-009-00	73.40					
		311.0-6320-3.1-014-00	73.40					
		311.0-6320-3.1-016-00	73.40					
		312.0-6320-3.1-000-00	16.44					
		312.0-6320-3.1-000-50	0.21					
		321.0-6320-3.2-000-00	52.83					
		321.0-6320-3.2-000-50	2.32					
		321.0-6320-3.2-055-00	73.40					
		321.0-6320-3.2-057-00	73.40					
		331.0-6320-3.3-000-00	113.46					
		331.0-6320-3.3-000-50	1.84					
		331.0-6320-3.3-024-00	73.40					
		331.0-6320-3.3-027-00	73.40					
		331.0-6320-3.3-029-00	73.40					
		331.0-6320-3.3-030-00	73.40					
		362.0-6320-3.2-000-00	0.86					
		371.0-6320-3.1-000-00	2.96					
		380.0-6320-3.1-000-00	4.23					
		380.0-6320-3.1-000-50	0.19					
		401.0-6320-4.0-000-00	2.67					
		407.0-6320-4.0-000-00	0.88					
		424.0-6320-4.0-000-00	0.12					
		426.0-6320-4.0-000-00	3.04					
		427.0-6320-4.0-000-00	1.07					
		428.0-6320-4.0-000-00	1.11					
		500.0-6320-5.0-000-00	3.19					

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.
A/P Preliminary Register with Accounting Distribution for Check Date 7/03/2024
1-WestAmerica New AP Checking

<u>Organization</u>	<u>Invoice Description</u>	<u>Account Distribution</u>	<u>Amount</u>	<u>Invoice</u>	<u>Invoice Date</u>	<u>Activity Date</u>	<u>Invoice Amount</u>	<u>Pay Amount</u>
[02280]	AMERICAN EXPRESS	200.0-6320-2.0-000-90	90.65		6/01/2024	6/01/2024	5,689.28	5,689.28
	ATT 831 000 9204 10G	311.0-6320-3.1-000-00	164.22					
		311.0-6320-3.1-000-50	7.89					
		311.0-6320-3.1-001-00	270.92					
		311.0-6320-3.1-002-00	270.92					
		311.0-6320-3.1-004-00	270.92					
		311.0-6320-3.1-005-00	270.92					
		311.0-6320-3.1-006-00	270.92					
		311.0-6320-3.1-009-00	270.92					
		311.0-6320-3.1-014-00	270.92					
		311.0-6320-3.1-016-00	270.92					
		312.0-6320-3.1-000-00	61.77					
		312.0-6320-3.1-000-50	0.89					
		321.0-6320-3.2-000-00	203.92					
		321.0-6320-3.2-000-50	10.26					
		321.0-6320-3.2-051-00	270.92					
		321.0-6320-3.2-053-00	270.92					
		321.0-6320-3.2-054-00	270.92					
		321.0-6320-3.2-055-00	270.92					
		321.0-6320-3.2-057-00	270.92					
		331.0-6320-3.3-000-00	424.63					
		331.0-6320-3.3-000-50	8.10					
		331.0-6320-3.3-024-00	270.92					
		331.0-6320-3.3-027-00	270.92					
		331.0-6320-3.3-030-00	270.92					
		362.0-6320-3.2-000-00	4.14					
		371.0-6320-3.1-000-00	270.92					
		380.0-6320-3.1-000-00	16.18					
		380.0-6320-3.1-000-50	0.70					
		401.0-6320-4.0-000-00	14.17					
		407.0-6320-4.0-000-00	4.63					
		424.0-6320-4.0-000-00	0.62					
		426.0-6320-4.0-000-00	16.15					
		427.0-6320-4.0-000-00	5.69					
		428.0-6320-4.0-000-00	5.85					
		535.0-6320-5.0-000-00	15.71					

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.
A/P Preliminary Register with Accounting Distribution for Check Date 7/03/2024
1-WestAmerica New AP Checking

<u>Organization</u>	<u>Invoice Description</u>	<u>Account Distribution</u>	<u>Amount</u>	<u>Invoice</u>	<u>Invoice Date</u>	<u>Activity Date</u>	<u>Invoice Amount</u>	<u>Pay Amount</u>
[02280]	AMERICAN EXPRESS	200.0-6320-2.0-000-90	238.55		6/01/2024	6/01/2024	18,623.67	18,623.67
	ATT 831 000 9751 FRESNO ASE	207.0-6320-2.0-000-00	12.58					
		218.0-6320-2.0-000-00	6.24					
		272.0-6320-2.0-000-00	6.34					
		311.0-6320-3.1-000-00	771.09					
		311.0-6320-3.1-000-50	10.06					
		311.0-6320-3.1-001-00	931.82					
		311.0-6320-3.1-002-00	931.82					
		311.0-6320-3.1-004-00	931.82					
		311.0-6320-3.1-005-00	931.82					
		311.0-6320-3.1-006-00	931.82					
		311.0-6320-3.1-009-00	931.82					
		311.0-6320-3.1-014-00	931.82					
		311.0-6320-3.1-016-00	931.82					
		312.0-6320-3.1-000-00	259.61					
		312.0-6320-3.1-000-50	1.49					
		321.0-6320-3.2-000-00	890.92					
		321.0-6320-3.2-000-50	16.03					
		321.0-6320-3.2-051-00	931.82					
		321.0-6320-3.2-053-00	931.82					
		321.0-6320-3.2-054-00	931.82					
		321.0-6320-3.2-055-00	931.82					
		321.0-6320-3.2-057-00	1185.12					
		331.0-6320-3.3-000-00	1156.83					
		331.0-6320-3.3-000-50	12.86					
		331.0-6320-3.3-024-00	931.82					
		331.0-6320-3.3-027-00	931.82					
		331.0-6320-3.3-030-00	931.82					
		362.0-6320-3.2-000-00	3.17					
		371.0-6320-3.1-000-00	2.80					
		380.0-6320-3.1-000-00	48.83					
		380.0-6320-3.1-000-50	2.42					
		426.0-6320-4.0-000-00	13.04					
		501.0-6320-5.0-000-00	8.39					
[02280]	AMERICAN EXPRESS	224.0-6320-2.0-000-60	60.87		6/01/2024	6/01/2024	1,159.89	1,159.89
	COMCAST	224.0-6320-2.0-000-80	60.87					
		371.0-6320-3.1-000-00	365.25					
		500.0-6320-5.0-000-00	87.81					
		501.0-6320-5.0-000-00	59.93					
		508.0-6320-5.0-000-00	308.77					
		531.0-6320-5.0-000-00	2.54					
		533.0-6320-5.0-000-00	92.22					
		533.0-6320-5.0-062-00	121.63					

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.
A/P Preliminary Register with Accounting Distribution for Check Date 7/03/2024
1-WestAmerica New AP Checking

<u>Organization</u>	<u>Invoice Description</u>	<u>Account Distribution</u>	<u>Amount</u>	<u>Invoice</u>	<u>Invoice Date</u>	<u>Activity Date</u>	<u>Invoice Amount</u>	<u>Pay Amount</u>
[02280]	AMERICAN EXPRESS	200.0-6437-2.0-000-90	280.41		6/01/2024	6/01/2024	737.00	737.00
	MATSON	207.0-6437-2.0-000-00	0.48					
		218.0-6437-2.0-000-00	0.24					
		272.0-6437-2.0-000-00	0.24					
		311.0-6437-3.1-000-00	67.07					
		311.0-6437-3.1-005-00	45.00					
		312.0-6437-3.1-000-00	6.92					
		321.0-6437-3.2-000-00	85.39					
		331.0-6437-3.3-000-00	14.83					
		331.0-6437-3.3-031-00	85.50					
		371.0-6437-3.1-000-00	58.60					
		426.0-6437-4.0-000-00	0.50					
		500.0-6437-5.0-000-00	29.94					
		501.0-6437-5.0-000-00	20.75					
		508.0-6437-5.0-000-00	8.82					
		531.0-6437-5.0-000-00	0.87					
		533.0-6437-5.0-000-00	31.44					

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.
A/P Preliminary Register with Accounting Distribution for Check Date 7/03/2024
1-WestAmerica New AP Checking

<u>Organization</u>	<u>Invoice Description</u>	<u>Account Distribution</u>	<u>Amount</u>	<u>Invoice</u>	<u>Invoice Date</u>	<u>Activity Date</u>	<u>Invoice Amount</u>	<u>Pay Amount</u>
[02280] AMERICAN EXPRESS OFFICE DEPOT PO 26341		371.0-6130-3.1-000-00	4099.65	2	5/31/2024	5/31/2024	4,099.65	4,099.65
[02280] AMERICAN EXPRESS OFFICE DEPOT PO 26413		200.0-6110-2.0-000-90	248.55	2	5/31/2024	6/01/2024	2,091.76	2,091.76
		207.0-6110-2.0-000-00	946.24					
		272.0-6110-2.0-000-00	90.00					
		282.0-6110-2.0-000-00	797.87					
		311.0-6110-3.1-000-00	0.73					
		321.0-6110-3.2-000-00	1.73					
		401.0-6110-4.0-000-00	0.43					
		500.0-6110-5.0-000-00	0.07					
		501.0-6110-5.0-000-00	0.79					
		508.0-6110-5.0-000-00	0.01					
		535.0-6110-5.0-000-00	5.34					
[02280] AMERICAN EXPRESS OFFICE DEPOT PO 26293		371.0-6110-3.1-000-00	1879.17	3	5/31/2024	5/31/2024	1,879.17	1,879.17
[02280] AMERICAN EXPRESS OFFICE DEPOT PO 26277		331.0-6130-3.3-026-00	248.90	3	5/31/2024	5/31/2024	248.90	248.90
[02280] AMERICAN EXPRESS OFFICE DEPOT PO 26279		331.0-6110-3.3-029-00	678.44	3	5/31/2024	5/31/2024	678.44	678.44
[02280] AMERICAN EXPRESS OFFICE DEPOT PO 26290		311.0-6110-3.1-004-00	229.80	363318558	5/08/2024	5/08/2024	229.80	229.80
[02280] AMERICAN EXPRESS OFFICE DEPOT PO 26291		311.0-6110-3.1-005-00	185.71	364984074	5/08/2024	5/08/2024	185.71	185.71
[02280] AMERICAN EXPRESS OFFICE DEPOT PO 26274		200.0-6110-2.0-000-90	28.98	365903382	5/02/2024	6/01/2024	83.35	83.35
		207.0-6110-2.0-000-00	42.81					
		272.0-6110-2.0-000-00	10.49					
		311.0-6110-3.1-000-00	0.09					
		321.0-6110-3.2-000-00	0.20					
		401.0-6110-4.0-000-00	0.05					
		500.0-6110-5.0-000-00	0.01					
		501.0-6110-5.0-000-00	0.09					
		535.0-6110-5.0-000-00	0.63					
[02280] AMERICAN EXPRESS OFFICE DEPOT PO 26356		311.0-6110-3.1-000-00	242.18	365971613	5/16/2024	5/16/2024	835.09	835.09
		312.0-6110-3.1-000-00	50.11					
		321.0-6110-3.2-000-00	292.29					
		331.0-6110-3.3-000-00	250.51					
[02280] AMERICAN EXPRESS OFFICE DEPOT PO 26396		321.0-6110-3.2-000-00	952.52	367350464	5/28/2024	5/28/2024	1,428.76	1,428.76
		321.0-6110-3.2-055-00	476.24					
[02280] AMERICAN EXPRESS OFFICE DEPOT PO 26342		311.0-6110-3.1-000-00	319.87	367427714	5/15/2024	5/15/2024	319.87	319.87

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.
A/P Preliminary Register with Accounting Distribution for Check Date 7/03/2024
1-WestAmerica New AP Checking

<u>Organization</u>	<u>Invoice Description</u>	<u>Account Distribution</u>	<u>Amount</u>	<u>Invoice</u>	<u>Invoice Date</u>	<u>Activity Date</u>	<u>Invoice Amount</u>	<u>Pay Amount</u>
[02280] AMERICAN EXPRESS	OFFICE DEPOT PO 26327	401.0-6110-4.0-000-00	190.21	367545370	5/13/2024	5/13/2024	792.52	792.52
		426.0-6110-4.0-000-00	427.96					
		427.0-6110-4.0-000-00	87.18					
		428.0-6110-4.0-000-00	87.17					
[02280] AMERICAN EXPRESS	OFFICE DEPOT PO 26414	224.0-6110-2.0-000-60	14.09	370162020	5/31/2024	6/01/2024	211.21	211.21
		224.0-6130-2.0-000-60	197.12					
[02280] AMERICAN EXPRESS	OFFICE DEPOT PO 26375	200.0-6110-2.0-000-90	187.51	4	5/31/2024	6/01/2024	688.79	688.79
		207.0-6110-2.0-000-00	426.51					
		272.0-6110-2.0-000-00	67.90					
		311.0-6110-3.1-000-00	0.55					
		321.0-6110-3.2-000-00	1.31					
		401.0-6110-4.0-000-00	0.33					
		500.0-6110-5.0-000-00	0.06					
		501.0-6110-5.0-000-00	0.60					
		508.0-6110-5.0-000-00	0.01					
		535.0-6110-5.0-000-00	4.01					
[02280] AMERICAN EXPRESS	OFFICE DEPOT PO 26319	200.0-6110-2.0-000-90	886.98	4	5/31/2024	5/31/2024	886.98	886.98
[02280] AMERICAN EXPRESS	LAKESHORE PO 26275	312.0-6134-3.1-012-00	447.61	471416	5/06/2024	5/06/2024	447.61	447.61
[02280] AMERICAN EXPRESS	LAKESHORE PO 26270	401.0-6130-4.0-000-00	1643.20	471467	5/09/2024	5/09/2024	1,643.20	1,643.20
[02280] AMERICAN EXPRESS	LAKESHORE PO 26288	321.0-6132-3.2-055-00	411.00	481392	5/09/2024	6/01/2024	411.00	411.00
[02280] AMERICAN EXPRESS	LAKESHORE PO 26289	371.0-6130-3.1-000-00	2523.33	481423	5/09/2024	6/01/2024	2,523.33	2,523.33
[02280] AMERICAN EXPRESS	OFFICE DEPOT PO 26397	321.0-6110-3.2-055-00	727.23	5	5/31/2024	5/31/2024	727.23	727.23
[02280] AMERICAN EXPRESS	OFFICE DEPOT PO 26365	401.0-6110-4.0-000-00	1552.81	5	5/31/2024	5/31/2024	1,552.81	1,552.81
[02280] AMERICAN EXPRESS	LAKESHORE PO 26363	331.0-6130-3.3-027-00	751.85	514540	5/20/2024	6/01/2024	751.85	751.85
[02280] AMERICAN EXPRESS	LAKESHORE PO 26364	401.0-6130-4.0-000-00	898.46	517196	5/22/2024	6/01/2024	898.46	898.46
[02280] AMERICAN EXPRESS	LAKESHORE PO 26339	371.0-6130-3.1-000-00	3166.26	521326	5/29/2024	5/29/2024	3,166.26	3,166.26
[02280] AMERICAN EXPRESS	ECOLAB 390.1-6180-001	390.1-6180-3.9-001-00	148.31	6345511923	5/15/2024	5/01/2024	148.31	148.31
[02280] AMERICAN EXPRESS	OFFICE DEPOT PO 26259	200.0-6110-2.0-000-90	651.39	7	5/02/2024	5/02/2024	935.19	935.19
		200.0-6112-2.0-000-90	283.80					

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.
A/P Preliminary Register with Accounting Distribution for Check Date 7/03/2024
1-WestAmerica New AP Checking

<u>Organization</u>	<u>Invoice Description</u>	<u>Account Distribution</u>	<u>Amount</u>	<u>Invoice</u>	<u>Invoice Date</u>	<u>Activity Date</u>	<u>Invoice Amount</u>	<u>Pay Amount</u>
[02280] AMERICAN EXPRESS FEDX	200.0-6170-2.0-000-90 331.0-6170-3.3-000-00	41.03 25.00	850287059	5/17/2024	5/17/2024	66.03	66.03	
[02280] AMERICAN EXPRESS FEDX	200.0-6170-2.0-000-90	83.72	851059045	5/24/2024	5/24/2024	83.72	83.72	
[02280] AMERICAN EXPRESS FEDX	200.0-6170-2.0-000-90 501.0-6170-5.0-000-00	34.17 37.93	852308441	6/07/2024	6/07/2024	72.10	72.10	
[02280] AMERICAN EXPRESS FEDX	200.0-6170-2.0-000-90 312.0-6170-3.1-000-00 508.0-6170-5.0-000-00	81.72 40.31 123.77	853800877	6/21/2024	6/21/2024	245.80	245.80	
[02280] AMERICAN EXPRESS COMM PLAYTHINGS PO 26213	311.0-6130-3.1-002-00	4002.01	B1F33	5/08/2024	5/08/2024	4,002.01	4,002.01	
[02280] AMERICAN EXPRESS COMM PLAYTHINGS PO 26214	331.0-6130-3.3-030-00	4466.95	B1F34	5/08/2024	6/01/2024	4,466.95	4,466.95	
[02280] AMERICAN EXPRESS COMM PLAYTHINGS PO 26215	331.0-6130-3.3-030-00	4648.33	B1F35	5/06/2024	6/01/2024	4,648.33	4,648.33	
[02280] AMERICAN EXPRESS COMM PLAYTHINGS PO 26245	311.0-6130-3.1-001-00	2386.92	B1F36	5/09/2024	5/09/2024	2,386.92	2,386.92	
[02280] AMERICAN EXPRESS COMM PLAYTHINGS PO 26236	311.0-6130-3.1-001-00	2717.08	B1F37	5/09/2024	5/09/2024	2,717.08	2,717.08	
[02280] AMERICAN EXPRESS COMM PLAYTHINGS PO 26382	312.0-6130-3.1-012-00	1346.63	B1Q40	6/07/2024	5/31/2024	1,346.63	1,346.63	
[02280] AMERICAN EXPRESS DISCOUNT SCHOOL PO 26257	311.0-7112-3.1-016-00	381.27	W1464597010	5/04/2024	5/04/2024	381.27	381.27	
[02280] AMERICAN EXPRESS DISCOUNT SCHOOL PO 26383	312.0-6130-3.1-012-00	468.07	W1472558010	5/25/2024	5/25/2024	468.07	468.07	
Total to be paid to [02280] AMERICAN EXPRESS							88,353.56	
Total for this check run:							88,353.56	

Credit Card Charges

JUNE 2024

Fiscal

Name of Vendor	Description	Amount	
Capital One/Walmart	Supplies for centers	4939.03	
Home Depot	Supplies for centers	9520.12	
Wex Bank (Chevron)	Fuel	0.00	
Wex Bank (Valero)	Fuel	5923.89	
JUN STMT DATES			
LA			

07/24
JD

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.

Check Listing w/ Invoice Listing & Account Distribution from 6/28/2024 to 7/27/2024

1-WestAmerica New AP Checking

<u>Check</u>	<u>Date</u>	<u>Vendor</u>		<u>Account</u>	<u>Dist.</u> <u>Amount</u>	<u>Invoice #</u>	<u>Invoice Date</u>	<u>Check Amount</u>
0201668	7/19/2024 [03372]	HOME DEPOT *****	PMT - Invoices , , , , , , , , , , ,	200.0-6130-2.0-000-90	13.44		5/28/2024	7,962.47
				200.0-6432-2.0-000-90	1422.80		5/28/2024	
				280.0-6130-2.0-000-60	5011.48		5/29/2024	
				311.0-6130-3.1-000-00	104.18		6/01/2024	
				311.0-6140-3.1-000-00	35.20		6/01/2024	
				311.0-6140-3.1-001-00	94.47		6/04/2024	
				312.0-6140-3.1-000-00	5.87		6/04/2024	
				321.0-6130-3.2-000-00	120.98		6/07/2024	
				321.0-6140-3.2-000-00	41.07		6/10/2024	
				321.0-6432-3.2-054-00	254.84		6/10/2024	
				321.0-6432-3.2-055-00	81.32		6/12/2024	
				331.0-6130-3.3-000-00	97.45		6/13/2024	
				331.0-6130-3.3-029-00	68.37		6/18/2024	
				331.0-6140-3.3-000-00	35.20		6/20/2024	
				331.0-6432-3.3-024-00	130.67		6/24/2024	
				331.0-6432-3.3-027-00	150.47		6/25/2024	
				331.0-6432-3.3-029-00	294.66		6/25/2024	
0201669	7/19/2024 [03372]	HOME DEPOT	PMT - Invoices , , , , ,	200.0-6432-2.0-000-90	626.61		6/06/2024	1,557.65
				311.0-6432-3.1-007-00	61.79		6/12/2024	
				321.0-6143-3.2-054-00	469.81		6/25/2024	
				331.0-6130-3.3-024-00	399.44		6/26/2024	
							6/27/2024	
Total Checks							9,520.12	9,520.12

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.
Check Listing w/ Invoice Listing & Account Distribution from 6/06/2024 to 7/05/2024
1-WestAmerica New AP Checking

<u>Check</u>		<u>Date</u>	<u>Vendor</u>	<u>Account</u>	<u>Dist Amount</u>	<u>Invoice #</u>	<u>Invoice Date</u>	<u>Check Amount</u>
0201168	[REC]	6/14/2024	[06067] WEX BANK Valero Box 6293 - Invoices 18080, 18080, 18080, 18080, 18080, 40664, 40664, 40664, 40664, 40664, 48976, 48976, 48976, 48976, 48976, 48976, 49107, 49107	321.0-6610-3.2-000-39 331.0-6610-3.3-000-00 331.0-6610-3.3-030-00 500.0-6610-5.0-000-00 501.0-6610-5.0-000-00 508.0-6610-5.0-000-00 531.0-6610-5.0-000-00 533.0-6610-5.0-000-00	114.74 275.10 45.72 23.30 138.96 3.49 0.56 133.58	18080 18080 18080 18080 18080 40664 40664 40664 40664 40664 48976 48976 48976 48976 48976 49107 49107	5/06/2024 5/17/2024 5/17/2024 5/22/2024 6/03/2024 5/06/2024 5/10/2024 5/20/2024 5/30/2024 6/04/2024 5/06/2024 5/10/2024 5/17/2024 5/23/2024 6/03/2024 5/14/2024 5/31/2024	735.45
0201169	[REC]	6/14/2024	[06067] WEX BANK Valero Box 6293 - Invoices 49354, 49529, 49529, 49529, 49669, 49669, 49669, 49784, 49784, 49784, 49784, 50006, 50006, 50006, 50006, 50212, 50329	272.0-6610-2.0-000-00 311.0-6610-3.1-000-00 311.0-6610-3.1-000-39 321.0-6610-3.2-000-00 331.0-6610-3.3-000-00 331.0-6610-3.3-029-00	74.00 281.63 55.37 283.45 343.73 49.00	49354 49529 49529 49529 49669 49669 49669 49784 49784 49784 49784 50006 50006 50006 50006 50212 50329	5/06/2024 5/10/2024 5/22/2024 5/31/2024 5/08/2024 5/10/2024 5/28/2024 5/14/2024 5/22/2024 5/30/2024 5/31/2024 5/09/2024 5/21/2024 5/31/2024 6/05/2024 5/21/2024 5/14/2024	1,087.18

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.
Check Listing w/ Invoice Listing & Account Distribution from 6/06/2024 to 7/05/2024
1-WestAmerica New AP Checking

Check		Date	Vendor	Account	Dist. Amount	Invoice #	Invoice Date	Check Amount
0201170	[REC]	6/14/2024	[06067] WEX BANK Valero Box 6293 - Invoices 50329, 50410, 50527, 50527, 50527, 50600, 50600, 50600, 50600, 50709, 50709, 51194, 51194, 51194, 51343, 51343, 51343	200.0-6610-2.0-000-90 207.0-6610-2.0-000-00 224.0-6610-2.0-000-60 224.0-6610-2.0-000-80 246.0-6610-2.0-077-75 272.0-6610-2.0-000-00 278.0-6610-2.0-000-75 281.0-6610-2.0-000-00 321.0-6610-3.2-000-00 321.0-6610-3.2-000-39 331.0-6610-3.3-000-00 500.0-6610-5.0-000-00 501.0-6610-5.0-000-00 508.0-6610-5.0-000-00 533.0-6610-5.0-000-00	12.50 6.98 4.15 135.06 3.65 97.98 11.50 200.96 20.25 221.69 17.25 1.18 41.86 3.20 79.54	50329 50410 50527 50527 50527 50600 50600 50600 50709 50709 50709 51343 51343 51194 51194 51194 51343 51343	5/31/2024 6/05/2024 5/13/2024 5/17/2024 5/23/2024 5/06/2024 5/13/2024 5/17/2024 5/24/2024 5/08/2024 5/14/2024 5/13/2024 5/30/2024 6/04/2024 5/20/2024 5/23/2024 6/04/2024	857.75
0201171	[REC]	6/14/2024	[06067] WEX BANK Valero Box 6293 - Invoices 51657, 51657, 51657, 52028, 52028, 52028, 52028, 52028, 52028, 52333, 52481, 52671, 52671, 52671, 52671, 52671, 52671	216.0-6610-2.0-081-00 224.0-6610-2.0-000-80 272.0-6610-2.0-000-00 278.0-6610-2.0-000-75 281.0-6610-2.0-000-00 311.0-6610-3.1-000-39 331.0-6610-3.3-000-00 331.0-6610-3.3-024-00 331.0-6610-3.3-027-00	1.13 4.84 62.12 3.10 158.22 113.10 191.42 185.53 183.05	51657 51657 51657 51657 52028 52028 52028 52028 52028 52028 52028 52028 52028 52028 52333 52481 52671 52671 52671 52671 52671	5/09/2024 5/17/2024 5/20/2024 5/30/2024 5/06/2024 5/09/2024 5/16/2024 5/20/2024 5/24/2024 5/28/2024 6/03/2024 5/10/2024 5/06/2024 5/13/2024 5/16/2024 5/21/2024 5/23/2024	902.51

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.
Check Listing w/ Invoice Listing & Account Distribution from 6/06/2024 to 7/05/2024
1-WestAmerica New AP Checking

Check		Date	Vendor	Account	Dist. Amount	Invoice #	Invoice Date	Check Amount
0201172	[REC]	6/14/2024	[06067] WEX BANK Valero Box 6293 - Invoices 52671, 52846, 53018, 53018, 53018, 53018, 53018, 53018, 53174, 53323, 53323, 53323, 53323, 53323, 53497, 53620, 53620	200.0-6610-2.0-000-90 311.0-6610-3.1-000-00 311.0-6610-3.1-000-39 321.0-6610-3.2-000-00 331.0-6610-3.3-000-00 500.0-6610-5.0-000-00 501.0-6610-5.0-000-00 508.0-6610-5.0-000-00 531.0-6610-5.0-000-00 533.0-6610-5.0-000-00	19.60 343.18 92.14 405.80 381.36 7.69 3.94 2.46 13.06 176.33	52671 52846 53018 53018 53018 53018 53018 53174 53323 53323 53323 53323 53497 53620 53620	6/05/2024 5/15/2024 5/06/2024 5/19/2024 5/21/2024 5/29/2024 5/29/2024 6/01/2024 5/24/2024 5/07/2024 5/13/2024 5/21/2024 5/29/2024 6/04/2024 5/23/2024 5/13/2024 5/29/2024	1,445.56
0201173	[REC]	6/14/2024	[06067] WEX BANK Valero Box 6293 - Invoices 53885, 53885, 53968, 53968, 53968, 53968, 54099, 54099, 54099, 61480, 61480, 61480, 61480, 61480, 61480, 95028	311.0-6610-3.1-000-00 311.0-6610-3.1-000-39 312.0-6610-3.1-012-00 321.0-6610-3.2-000-00 331.0-6610-3.3-000-00	348.47 85.00 62.01 220.35 179.61	53885 53885 53968 53968 53968 54099 54099 54099 61480 61480 61480 61480 61480 61480 61480 95028	5/06/2024 5/21/2024 5/08/2024 5/14/2024 6/04/2024 6/04/2024 5/08/2024 5/14/2024 5/24/2024 5/13/2024 5/13/2024 5/23/2024 5/24/2024 5/28/2024 6/04/2024 5/15/2024	895.44
Total Checks							5,923.89	5,923.89

Card Member Service

COSTCO Credit Card Charges

JUNE 2024 Statement

Card Holder	Description	Card Amount
Irene Yang	Wellness items	1476.93
Maritza Gomez-Zaragoza	Supplies for program	802.84
Jennifer Coronado	Supplies for program	190.42
		0.00
		2470.19

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.
Check Listing w/ Invoice Listing & Account Distribution from 6/02/2024 to 7/02/2024
1-WestAmerica New AP Checking

<u>Check</u>		<u>Date</u>	<u>Vendor</u>	<u>Account</u>	<u>Dist.</u> <u>Amount</u>	<u>Invoice #</u>	<u>Invoice Date</u>	<u>Check Amount</u>	
0201297	[REC]	6/21/2024	[04454] CARD MEMBER SERVICE-COSTCO - Invoices , , , ,	200.0-6875-2.0-000-90	84.95		5/06/2024	2,470.19	
				207.0-6875-2.0-000-00	30.49		5/15/2024		
				218.0-6875-2.0-000-00	41.39		5/15/2024		
				272.0-6875-2.0-000-00	26.14		5/23/2024		
				311.0-6143-3.1-000-00	218.22		6/03/2024		
				311.0-6875-3.1-000-00	287.55				
				312.0-6875-3.1-000-00	26.14				
				321.0-6143-3.2-000-00	212.16				
				321.0-6875-3.2-000-00	418.25				
				330.0-6875-3.3-000-00	418.25				
				331.0-6143-3.3-000-00	175.80				
				371.0-6121-3.1-000-00	196.66				
				371.0-6875-3.1-000-00	13.07				
				401.0-6875-4.0-000-00	21.00				
				426.0-6875-4.0-000-00	18.34				
				427.0-6875-4.0-000-00	6.36				
				428.0-6875-4.0-000-00	6.58				
				500.0-6875-5.0-000-00	20.04				
				501.0-6121-5.0-000-00	95.21				
				501.0-6875-5.0-000-00	6.97				
				508.0-6121-5.0-000-00	95.21				
				508.0-6875-5.0-000-00	6.97				
				531.0-6875-5.0-000-00	6.97				
				533.0-6875-5.0-000-00	33.11				
				535.0-6875-5.0-000-00	4.36				
Total Checks								2,470.19	2,470.19

Community Action Partnership of Madera County, Inc.
 1225 Gill Avenue
 Madera, CA 93637
 (559) 673-9173

IN-KIND MONTHLY SUMMARY REPORT 2024-2025 / REPORTE SUMARIO MENSUAL DE IN KIND 2024-2025

MIGRANT AND SEASONAL HEAD START 2024-2025 MIGRANTE/TEMPORAL HEAD START 2024-2025
Month-Year JUNE 2024/ Mes-Año JUNIO 2024

CATEGORY	BUDGET Presupuesto	PREVIOUS/Previo TOTAL	CURRENT/Corriente TOTAL	Y-T-D/Asta ahora TOTAL	REMAINING IN-KIND NEEDED Resto de In Kind para recaudar
NON-FEDERAL CASH/EFFECTIVO NO FEDERAL					
Volunteer Services/Servicios Voluntarios	420,096.00	35,989.44	58,923.60	94,913.04	325,182.96
A. Professional Services/Servicios Profesionales	0.00	0.00	0.00	0.00	0.00
B. Center Volunteers/Voluntarios en el Centro	420,096.00	35,989.44	58,923.60	94,913.04	325,182.96
Other/Policy Council/Otro/Comité de Póliza	0.00	398.38	0.00	398.38	(398.38)
State Collaboration/Colaboracion de Estado	1,015,474.00	27,200.32	134,830.80	162,031.12	853,442.88
Donated Supplies/Materiales Donanos	1,006.00	0.00		0.00	1,006.00
Donated Food/Comida Donada	0.00	0.00		0.00	0.00
Donated Space/Sitio Donado	111,010.00	27,753.00	9,251.00	37,004.00	74,006.00
Transportation/Transportacion	0.00	0.00		0.00	0.00
TOTAL IN-KIND/TOTAL DE IN KIND	1,547,586.00	91,341.14	203,005.40	294,346.54	1,253,239.46

A. Y-T-D In-Kind / In-Kind asta ahora	294,346.54
B. Contracted In-Kind/ In-kind Contratado	1,547,586.00
C. Percent Y-T-D In-Kind/ Porcentaje de in-kind ásta ahora	
CONTRACT AMOUNT/CANTIDAD CONTRATADA	19.02%

**COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY
MADERA MIGRANT HEAD START including BLENDED MIGRANT PRESCHOOL STATE PROGRAM
INCOME CALCULATIONS
June-2024**

FREE MEALS	249	87
REDUCED	0	0
BASE	0	0
TOTAL	<u>249</u>	<u>87</u>

PERCENTAGES:

FREE	100.0000%	100.0000%
REDUCED	0.0000%	0.0000%
BASE	0.0000%	0.0000%
TOTAL	<u>100.0000%</u>	<u>100.0000%</u>

MEAL	#		%		RATE	=	
BREAKFAST:	3,606	X	100.0000%	X	\$2.2800	=	\$8,221.68
		X	0.0000%	X	\$0.0000	=	\$0.00
		X	0.0000%	X	\$0.0000	=	\$0.00
LUNCH:	2,250 1,232	X	100.0000%	X	\$4.2500	=	\$9,562.50
		X	100.0000%	X	\$4.2500	=	\$5,236.00
		X	0.0000%	X	\$0.0000	=	\$0.00
		X	0.0000%	X	\$0.0000	=	\$0.00
SUPPLEMENTS:	1,725 857	X	100.0000%	X	\$1.1700	=	\$2,018.25
		X	100.0000%	X	\$1.1700	=	\$1,002.69
		X	0.0000%	X	\$0.0000	=	\$0.00
		X	0.0000%	X	\$0.0000	=	\$0.00

9,670 TOTAL FEDERAL REIMBURSEMENT \$26,041.12

CASH IN LIEU: LUNCHES X \$0.2950 \$1,027.19

TOTAL REIMBURSEMENT \$27,068.31

	Breakfast	Lunch	Snack	Total
CMIG-MADERA MIGRANT PRESCHOOL	-	1,232	857	2,089
MMHS-MADERA MIGRANT HEAD START	<u>3,606</u>	<u>2,250</u>	<u>1,725</u>	<u>7,581</u>
	<u>3,606</u>	<u>3,482</u>	<u>2,582</u>	<u>9,670</u>

	<u>MMHS</u>	<u>CMIG</u>	<u>Total</u>
TOTAL FEDERAL REIMBURSEMENT:	\$19,802.43	\$6,238.69	\$26,041.12
CASH IN LIEU:	<u>\$663.75</u>	<u>\$363.44</u>	<u>\$1,027.19</u>
	\$20,466.18	\$6,602.13	\$27,068.31

MONTHLY PROGRAM INFORMATION SUMMARY REPORT FOR POLICY COUNCIL & GOVERNING BODY

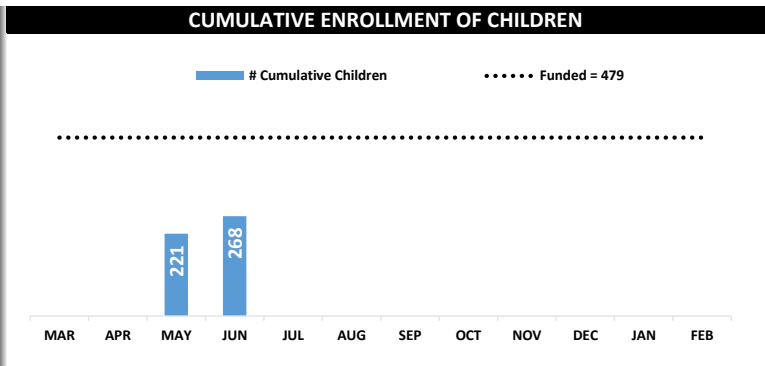
Community Action Partnership of Madera County (CAPMC)

[Migrant Head Start]

June 2024

268 cumulative children
 206 cumulative families
 39 teaching staff

PRIMARY TYPE OF ELIGIBILITY		
(#)		(%)
6	Homeless Children	2%
	Foster Children	0%
123	Receives Public Assistance	46%
116	Income Below Federal Poverty	43%
	Near Low Income (waiver required)	
23	Over Income (maximum 10%)	9%

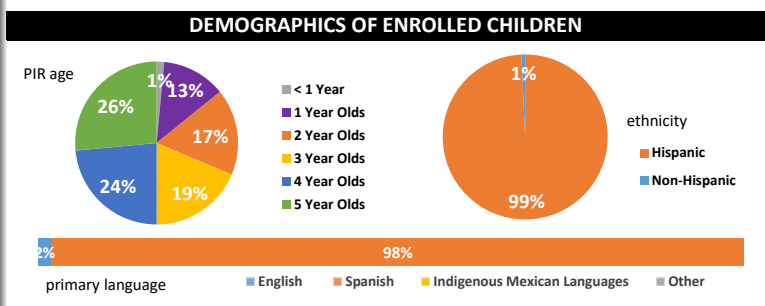


CHILDREN WITH DISABILITIES		
(#)		(%)
32	Disabilities	7%

(% of funded; minimum 10%)

DEVELOPMENTAL SCREENING OF NEW ENROLLEES		
(#)		(%)
37	New Enrollees (cumulative)	14%
22	Received Screening <45 Days	59%

(Of new enrollees)



CHILDREN'S HEALTH		
(#)		(%)
268	Has Health Insurance	100%
175	EPSDT Up-to-Date	65%
13	Chronic Health Condition	5%
13	Received Medical Treatment	100%

(Of children with diagnosed chronic health conditions)

268	Immunizations Up-to-Date	100%
-----	--------------------------	------

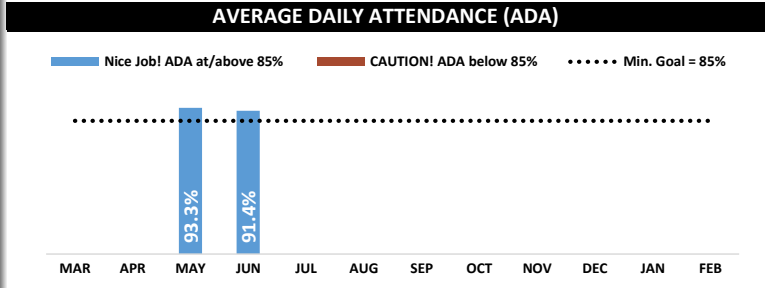
(Also includes those eligible for exemption & those with all immunizations possible at this time, but not for their age)

268	Access to Dental Care	100%
220	Completed Dental Exam	120%
28	Received Dental Treatment	93%

(Of children who needed dental treatment other)

121	Healthy BMI	70%
-----	-------------	-----

(Children under 3 years are excluded)



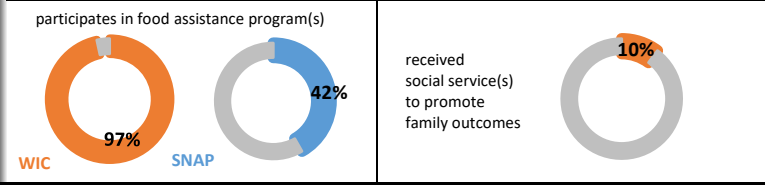
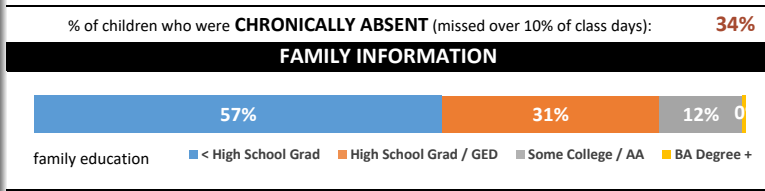
STAFF EDUCATION		
# Staff		% Meet Minimum Education Requirements
10	Preschool Teacher: BA+	30%
	Preschool Teacher: AA+	100%

(AA degree is minimum education requirement for a Preschool Teacher. However, at least 50% should have a BA degree or above).

10	Preschool Assistant: CDA+	100%
19	Infant/Toddler Teacher: CDA+	100%

(Includes those who are currently enrolled in a CDA/equivalent program)

All staff should meet minimum education requirements for their position.



symbol key:

★ = Nice job!

Meets or exceeds Head Start regulations or expectations

▶ = Caution!

Results lower than expected

✖ = Take Action!

Does not meet Head Start regulations

All data is cumulative as of report month, unless otherwise indicated.

Resumen Mensual del Informe de Datos Actualizados del Programa (PIR, sigla en inglés) para el Consejo de Políticas y Mesa Directiva

Community Action Partnership of Madera County (CAPMC)

[Migrant Head Start]

junio 2024



268 Niños Acumulados



206 Familias Acumuladas



39 Maestras

Tipo de Elegibilidad

(#)		(%)
6	Niños Sin Hogar	2%
	Niños en Adopción Temporal	0%
123	Recibe Asistencia Pública	46%
116	Ingresos por Debajo de la Pobreza Federal	43%
	Ingresos Cerca de Bajos (requiere una exención)	
23	Ingresos Sobre las Pautas (máximo 10%)	9%

Niños con Discapacidades

(#)		(%)
32	Discapacidades	7%
	(% de la matrícula contratada; mínimo 10%)	

Evaluación del Desarrollo para los Nuevos Niños(as) Inscritos

(#)		(%)
37	Nuevos Niños(as) Inscritos (acumulados)	14%
22	Recibió Evaluación <45 días	59%
	de los Nuevos Niños(as) Inscritos	

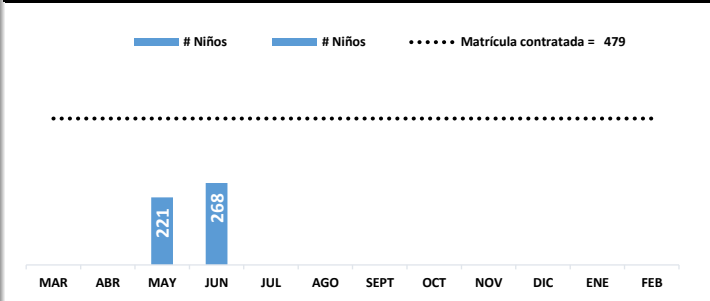
Salud de los Niños

(#)		(%)
268	Tiene Seguro Médico	100%
175	al Día Con el Cuidado de Salud Preventivo	65%
13	Condición de Salud Crónica	5%
13	Recibieron Tratamiento Médico	100%
	de niños con enfermedades crónicas diagnosticadas	
268	al Día con las Vecunas	100%
	También incluye a aquellos elegibles para la exención y aquellos con todas las vacunas posibles en este momento, pero no para su edad	
268	Acceso a Servicios Dentales	100%
220	Completaron Exámenes Dentales Profesional	120%
28	Recibió Tratamiento Dental	93%
	(de niños en edad preescolar que necesitaban tratamiento dental distinto al cuidado preventivo)	
121	BMI Saludable	70%
	(los niños menores de 3 años están excluidos)	

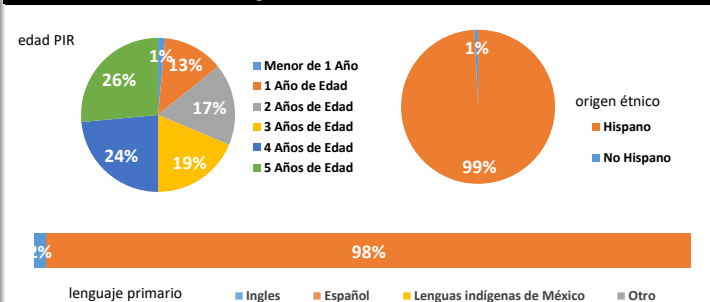
Educación del Personal

# Personal		% llenan los requisitos mínimo de educación
10	Maestras de la Clase Preescolar: BA+	30%
	Maestras de la Clase Preescolar: AA+	100%
	(Un título AA es el requisito mínimo de educación para los maestros de preescolar, pero al menos el 50% debe tener una licenciatura.)	
10	Asistentes de Maestra de la Clase Preescolar: CDA+	100%
19	Maestras de la Clase de Infantes / Niños Pequeños: CDA+	100%
	(Incluyen a aquellos que están actualmente inscritos en un programa CDA / equivalente o superior. CDA=Asociado/Diplomado en Desarrollo Infantil (CDA, sigla en inglés)	
	(Todo el personal debe cumplir con los requisitos mínimos de educación para su puesto).	

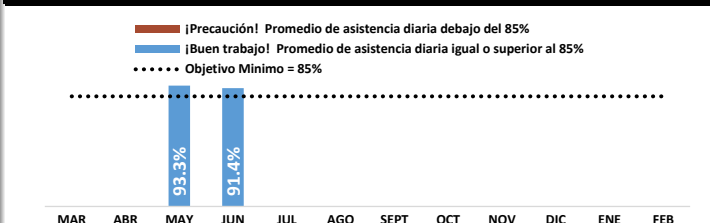
Matrícula Cumulativa de Niños



Demografía de los Niños Matriculados

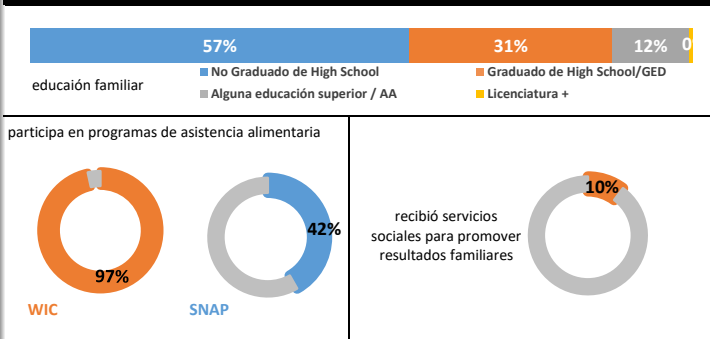


Promedio de Asistencia Diaria



% de niños crónicamente ausentes (ausente más del 10% de los días de clase): 34%

Información Familiar



simbolo clave:

★ = ¡Buen trabajo!
Cumple o excede las regulaciones o expectativas de Head Start

⚠ = ¡Precaución!
Resultados más bajos de lo esperado

✖ = ¡Tomar acción!
No cumple con las regulaciones de Head Start

Todos los datos son acumulativos al mes del informe, a menos que se indique lo contrario.

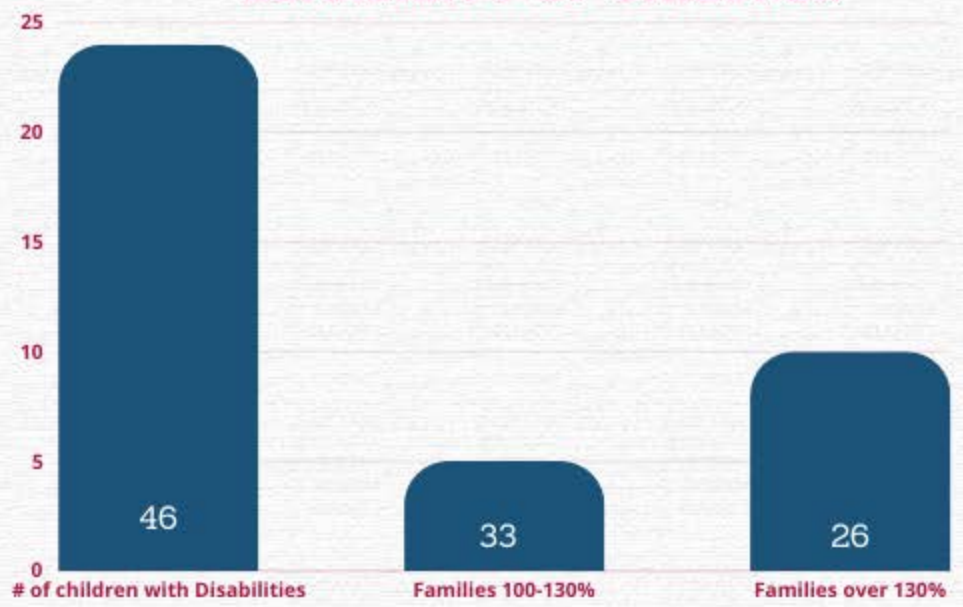


Fresno Migrant Seasonal Head Start Monthly Enrollment Report June 2024

ENROLLMENT REPORT



DISABILITIES & ELIGIBILITY OF CHILDREN



ATTENDANCE REPORT



IN-KIND MONTHLY SUMMARY REPORT

Month

June

Year

2024

CATEGORY	BUDGET	PREVIOUS TOTAL	CURRENT TOTAL	Y-T-D TOTAL	REMAINING IN-KIND NEEDED
NON-FEDERAL CASH					
VOLUNTEER SERVICES	630,885.00	450,270.71	69,849.75	520,120.46	(110,764.54)
A. Professional Services	0.00	2,113.75	2,113.75	2,113.75	2,113.75
B. Center Volunteers	630,885.00	448,156.96	69,849.75	518,006.71	(112,878.29)
C. Policy Concil/Committee	0.00	0.00	0.00	0.00	0.00
OTHER - FOOD DONATION	0.00	0.00	0.00	0.00	0.00
DONATED SUPPLIES	2,356.00	0.00	2,356.00	0.00	(2,356.00)
DONATED EQUIPMENT	0.00	0.00	0.00	0.00	0.00
DONATED - BUS STORAGE	0.00	0.00	0.00	0.00	0.00
DONATED SPACE	167,503.00	125,627.22	13,958.58	139,585.80	(27,917.20)
TRANSPORTATION	0.00	0.00	0.00	0.00	0.00
TOTAL IN-KIND	800,744.00	575,897.93	83,808.33	659,706.26	(141,037.74)
C. Salarie & FB (First 5)	0.00	0.00	0.00	0.00	0.00
Grand Total	800,744.00	575,897.93	83,808.33	659,706.26	(141,037.74)

A. Y-T-D In-Kind	659,706.26
B. Contracted In-Kind	800,744.00
C. Percent Y-T-D In-Kind	82.39%

**COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY
 FRESNO MIGRANT HEAD START FOOD PROGRAM
 INCOME CALCULATIONS
 June-2024**

FREE MEALS	169
REDUCED	-
BASE	-
TOTAL	169

PERCENTAGES:

FREE	100.0000%
REDUCED	0.0000%
BASE	0.0000%
TOTAL	100.0000%

MEAL	#		%		RATE			
BREAKFAST:	2,014	X	100.0000%	X	\$2.2100	=	\$4,450.94	
LUNCH:	1,989	X	100.0000%	X	\$4.0300	=	\$8,015.67	
SUPPLEMENTS:	1,710	X	100.0000%	X	\$1.1800	=	\$2,017.80	
	5,713						\$14,484.41	
	TOTAL FEDERAL REIMBURSEMENT							\$14,484.41
CASH IN LIEU:							\$596.70	
							\$596.70	
TOTAL REIMBURSEMENT							\$15,081.11	



Report to the Board of Directors

Agenda Item Number: D-8

Board of Directors Meeting for: August 8, 2024

Author: Maritza Gomez-Zaragoza

DATE: July 16, 2024

TO: Board of Directors

FROM: Maritza Gomez-Zaragoza, Program Director

SUBJECT: 2024-2025 Madera Migrant/Seasonal Self-Assessment procedure, process, and planning guide

I. RECOMMENDATIONS:

Review and consider approving the 2024-2025 Madera Migrant/Seasonal Head Start program process for conducting the self-assessment.

II. SUMMARY:

In accordance with Head Start Performance Standards, a yearly self-assessment must be conducted. The assessment assists staff to determine if the systems are in place help the program comply with the 2007 Head Start Act and Performance Standards. Developed checklist that reflect compliance with OHS Program Performance Standards will be utilized to conduct the self-assessment. Staff have developed a process to ensure all service areas are assessed and ensure compliance.

III. DISCUSSION:

The following process will take place in order to ensure the program is still in compliance with Head Start Performance Standards.

- Recipient's staff in conjunction with sub-recipient's staff will conduct site visits, file review, and staff interviews based on the OHS Protocol.
- In preparation, CAPMC staff will review of all children's files for compliance in all service areas - Education, Health, Nutrition, Family, Disability/Mental Health and ERSEA
- Monitoring/review of COPA data
- Program data, CLASS, curriculum to fidelity results, parent services & goal setting, and other data; will also be reviewed to ensure program compliance.

Once all information is gathered it will be used to identify possible trends, areas for strengths and areas for improvement. A report will be presented to the Policy Committee and Board of Directors by October 2024 detailing the result of the program's self-assessment.

- The 2024-2025 Madera Migrant/Seasonal Self-Assessment procedure, process, and planning

guide will be presented to the Policy Committee for approval on August 6, 2024.

IV. **FINANCING**: None



Report to the Board of Directors

Agenda Item Number: D-9

Board of Directors Meeting for: August 8, 2024

Author: Maru Gasca Sanchez

DATE: July 16, 2024

TO: Board of Directors

FROM: Maru Gasca Sanchez, Deputy Director Child and Family Services

SUBJECT: CAPMC Migrant/Seasonal Head Start in Collaboration with California Department of Social Services, Migrant Child Care and Development 2024-2025 Program Philosophy, Goals and Objectives and Parent Handbook.

I. RECOMMENDATIONS

Review and consider approving CAPMC Migrant/Seasonal Head Start in Collaboration with California Department of Social Services, Migrant Child Care and Development 2024-2025 Program Philosophy, Goals and Objectives and Parent Handbook.

II. SUMMARY

The California Department of Social Services requires that the Program's Philosophy, Goals and Objectives and Parent Handbook be approved by CAPMC Board of Directors annually

III. DISCUSSION

- a. Included in the parent handbook is CAPMC's philosophy statement and goals and objectives that support the philosophy.
- b. The parent handbook provides parents with information regarding the following topics:
 - Days and hours of service and holiday schedule
 - Registration process and eligibility requirements, and parent responsibilities
 - Open door policy
 - Sexual Harassment
 - Attendance and absences
 - Communication with staff
 - Health and emergency procedures
 - Uniform Complaint Procedure
 - A copy of the handbook is provided to families enrolling their children at the Sierra Vista center.
- c. Information will be reviewed with parents at time of registration and/or at the first orientation and/or parent meeting.

- The CAPMC Migrant/Seasonal Head Start in Collaboration with California Department of Social Services, Migrant Child Care and Development 2024-2025 Program Philosophy, Goals and Objectives and Parent Handbook will be presented for approval to the PC on August 6, 2024.

IV. FINANCING

None



**CAPMC Madera Migrant/Seasonal Head Start In
Collaboration with California Department of Social
Services Migrant Child Care and Development Program**

PARENT HANDBOOK

2024-2025



Community Action Partnership of Madera County welcomes
your family to our Head Start/State Based Migrant Program

This handbook was designed to assist families with understanding the requirements to participate in a Head Start/State funded preschool program. We look forward to serving you!

We are a private, non-profit organization funded by federal, state & local governments.



TABLE OF CONTENTS

Page 1 - 3 Program Design

- Message from the Program Director
- Our Mission
- Our Vision
- Services
- Center Location
- Equal Access/Non-Discrimination
- Open Door Policy
- Refrain from Religious Instruction
- Sexual Harassment
- Confidentiality
- Center Group Sizes

Page 4 -16 Program Philosophy, Goals and Objectives

- Philosophy Statement
- Parent Education and Engagement
- Health Services
- Nutrition Services
- Education Program
- Disability
- Mental Health

Pages 17-18 Selection & Enrollment Process

- Waiting List
- Head Start Selection Criteria
- State Admission Priorities
- Three Ways to Apply
- Family Data File
- Sign In/Out

Page 19-24 Registration Process and Eligibility

- Priorities for Admission
- Family Member Requirements
- Type of Eligibility
- Income Requirement
- Need Requirement
- Employed
- Vocational Training or Education Program
- Actively Seeking Employment
- Incapacitation
- At Risk or Child Protective Services
- Both At-Risk and CPS
- Seeking Permanent Housing
- Homelessness
- Documentation of Child's Exceptional Needs
- Duration of Service Requirement
- Exceptions
- Verifying ongoing eligibility
- Change in Service Level
- Disenrollment Policy

Page 25 - 26 Participant Qualification and Conditions

- Family Fee Policy
- Fee Assessment
- Exclusion from Fee Assessment
- Credit for Fees Paid to Other Service Provider
- Policy for Collection of Fees
- Countable/Non-Countable Income Reference Sheet

Page 27 Attendance and Absences

Page 28-34 Policies

- Standards of Conduct - All Adults
- Code of Ethical Conduct
- Child Supervision
- Understanding Active Supervision
- No Siblings
- The Adult Role in the Classroom
- Adult Immunization Requirements
- Holidays/Celebrations
- Refrain from Religious Worship
- Clothing and Items from Home
- Child Abuse
- Infant and Child Car Seat
- Active Supervision
- Classroom Zoning
- Child Count Board
- Doors and Gates
- Safe School Notice
- Children with Special Health Needs
- Pets
- Emergencies
- Diapers
- Napping
- Safe Environment
- Procedures for Walking Your Child to Head Start
- Parent and Child Rights

Page 35-42 Complaint Procedure

- Complaint Procedure
- Complaint Form
- Notice of Action
- Uniform Complaint
- Attachment A
- Resources

PROGRAM DESIGN

Dear Parent:

Welcome to the Madera Migrant/Seasonal Head Start in Collaboration with California Department of Education, State Based Migrant program. We hope that this information will help to prepare you and your child for some of the new and exciting learning experiences you will have this year. We would also like to thank you for your patience and cooperation during the registration process. The forms you completed and the information you provided helped determine your eligibility and supplied us with important information about your child. The information you provided is confidential and exclusive to authorized program staff.

Our agency provides comprehensive services to approximately 479 children and their families. A variety of program options are designed to provide the best quality child and family development services possible with the funding allowed.

We want to meet the growing needs of the children and answer questions you may have about program services. Please feel free to call me or your Center Director with any questions, ideas, or comments.

Sincerely,

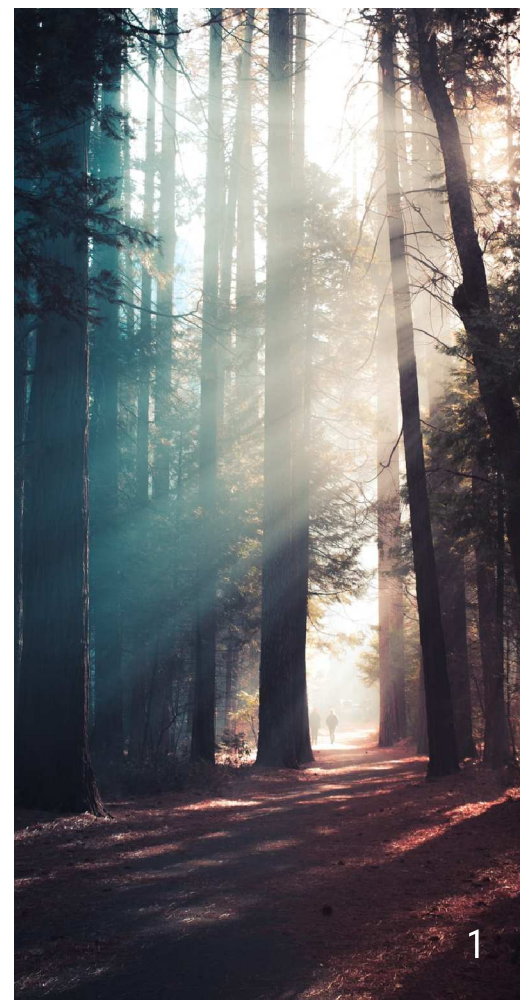
Maritza Gomez-Zaragoza
Head Start Program Director

OUR MISSION

Helping people, changing lives and making our community a better place to live by providing resources and services that inspire personal growth and independence.

OUR VISION

Community Action Partnership of Madera County will be recognized as a premier social services agency that eliminates the effects of poverty by helping people obtain the knowledge and skills to achieve self-reliance and economic stability...one life at a time.



PROGRAM DESIGN

Services

Our program provides services in centers in Madera County. Services are provided to children from 6 weeks to 5 years of age. Centers are open from 8 to 10 hours. The Madera Migrant Head Start Centers hours of operation will vary depending on the needs of families.

Center Schedule

During the peak season, the center schedule MAY change to accommodate the family's needs. In order to do so, parents will need to communicate their needs to the Center Director. Also, when work schedules change and the need to keep a center open early is no longer necessary, parents need to share the information with the Center Director. The program will work with the families to meet their needs, within the program's ability to do so.

CENTRAL OFFICE

1225 Gill Avenue
Madera, CA 93637
Phone: 559-673-0012
Fax: (559) 661-8459
www.maderacap.org

CENTER LOCATION

SIERRA VISTA

917 Olive Ave. Madera, CA 93638
559-675-8425

Center Supervisor: **Lina Bojorquez**
Contact Number: 559-675-9137
Fax Number: 559-675-3857

Family Advocate: **Maria Eugenia Castillo**
Contact Number: 559-675-8425

Family Advocate: **Geidy Mendoza**
Contact Number: 559-675-9137

Area Manager: **Evelyn Moctezuma**
Contact Number: 559-507-8036

Equal Access/Non-Discrimination

CAPMC Head Start Staff, consultants, contractors, parents and volunteers will respect and promote the unique identity of each child and family and do not stereotype on any basis, including gender, race, ethnicity, culture, religion, disability, sexual orientation, family composition, or political affiliation.

Our goal is to meet the individual needs of each child within the structure of our program while maintaining a safe and healthy environment for all children and staff.

Our program ensures all children with disabilities are protected from discrimination under and provided with all services and program modifications as required by section 504 of the Rehabilitation Act, the Americans with Disabilities Act and implementing regulations. Each child has access to and can fully participate in the full range of activities and services. Head Start will provide any necessary modifications to the environment, use multiple and varied formats for instruction, and encourage the participation of children with a disability.

Family & Child Services

Health Services:

Content Specialist: Mayra Gonzalez
Contact Number: 559-507-8031

Nutrition Services:

Content Specialist: Tammy McDougald
Contact Number: 559-507-8033

Family & Child Services:

Deputy Director Child & Family Services:
Maru Gasca Sanchez
Contact Number: 559-507-8029

Eligibility, Recruitment, Selection, Enrollment and Attendance (ERSEA)

ERSEA Content Specialist, Marissa Estrada
Contact Number: 559-507-8035

Parent & Program Governance Specialist. Maribel Aguirre

Contact Number: 559-507-8045

Disabilities & Mental Health Services:

Specialist: Julie Doll
Contact Number: 559-507-8026

Open Door Policy

We welcome parents at any time, in any area of our school. Parents are always welcome to call or drop in to see your children at any time during regular childcare hours. We encourage parent involvement, especially on special events that happen during the program.

Refrain from Religious Instruction

CAPMC Madera Migrant/Seasonal Head Start in Collaboration with California Department of Social Services Migrant Childcare and Development Program refrains from religious workshop.

Sexual Harassment

CAPMC shall maintain an educational, employment and business environment free from harassment, intimidation, or insult on the basis of an individual's sex. Action will be taken when necessary to eliminate such practices or remedy their effects. Sexual harassment, as defined and otherwise prohibited by state and federal statutes, constitutes an unlawful form of sex discrimination.

Confidentiality

Authorized representatives from the program, fiscal auditors, legal/court ordered and the California Department of Education are allowed access to the family and child files. The disclosure or release of any information that pertains to the program services is restricted to purposes that are directly related the administration and delivery our services. CAPMC-Head Start staff members do not provide information to outside sources.

Center Group Sizes

Adult to child ratios are planned for in advance and followed for each age group based on the State of California Title 5 regulations and Head Start Performance Standards; whichever is most restrictive.



Infant (Birth to 18 Months)	Toddler (18 Month to 36 Months)	Preschool (36 Months to enrollment in Kinder)
1 adult for every 2 infants Maximum of 9 children	1 adult for every 4 toddlers Maximum 9 children	1 adult for every 8 preschoolers Maximum 20 children

PROGRAM PHILOSOPHY, GOALS AND OBJECTIVES

PROGRAM PHILOSOPHY

We believe parents enrolled in the program are the program's greatest strength. Parents are involved in all aspects of the program including making policy and program decisions. Teacher and parents operate with a common purpose, to improve the lives of children and families.

In this shared partnership, parents play an important role as they join the teachers in preparing and educating the children. Because parents are their child's first teacher, they can assure that the child's unique characteristics, individual preferences and values are respected.

Teachers and parents work together to enhance the child's normal developmental process by being understanding and flexible.

We also believe:

- That the early years of child development are the most important years in the lives of all persons.
- That all children should have a nurturing environment, which promotes a successful (early childhood) experience.
- That optimal growth is accomplished by providing a curriculum designed to meet the needs of children while integrating the development of the child's physical, emotional, creative, intellectual, social and cultural skills through experiential learning activities.
- That each family's culture is unique and their cultural diversity, various social backgrounds, and religious beliefs should be appreciated, supported and respected.
- That the life and healthy development of each individual is important to society.
- That the contributions of healthy families hold the potential to affect positive change in our society.

Our goals and objectives are reflected within each of the quality program components



PROGRAM PHILOSOPHY, GOALS AND OBJECTIVES

Parent Education and Engagement

Our goal is to provide a welcoming environment for families and invite them to participate as equal partners in the education of their children.

As parents and families of our program children, there are many ways for you to become involved and stay engaged in the program, and in your children's education and future. Research shows that children whose parents are involved in their education do better in school.

As parents and family members, our program welcomes you in the classroom. The program also teaches you how to create a learning environment at home in an effort to support classroom learning.

Opportunities to participate include, but are not limited to:

- Parent/Teacher conferences and Home Visits are held each year. Conferences & Home Visits provide an opportunity for parents to collaborate with educators and develop goals for their child
- Completing Parent Surveys
- Home Activities to support your child's learning at and help us earn in-kind
- Participating or helping at family events
- Reading to children during drop-off/pick-up
- Assisting with meal preparation and/or recommendations
- Parent Meetings-learn about a variety of educational topics such as child development, parenting strategies and topics identified in the parent survey. Meetings offer a great time to network and provide input on the nature and operation of the program.
- CAPMC Policy Committee and CCMHS Policy Council meetings offer opportunities to provide input on policies and contribute to program decisions.

Other ways to participate in our program

Parent Education/Curriculum

Head Start requires that programs offers the opportunity for parents to participate in a research-based parenting curriculum that builds on parents' knowledge and offers parents the opportunity to promote parenting skills to promote children's learning and development.

Our program adopted Ready Rosie as the parent curriculum for the program.

Ready Rosie is a research-based parenting curriculum that builds on parents' knowledge. Ready Rosie harnesses the power of video and mobile technology to empower families and schools to work together to promote school readiness.

- Ready Rosie has videos in English and Spanish that are delivered to families via text, email and/or app. Videos are one to three minutes long.
- Ready Rosie also has a variety of Family Workshops that are offered to parents during the parent meetings.

Parents may participate in the Ready Rosie curriculum by registering to the platform and/or by attending the family workshops.

Family Partnership Agreements

Our program offers the opportunity for parents to participate in the partnership process that includes a family partnership agreement and the activities that support family well-being, including family safety, health, and economic stability, to support child learning and development. The family partnership agreement process provides opportunities for families to set goals and to design an individualize approach for achieving those goals. Staff will assist parents, in identifying and defining goals in measurable terms, discussing what needs to be done to achieve these goals, and how the accomplish of each goal will be determined.



Parent Education and Engagement

Family Assessments/Referrals

Our goal is for families to know where to access community health and social services to meet their unique family needs. The program will work with parents to identify family needs, support needed and strengths by utilizing the Family Assessment and surveys to provide information and/or resources to community services as needed.

A resource book is provided to family with information on programs and services available for low-income families in the community. The information includes services such as childcare, emergency services, food, shelter, health providers, health services, counseling, domestic violence, mental wellness, transportation, etc.

Referrals/resources will be offered to parents as needed and/or requested by parents. Follow up is complete as appropriate to ensure services where receive or provide support for families.

Surveys/Data Process

In order to ensure our program offers quality services to parents and children, we encourage you to complete surveys provided throughout the program year. By completing the surveys, you will be providing your input and suggestions to enhance services for children and families.

Collected survey data, child/family assessment data and environmental assessment is entered into our data based (COPA/CARE) systems which generates reports for staff to review, analyze and evaluate. Based on the results, staff make recommendation for changes, additions, or enhancement to program services.

Male/Father Engagement

The program provides opportunities for fathers to enhance their skills, knowledge and understanding of the importance of being engaged with their children. Male/Father engagement strategies include but not limited to the following:

- Respectful daily communications
- Inviting environment for fathers
- Resources and literature for fathers
- Father Activities



PROGRAM PHILOSOPHY, GOALS AND OBJECTIVES

Health Services

Our goal is for families to identify their own strengths and needs. We ensure families know where to access community health and social services to meet their unique family needs. Referrals include medical & dental care, mental health, adult education, emergency food/clothing, employment & training, housing and parenting assistance. In addition, staff follow-up with parents to ensure their needs have been met. We engage with families to help them select family goals, develop strategies to accomplish them and identify how we can provide support.

Children enrolled in the program are required to meet Immunization Requirements prior to enrollment and have a current age-appropriate well child exam (physical), as well as Tuberculin Test (TB) or risk assessment within 30 calendar days of enrollment (Per California Community Care Licensing). Children who do not have a physical or TB test within the 30calendar day timeframe will be excluded from the program.

Our program will provide you with resources; if necessary, to ensure that your child has access to health and dental insurance, connected to a medical provider, and receives a complete age-appropriate health assessment. This may include:

- All needed immunizations
- Growth and development assessment(s)
- Dental Assessment
- Dental Exam
- Vision and Hearing screening
- Nutrition evaluation

Test for anemia, lead poisoning, tuberculosis, blood pressure and other screening as needed by each individual child

****NOTE** No assessment will be completed without parent's notification and approval.**

Immunizations

All children must comply with State of California entrance requirements. Parents must submit immunization records to verify immunization data.

Dental Health

Children ages 0-2 are required to receive a dental screening as part of their series of well-baby exams.

Children ages 3-5 are required to see a dentist for a dental exam within 90 calendar days of enrollment.

Please ask us if you need help finding a dentist.

Physical Assessments/Screenings

Each child is required to have a physical examination within 30 calendar days of enrollment. This may be provided by the child's family physician or by a CHDP (Child Health Disability & Prevention Program) provider. The assessment covers the following: vision, hearing, height and weight, head circumference, hemoglobin test, lead level, review of body systems, health & developmental history, and tuberculin assessment/screening following the CHDP Periodicity Schedule.

Medical and Dental Emergencies

At time of registration, emergency contacts, health history of the child, health insurance information, and name of medical & dental provider will be obtained from parent/guardian. In case of an emergency, the following steps will take place:

Minor Incident:

- First aid will be provided on site.
- Parent/guardian will be notified of any accident.
- CAPMC Incident Report will be completed and provided when child is picked up.

Life Threatening Condition

- CALL 911
- Parent/guardian will be contacted immediately. If unavailable, emergency contacts will be contacted.
- Staff will complete the CAPMC Incident Report and CCL unusual Incident/Injury Report.



PROGRAM PHILOSOPHY, GOALS AND OBJECTIVES

Health Services

When you child is ill...

Although we expect your child to attend classes regularly, there are reasons to keep a child home from school:

- A sore throat, accompanied with other symptoms (fever, redness, swollen glands, etc.)
- A cold or cough, when symptoms are not due to an allergy or chronic condition.
- Eye Discharge and/redness
- Shortness of breath
- Chills or repeated shaking
- Muscle pain or headache
- A fever of 100.4 degrees >
- Nausea and/or vomiting
- Earache
- Runny nose or congestion
- Stomachache/ Diarrhea
- An unidentified rash
- Any infectious disease diagnosed by your family physician.
- Lice or Nits, dead or alive
- Your child is overly tired.
- Combination of symptoms

Medication Procedure

When a child must take medication at school, the proper medication forms and documentation must be submitted prior to any medication being administered to the child or accepted at the site. This includes over the counter medication AND emergency medication for such conditions as asthma, allergies, or seizures.

The following process must be followed prior to any medication being brought to the center:

- Complete Consent for Administration of Medication and/or other necessary Individualized Health Care Plans.
- Parent/Guardian and Physician's signatures must be present on all required forms and medication.
- Medication MUST be in its original container have: name of child, name of medication, dosage/route of medication, administration schedule, and possible reactions.
- Staff will be trained by parent/guardian on the proper steps of administration, any side effects and the expected outcomes from the medication.

Emergency Medication and all documentation must be submitted prior to a child's enrollment. Additional documentation may be requested. If the center is informed of a child's diagnosis and need of emergency medication AFTER enrollment, the emergency medication and all forms must be submitted to the center within 10 calendar days. Failure to provide medication and documentation will result in exclusion of your child from the program.



Daily Health Observation

A Daily Health check will be conducted on each child and upon arrival at the center and before the child is accepted. Inform centers staff of any recent illness, injuries, or concerns to insure your child is in good health to participate in the daily activities.

Keep your child home if they are ill. If it is determined that child is ill once you have left, your child will be isolated from others, and you will be contacted to pick your child up from for the day.

PROGRAM PHILOSOPHY, GOALS AND OBJECTIVES

Nutrition Services

Our goal is to ensure children have nutritious meals and snacks during their time in the program. We believe children need healthy nutritious food for optimum growth and development. The menu exposes the children to a variety of foods. Through family style meal service, children develop socialization, fine motor skills, learn personal hygiene, manners, how to serve food themselves, and learn to help with setup and cleanup of meals. Children also learn about living healthy through classroom nutrition projects, an exercise program and food experiences.

Community Action Partnership of Madera County (CAPMC) participates in the Child and Adult Care Food Program (CACFP), which helps us provide free meals to all children enrolled. The Child Care Food Program, however, does not cover the cost of meals eaten by staff or parents. If you wish to participate in a meal, you will need to follow these requirements: volunteer in the classroom at least two hours before or after the meal (please sign up with your center) and serve yourself one child size portion to ensure enough food is available for seconds for the children. If your child is on a special diet for either medical reasons or family beliefs, please let your child's teacher or advocate know. The food service program will do its best to accommodate your child's needs.

Non-Discrimination Statement

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/ad-3027.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

1. mail:

U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410; or

2. fax:

(833) 256-1665 or (202) 690-7442; or

3. Email

Program.Intake@usda.gov

This institution is an equal opportunity provider.

Meal Services

The Madera Migrant Head Start and State Based Migrant Pre-school participates in the Child and Adult Care Food Program (CACFP) offered by the U.S. Department of Agriculture (USDA) and serves meals at no charge to all enrolled children. The reimbursement received from the CACFP helps with food costs. All children in center-based settings receive food appropriate to his or her nutritional needs, developmental readiness, and feeding skills, as required by the USDA meal pattern.

Kitchens are fully equipped for producing meals and snacks for multiple sites. Full Day Program will receive breakfast, lunch and an afternoon snack. The meals offered are nutritious foods that are moderate in sugar, salt, and fat as recommended by the Dietary Guidelines for Americans. Food will not be removed from the center.

We invite you to help plan our menu by either participating by completing a food service and menu evaluation at the end of the program, sharing a family recipe with your child's teacher, or making a suggestion on the Cook's Choice/Parent Suggestions Form.

***Note: Parents, staff and community volunteers CANNOT bring food or drinks into the classroom to feed the children during school hours.**



If your child has any food allergies or cannot eat certain foods for religious or personal reasons, please notify the educator and health staff immediately. Substitutions will be based on individual needs.

Education Program

Our goal is to ensure all children are making progress in the domains of physical, cognitive, language, and social - emotional development.

Our goal is to provide a program approach that is developmentally, linguistically and culturally appropriate. A program that is inclusive of children with special needs.

Families and educators collaborate to establish school readiness goals for children along strategies for home and school. Progress on school readiness goals is discussed and plans are adjusted to meet children's developmental needs.

Physical development is supported by:

- Promoting physical activity
- Providing sufficient time to move within the indoor and outdoor spaces
- Providing equipment, materials and guidelines for active play and movement

Social/Emotional development is supported by:

- Building trust
- Planning routines and transitions so they can occur in a predictable and unhurried manner
- Help children develop emotional security and competence in social relationships

Cognitive & Language skills are supported by:

- Various strategies, including experimentation, inquiry, observation, play and exploration
- Providing opportunities for creative self-expression through activities such as art, music, movement and dialogue
- Promoting interaction and language use among children and between children and adults
- Supporting emerging literacy and numeracy development
- Supporting home language and English language development



PROGRAM PHILOSOPHY, GOALS AND OBJECTIVES

Education Program

Assessment

Program utilizes The Desired Results Developmental Profile DRDP. The DRDP© is an assessment instrument developed by the California Department of Education for young children and their families used to inform instruction and program development. This assessment is designed for teachers to observe, document, and reflect on children's learning, development, and progress; intended to support teachers with planning and scaffolding young children's learning.

Parent Conferences/Home Visits

At least 4 times a year your child's teacher will meet with you to share information and plan their work for your child and your family.

1. At parent conferences, you can ask any questions that you might have about the DRDP (2015) results, your child's progress and an individualized plan is developed.
2. Talk with your child's teacher about what to expect for your child's development.
3. Make sure that your child's teacher knows about the adaptations your child uses every day.

CAPMC-MADERA MIGRANT HEAD START Stanislaus County Office of Education (SCOE)/Central California Migrant Head Start (CCMHS)

SCHOOL READINESS PLAN GOALS AND OBJECTIVES



Education Program

Curriculum

Head Start program utilizes the Frog Street curriculum; a comprehensive, research-based program that integrates instruction across developmental domains and early learning disciplines.

Head Start Utilizes the Creative Curriculum, a comprehensive, research-based curriculum that integrates instruction across all developmental domains and engages children encouraging self-discovery and continued interest.

Preschool Schedule

Breakfast
Brush Teeth / Free Play
Clean up time
Outside Play/Activities**
Wash Hands
Indoor Activities
Circle Time (stories & music)
Wash Hands
Lunch Time
Rest & Quiet Activities
Snack
Choice time
Dismissal

****On very rainy, snowy, or cold days we will plan outside time with indoor gross motor activities. Children will wear warm clothes, including coats, hats & mittens or gloves on cold or snowy days.**

Transition Activities

The program ensures that all families and children receive optimal services during transitions. Teachers complete a Child and Family Transition Plan for all children during the first days of attendance. Effective strategies will be utilized with children and families during times of transition. Activities will ensure a smooth transition to meet the child's individual needs. This process will include parent involvement and staff support, and parents will be supported in their role as their child's primary teacher and advocate.

Inclusion of all children

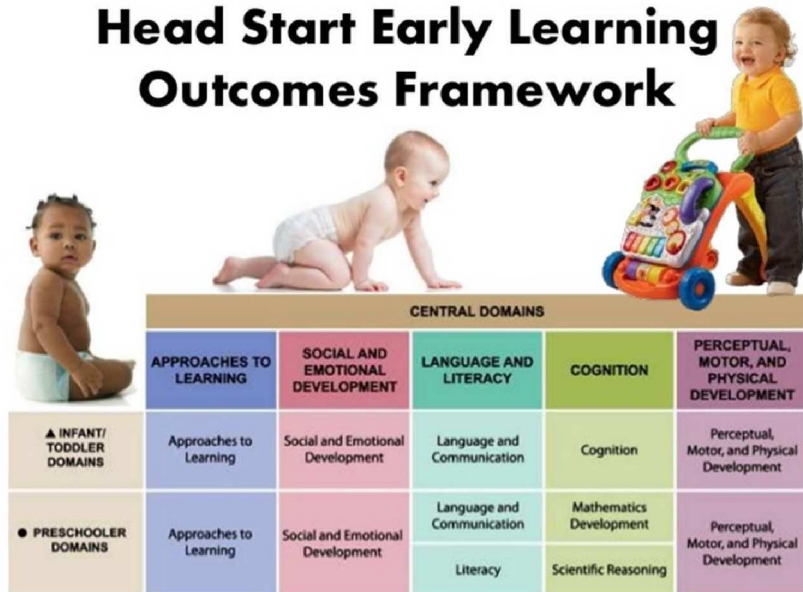
A critical aspect of best practice in early childhood education is the inclusion of all children. By incorporating the concept of Universal Design for Learning, The Creative Curriculum shows how to implement a high quality inclusive program. When teachers use this Curriculum, they support the learning of all children, including English-language learners, advanced learners, and those with disabilities and developmental delays. By providing a variety of formats for instruction, learning, and assessment, teachers offer children multiple ways of acquiring knowledge and skills.

Madera Head Start serves culturally and linguistically diverse children and families. In response, this agency implements strategies and practices that identify and support all children. For children who are dual language learners, the agency provides modifications, adaptations, and enhancements to ensure full access and effective participation in the daily learning experiences. These strategies and practices vary depending upon the type of educational setting and the particular language compositions (profiles) of the children and educators. The Plan Language Approach identifies the essential principles and strategies to be adopted by staff and supported by management in order to ensure that children enter kindergarten ready to learn.

PROGRAM PHILOSOPHY, GOALS AND OBJECTIVES

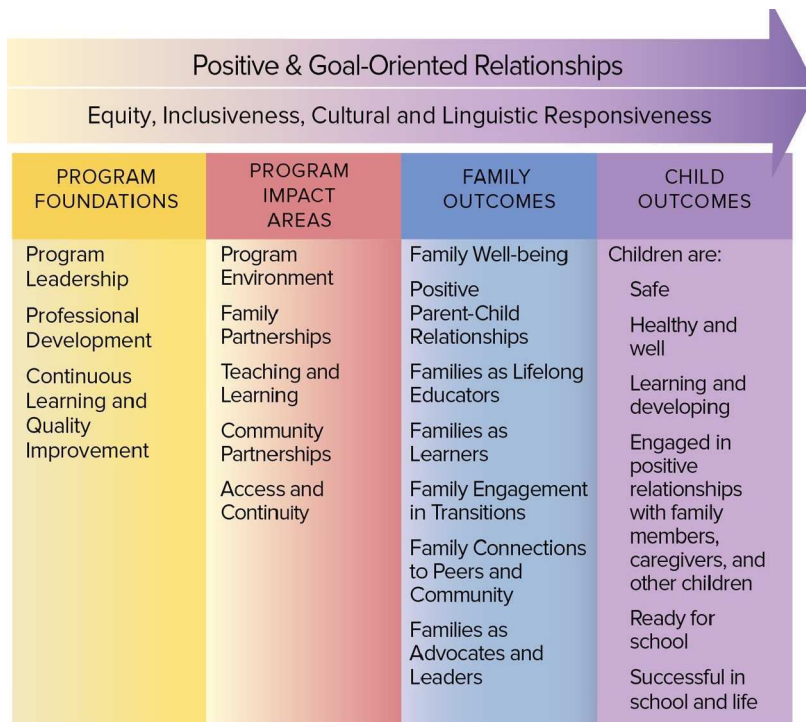
Education Program

Head Start Early Learning Outcomes Framework



The first five years of life is a time of wondrous and rapid development and learning. The Head Start Early Learning Outcomes Framework: Ages Birth to Five outlines and describes the skills, behaviors, and concepts that programs must foster in all children, including children who are dual language learners (DLLs) and children with disabilities.

PARENT, FAMILY, AND COMMUNITY ENGAGEMENT FRAMEWORK (PFCE)



Families play a critical role in helping their children be ready for school and for a lifetime of academic success. The Head Start Parent, Family, and Community Engagement Framework supports engaging families in children's ongoing learning and development.

PROGRAM PHILOSOPHY, GOALS AND OBJECTIVES

Disabilities Services

Our program maintains a nation-wide policy of open enrollment for all eligible children by encouraging “the inclusion of children with exceptional needs in an integrated setting”. Quality services for young children with exceptional needs must include several components such as a program design which addresses the unique learning style of a young child, a strong commitment to family involvement, interagency coordination and cooperation, on-going staff development and program evaluation. From identification to transition, we believe that effective intervention occurs only if a team approach is used.

Disability Service Area Objectives

1. Promote cooperation, coordination and collaboration between our program and the School Districts, Regional Centers, Children's Hospitals and other medical professionals.
2. To provide the least restrictive environment to children with exceptional needs by modifying the environment.
3. To work with Head Start children with disabilities based on their written individualized IFSP or IEP goals.
4. To encourage parents to be strong advocates for the rights of their children with exceptional needs.
5. To provide children with exceptional needs the same Head Start comprehensive services offered to children without special needs.

Developmental screening (Ages Stages Questionnaires 3 and Ages Stages Questionnaire Social Emotional 2) are completed every year for all children enrolled in the program. The screening includes the following areas: speech/language, gross & fine motor, personal social and cognitive. The developmental screening will give staff information about potential areas of concern and assist teachers in individualizing the curriculum.

Children under the age of 3 years old that have an IFSP and children older than 3 years old with an IEP for speech delays may receive services during program hours. Please assist us with your child's development by keeping us up updated with any changes pertaining to these documents.

All enrolled children have access to our mental health (behavior management) consultant services. All parents/guardians have regular opportunities to engage with the mental health consultant to discuss concerns about their child's behavior and receive immediate feedback.



PROGRAM PHILOSOPHY, GOALS AND OBJECTIVES

Mental Health Services

Goals and Objective of the Mental Health Program

Children grow and develop rapidly during the preschool years. Our program is concerned with the total development of each child. The Mental Health portion of the program focuses on the promotion of positive self-worth, respect for individual differences, and the ability to develop appropriate social skills. Accomplishments in these areas will affect a child's ability to play, love, learn and work at home, school, and in other environments.

Our program seeks to help children become socially competent by implementing these Head Start Performance Standard objectives by utilizing the Ages & Stages Social Emotional screening & Conscious Discipline to:

- Enhance parent and staff's understanding of child growth and development.
- Support mental health activities by staff and parents which are matched to children's needs and abilities.
- Assist children with emotional, cognitive and social development.
- Provide services to maximize the full potential of children with disabilities or special needs.
- Ensure prevention and early identification of problems that may interfere with a child's development.
- Serve as a link for staff and parents in obtaining and/or providing counseling and other resources.
- To meet the Mental Health Objectives, our program has three areas of involvement; Prevention, Identification/Referral and Treatment.

Prevention Goals

- Enhance positive self-concept
- Building positive relationships between children, their peers and their teachers
- Develop coping skills to solve problems and manage stress

Identification and Referral

Early detection of problems is the focus of this area. Services to children and families include:

- Identification of possible problems through observation, screening and assessment
- Referral of children to a mental health professional when necessary with authorization from parent/guardian.

Treatment

Treatment can be recommended as part of the assessment so that a child and family can benefit from these services. A Positive Behavior Support plan will be developed with input from the family and teachers. This plan will include strategies provided by the Mental Health Consultant. Teaching staff will implement the Positive Behavior Support plan, individualize the curriculum based on amended goals and objectives and document progress in the child's file. The Disability Mental Health Specialist will monitor the child's progress.

Helping Children Make Good Choices

Our program uses a positive approach to discipline. Young children can be helped to make good choices and be redirected in a firm, loving manner. Children make good choices when:

- Their needs are being met.
- They have a consistent daily schedule, know what will happen next, have expectations with pictures to support understanding, and in a safe supervised environment.
- They have materials and equipment that are age appropriate and stimulating.
- Teachers utilize relationship-based practices.
- Staff will not utilize any inappropriate discipline methods, including:

*Time outs (Performance Standards 1304.52(h) (iii-iv))

*Using food as a punishment or reward (Performance Standards 1304.23(c)(2))

*Use of corporal punishment (State Licensing Sec. 101223)

Social Emotional Curriculum

The development of social skills is crucial to the success of children in public school. Our programs are implementing Conscious Discipline and the Social Emotional Teaching Pyramid strategies to teach our children social emotional skills that will promote school readiness. The Social Emotional Teaching Pyramid focuses on promoting the social emotional development and school readiness of young children birth to age 5 years old. Teaching Pyramid is a resource center that provides resources to teachers and parents. Visit the website at: <https://cainclusion.org/teachingpyramid/> Conscious Discipline is a research-based discipline approach that can organize classrooms around the concept of a School Family. Each member of the family-both adult and child-learns the skills needed to successfully manage life tasks such as learning, self-regulating, forming relationships, communicating effectively, being sensitive to others' needs and getting along with others. Visit the website at <https://consciousdiscipline.com>

PROGRAM PHILOSOPHY, GOALS AND OBJECTIVES

Mental Health Services

Our program prohibits or severely limits the use of suspension and expulsion. Children will not be unenrolled or expelled based solely on their behavior. Temporary suspensions for behavior will only be used as a last resort in unusual situations where there is a serious threat that doesn't improve through reasonable modifications.

If a temporary suspension is deemed necessary, the program will help the child return to full participation in all program activities as quickly as possible while ensuring child safety by continuing to work with the parents and a mental health consultant, and continuing to utilize appropriate community resources.

Our program affirms that all children are entitled to a safe environment. In cases where a child continues to use inappropriate behavior, even after staff has provided redirection, the following will take place:

Step 1: Parent will be notified by the teacher of all incidents involving their child in relation to aggressive behavior. Aggressive behavior is defined as deliberate, repeated and uncontrolled attacks on others physically or verbally. The child's parent will be encouraged to use positive methods of child guidance. Staff will develop a plan/strategy and encourage parent's support at home. The parent-teacher contact will be recorded.

Step 2: If a child continues to physically hurt others or display destructive behaviors, the teacher will submit a Child Concern Form and then schedule a Child Success Team meeting once the Disabilities/Mental Health Specialist has indicated what steps to take next. This meeting with the parent is to formally discuss behavioral concerns, discuss referral options, and if warranted, have parent sign the Concern Form, and together will identify other social emotional strategies that can be used both at school and at home.

If the child has an Individualized Family Service Plan (IFSP) or Individualized Education Program (IEP), the program will consult with the agency responsible for the IFSP or IEP to ensure that the child receives support services as needed. This may require additional special education assessments.

Step 3: It may be determined that a Mental Health Consultant will conduct an observation on the child with parental permission. Further referrals to an appropriate agency and/or outside consultant may be made. During a scheduled meeting between parent(s) and teaching staff, a positive Behavior Support Plan will be developed for children with extreme behavior challenges, to be used by all adults that support the child (home/classroom). At this level it is crucial that parents/guardians participate to address safety concerns.

Step 4: Other Child Success Team meetings may take place as needed to identify progress or lack thereof. Other strategies may be offered to try in the classroom and at home.

Step 5: If the behavior continues and none of the actions previously taken have improved, an interdisciplinary meeting will be scheduled to determine if the program can adequately meet the needs of the child. A schedule modification may take place and as a last resort a determination of the continuation of our program services will be made by the Multi-disciplinary team and Program Director based on the following factors:

- *The child is of danger to him/herself or to others;
- *Lack of parent participation in the implementation of the Positive Behavior Support Plan.
- *There is sufficient documentation to reflect the implementation of behavior policy and that every attempt has been made to modify the behavior problem.

If it is determined that the child's continued enrollment presents a serious safety threat, the program may determine it is not the most appropriate placement for the child. The program will work to support the transition of the child to a more appropriate placement.

If CAPMC deems it necessary to suspend or expel a child, the parent or guardian has the right to file an appeal of the action directly with the following departments no later than 14 calendar days after the receipt of notice to:

California Department of Social Services
Child Care and Development Division
Att: Appeals Coordinator
744 P Street, MS 9-8-351
Sacramento, CA 95814
Phone 1(833) 559-2417
Fax: (916) 654-1048
Email: CCDDAppeals@dss.ca.gov

SELECTION & ENROLLMENT PROCESS

Waiting List

The program has limited openings for eligible families. The first step to access center-based program services is to be placed on our waiting list. Families must qualify for both Head Start and State Programs to be eligible for enrollment. Children with disabilities are encouraged to apply.

Head Start Selection Criteria

A family wishing to enroll their children in the Migrant/Seasonal Head Start Program must meet all four of the following requirements:

1. Age: Children must be under the age of compulsory school attendance.
2. Migrant Status: The family must have moved during the past twenty four months for the purpose of engaging in agricultural employment.
3. Source of Income: More than 50% of the earned family income during the previous 12 months was earned from seasonal agricultural work.
4. Income Level: The gross family income during the past 12 months or calendar year is at or below the Federal Poverty Income Guidelines.

Agricultural work means, for the purpose of eligibility, all service performed:

- on a farm or ranch, in the employment of any person, in connection with cultivating the soil, or in connection with the production or processing of any agricultural or horticultural commodity, including the raising, shearing, feeding, caring for, training, and management of livestock, bees, poultry, and fur-bearing animals and wildlife;
- in the employment of the operator of a farm or ranch, in connection with the operation, management, conservation, improvement, or maintenance of such farm and its tools and equipment including irrigation, or in salvaging timber (forestry) or clearing land of brush and other debris left by a hurricane or similar environment event.
- in the employment of the operator of a farm or ranch in handling, planting, drying, packing, packaging, processing, freezing, canning, grading, storing, or delivering to storage or to market or to a carrier for transportation to market, in its unmanufactured, or unprocessed state, any agricultural or horticultural commodity.

The definition of agricultural work shall be deemed to be applicable with respect to service performed in connection with any agricultural, horticultural, viticulture, or apiculture commodity or steps thereof prior to its delivery to a terminal market for distribution for consumption; or on a farm or ranch operated for profit as long as such service is in the course of the employer's trade or business or is domestic service in a private home of the employer. As used in this subsection, the term "farm" includes stock, the raising, feeding and management of livestock, dairy, poultry, fishing, mollusks, and insects, including but not limited to herding, housing, hatching, milking, shearing, handling eggs, and extracting honey; fruit, fur-bearing animal, and truck farms, plantations, ranches, nurseries, wineries, ranges, greenhouses or other similar structures used primarily for the raising of agricultural or horticultural commodities, and orchards.

State Admission Priorities

When an opening is available, we access the waiting list and contact families based on the following program admission priorities:

- First: Child protective services, or at-risk of abuse, neglect or exploitation
- Second: Admission priority based on adjusted gross monthly income & family size.

When multiple families are within the same ranking.

1. Child with Exceptional needs within same ranking is admitted first.
2. If number 1 is not applicable, then the child who is Dual Language within the same ranking should be admitted first.
3. If number 1 nor 2 are applicable, then the child with the oldest application date is admitted first.



SELECTION & ENROLLMENT PROCESS

Ways to Apply

Step 1: Contact us

Call: (559) 675-8425 or 559-675-9137

Step 2: Complete Application Packet and submit documentation

Complete forms, gather documents listed on the checklist.

Once you gather documents, schedule an appointment with the Advocate by calling her at the site of preference

Within 2 weeks of being contacted by the program, the parent must make contact with the program to schedule an appointment to begin an application to apply for this enrollment period.

The Advocate will review the packet and contact you to complete your Head Start application. You will now be on the eligibility list.

Step 3: Verify Eligibility

Attend in person appointment at the preferred center location. Please note that you will be turned away and reschedule if your packet/information is not complete at the time of your appointment.

When an opening occurs: The advocate will contact you to collect any updated eligibility documentation and have you sign your State application.

Family Data File

A family data file is maintained for each family receiving services. When a child's residence alternates between the homes of separated or divorced parents, eligibility must be determined separately for each household in which the child is residing during the time services are needed.

Sign In/Out

It is a Head Start and Licensing requirement that children **MUST** be sign in and out every day by an authorized adult. The following process must take place daily:

- An authorized adult must sign their full legal signature and document the time the child is dropped off.
- The authorized adult dropping off the child **MUST** be listed on the emergency card.
- When child is picked up, authorized adult must again sign their full legal signature and document time child is being picked up.
- The authorized adult must provide a contact/emergency number if different from number on emergency card.
- When another person is picking up a child, the person's name **MUST** appear on the emergency card. The individual being assigned to pick up a child must provide valid picture identification. If the person is not on the emergency card or is unable to provide identification, the child will not be release until the parent, guardian or designee comes to pick up the child.

If the authorized adult fails to sign-in the child and an emergency happens, Child Protective Services will be notified. They will make the decision for the child as to how to proceed with the emergency and therefore, the program is not authorized to assist the child.

Anyone authorized to drop off or pick up a child from the center, other than the parent, must be at least 18 year old. Teaching staff reserves the right to request identification to verify the age of the individual.

In addition, our programs have established a safeguard to the children enrolled in the program. If anyone who comes to pick up a child seems to be under the influence of drugs or alcohol, the child will not be release to that individual/parent. In addition, He our staff will contact law enforcement.

REGISTRATION PROCESS AND ELIGIBILITY

To be eligible to receive subsidized childcare and development services, families must meet the income eligibility and need requirements as specified in the Funding Terms and Conditions and Head Start Performance Standards. The child must also meet the age criteria for which the center is licensed. The Funding Terms and Conditions and Head Start Performance Standards are available for review at each center.

Priorities for Admission

If there are no vacancies in the program, families will be placed on a waiting list. As vacancies occur families will be contacted by income ranking order according to the following priorities:

Head Start

First priority must be given to children that have been identified at risk of abuse, neglect, or exploitation or who are receiving child protective services in accordance with the California Code of Regulations, Title 5, Section 18092.

Second priority must be given to children from families that meet Head Start income guidelines, in income ranking order based on the most recent income ranking schedule adopted by the State Superintendent of Public Instruction.

Third priority must be given to children from eligible families that meet applicable Head Start priorities as stipulated in the Eligibility, Recruitment, Selection, Enrollment, and Attendance requirements (45 C.F.R. Part 1305).

Children of migrant agricultural worker families shall be enrolled in Migrant Child Care and Development Program on the basis of the following priorities:

STATE

- **First: Current Move** (moved within 12 months preceding) Within each income ranking prioritize as follows:
 1. Exceptional needs or severely disabled
 2. Dual Language Learners
 3. Entry with oldest application date
- **Second: Former Move** (qualified under 1st priority in past 5 years & is currently dependent on agricultural work) Within each income ranking prioritized as follows:
 1. Exceptional needs or severely disabled
 2. Dual Language Learners
 3. Entry with oldest application date
- **Third: No Move:** (Family resides in rural agricultural area) Within each income ranking priorities as follows:
 1. Exceptional needs or severely disabled
 2. Dual Language Learners
 3. Entry with oldest application date

Family Member Requirement

Verification of the parents and the names, gender, and birthdates of the children identified in the family size that link the child to the parent/guardian. Documentation may include:

- Birth certificates
- Court orders regarding child custody
- Adoption documents
- Records of Foster Care placements
- School or medical records
- County welfare department records

Types of Eligibility

- A current aid recipient
- Income eligible
- Experiencing homeless
- One whose child(ren) are recipients of protective services, or whose child(ren) have been identified as being abused, neglected, or exploited, or at risk of being abused, neglected, or exploited.

REGISTRATION PROCESS AND ELIGIBILITY

Income Requirement

Income will be calculated based on the previous 12 months – the 12 months will be based on when the enrollment application is taken. Family must have earned at least fifty percent of its total gross income from employment in fishing, agriculture, or agriculturally related work. Verification of all gross income earned from the past 12 months for each adult counted in the family size is required. Income documentation may include:

- Employee wage stubs
- Cash Aid and other benefits (statement or Passport to Services of Cash Aid and other benefits received, itemized by the months)
- Public Cash Assistance
- Child support received and/or paid out
- Disability or Unemployment Compensation
- Gross Income from Self-Employment (minus business expenses, except wage draws)
- Workers Compensation
- Spousal Support
- Survivor Benefits
- Retirement Benefits
- Dividends, interest on bonds, income from estates or trust, net rental income or royalties
- Rent for Room within the Family's Residence

- CalWORKs/Medi-Cal
- CalFresh/California Food Assistance Program
- California Special Supplemental Nutrition
- Program for Women, Infants, and Children (WIC)
- Financial Aid received for the care of a child living with an adult who is not the child's biological or adoptive parent
- Veteran's Pension
- Pensions or Annuities
- Inheritance
- Allowances for Housing
- Portion of Student Grants/Scholarships not identified for educational purposes as tuition, books or supplies
- Social security pay document
- Other Enterprise For Gain
- Unemployment award letter/stubs
- Employee payroll summary from your employer
- For self-employed parents-copies of your tax returns, receipt for services, documentation of deductions etc.

To calculate a family's adjusted monthly income for purposes of determining income eligibility and/or calculation a family fee:

- a. Weekly for 52 pay periods;
- b. Every two weeks for 26 pay periods;
- c. Twice monthly for 24 pay periods; or
- d. Monthly for 12 pay periods.

When a family experiences income fluctuation, the adjusted monthly income shall be determined by averaging the total countable income from at least two months, as applicable based on the income provided, to determine average adjusted monthly income for purposes of determining income eligibility or calculating a family fee. A family may choose to provide up to the 12 preceding months of income if the additional time of income provided contributes to an affirmative eligibility determination and or reduced applicable family fee.

Note: If the family is receiving services because the child is at risk of abuse, neglect, or exploitation or receiving child protective services and the written referral specifies that it is necessary to exempt the family from paying a fee, then the parent will not be required to provide documentation of income.

We will not collect your packet application without the complete income documentation.

REGISTRATION PROCESS AND ELIGIBILITY

Need Requirement

In addition to meeting the income requirement, every adult counted in the family size must have a need for services. A family has a need for services when they meet one of the following criteria: Employed, actively seeking employment, participating in a vocational training or education program to attain High School diploma or High School equivalency certificate, engaged in an English language learners' course, be incapacitated, seeking permanent housing or experiencing homelessness, be at-risk of abuse, neglect or exploitation, or have an active child protective service case.

Need documentation requirements are as follows:

Employed

Parents/Guardians who are employed must submit an Employment Verification form completed and signed by the employer, payroll clerk, or authorized representative.

If self-employed, a Self-Employment Verification form must be completed. The nature of the work must preclude the supervision of your children.

Parents/Guardians who are employed by a temporary agency, who are "on-call," do pick-up work or whose work schedule is not predictable must submit records regarding the time worked in the preceding 4 weeks. If the parent's/guardian's employment is in the family's home or on property that includes the family's home, the parent must provide justification for requesting subsidized childcare and development services based on the type of work being done and its requirements, the age of the family's child for whom services are sought.

If the parent/guardian is a licensed family day care home provider, he/she is not eligible for subsidized services during the parent's/guardian's business hours because the employment does not preclude the supervision of the family's child.

Travel time to and from the location at which services are provided and the place of employment cannot exceed half of the daily hours authorized for employment to a maximum of four hours per day. If the parent/guardian is employed anytime between 10:00 p.m. and 6:00 a.m., sleep time cannot exceed the number of hours authorized for employment and travel between those hours.



REGISTRATION PROCESS AND ELIGIBILITY

Vocational Training or Education Program

Parents/Guardians in a vocational training program leading directly to a recognized trade, paraprofessional, or profession, shall be limited to six years of enrollment from the initiation of services, or 24 semester units after attaining a Bachelor of Arts Degree, whichever expires first.

1. Parents/Guardians must have on file a Training Verification form from the sponsoring agent/school regarding the type of training and the number of hours per week during which the training takes place. Training verifications will only be accepted if they contain the following:
 - a. The parent's/guardian's vocational goal and anticipated completion dates of all training to meet the vocational goal are clearly stated
 - b. The beginning and ending dates of the current semester/term are clearly stated the training schedule, including the course titles, times and days of classes, is filled out completely and properly
 - c. Signature of the parent/guardian, and the signature and stamp of the school seal by the agency/school registrar/program director
2. If the training institution will not complete the training verification, then the following documentation is required:
 - a. Parent/Guardian completes and signs the Training Verification as outlined in Section 1, leaving the "signature and stamp of registrar of school organization"
 - b. Attach an electronic class schedule printout with the current class schedule, with course titles, days and times of each class or
 - c. Attach an official letter signed and stamped from the training organization that states name of school, date training will begin/end and anticipated completion date for training/education
3. Report cards, transcripts or other records must be provided to document adequate progress. Documentation will be reviewed and monitored for ongoing eligibility for services based on vocational training programs at re-certification. Parent/guardian must earn 2.0 GPA or in a non-graded program, pass the program's requirements in at least 50 percent of the classes. The first time the parent/guardian does not make adequate progress the parent/guardian may be recertified and may continue to receive ongoing services. If adequate progress is not made at the conclusion of this eligibility period, services for this purpose shall be discontinued.
 - a. Online or televised instructional classes that are unit bearing classes from an accredited training institution shall be counted as class time at one hour per week for each unit. The parent/guardian must provide a copy of the syllabus or other class documentation and the Web address of the online program. The accrediting body of the training institution shall be those recognized by the United States Department of Education
 - b. Travel time to and from the location at which services are provided and the training location cannot exceed half of the weekly hours authorized for training to a maximum of four hours per day
 - c. Study time may be granted for two hours per week per academic unit in which the parent/guardian is enrolled

Engaged in English Language Learners Courses or Attain High School Diploma or High School Equivalency Certificate

Parents engaged in an educational program for English Language Learners (ELL) or a program to attain a high school diploma or general educational development (GED) certificate (which is now referred to in law as a High School Equivalency (HSE) certificate) must have an Educational Program Verification form on file for the agency/school attending including the type of training and days/hours during which the training takes place. Educational Program Verification will only be accepted if they contain the following:

1. The beginning and ending dates of the current semester/term are clearly stated
2. An electronic class schedule printout or a written training schedule that includes the course titles, times and days of classes
3. Signature of the parent/guardian and the signature or stamp of the school seal by the agency/school registrar/program
4. Director will be required if an electronic class schedule is not available.

Actively Seeking Employment

Parents/Guardians must submit a Request to Actively Seek Employment form. Actively seeking employment is limited to no more than five days per week and for less than 30 hours per week.

REGISTRATION PROCESS AND ELIGIBILITY

Incapacitation

- An adult counted in the family size may be incapacitated. Verification by a legally qualified professional must be provided on a Statement of Incapacity form (CD-9606). The form must be completed and submitted before subsidized child care services may begin. Child care and development services shall not exceed 50 hours per week.

At-Risk or Child Protective Services Families

- Children at-risk of abuse, neglect, or exploitation, and referred from a child welfare service worker or a legally qualified professional in a legal, medical, social services agency, or an emergency shelter may receive child care and development services. The written referral must be dated within six (6) months of the date of application for services.
- Children receiving child protective services (CPS) through the county welfare department may receive child care and development services if referred by a county child welfare service worker. The referral must stipulate that child care and development services are a necessary component of the child protective services plan. The referral must be dated within six (6) months of the date of application for services.

Both At-Risk and CPS written referrals for families/children must contain each of the following items:

1. The name and birth date of each child being referred for service
2. The frequency of needed child care services (number of days per week and number of hours per day child care is needed for each child)
3. The referral must be written on the referring agency's letterhead
4. The probable duration of the child protective service plan or the at-risk situation, and the need for child care and development services
5. The name, business address, telephone number, license number and signature of the "legally qualified professional" who is making the referral
6. For CPS- A referral letter by a county child welfare service worker from the local county welfare department certifying that the child is receiving child protective services, and child care and development services are a necessary component of the child protective services case plan
7. For At-Risk- A referral letter by a legally qualified professional from a legal, medical, or social service agency, or an emergency shelter certifying that the family is at-risk of abuse, neglect, or exploitation and child care and development services are needed to reduce or eliminate that risk

Seeking Permanent Housing

Child care and development services are limited to no more than 5 days per week and for less than 30 hours per week. Parent/Guardian must submit a Request to Seek Permanent Housing form. If the family is residing in a shelter, services may also be provided while the parent/guardian attends appointments or activities necessary to comply with shelter participation requirements.

Homelessness

The family must submit a written referral from an emergency shelter or other legal, medical or social services agency.

Documentation of Child's Exceptional Needs

For children with exceptional needs, the basic data file will contain the following:

1. Active Individualized Family Service Plan (IFSP) or Individualized Education Plan (IEP) developed by IEP Team.
2. Include information as specified in Education Code Section 56026 and Title 5 California Code of Regulations, Section 3030 and 3031.

Duration of Service Requirement

Once the family has met the eligibility and need requirements, the family is eligible for childcare and development services for not less than twenty-four (24) months.

Exceptions:

- Families who are certified as income eligible & during their certification period, their income exceeds 85% of the state median income as notified at the time of certification and recertification.
- Families who do not follow agency policy (Attendance policy, delinquent fees, etc.....)

REGISTRATION PROCESS AND ELIGIBILITY

Verifying Ongoing Eligibility

Recertification of eligibility is required at least one each fiscal year not to exceed a year and a day of certified services. Families will be required to provide documentation to support ongoing eligibility and need for services and will be notified in advance of the recertification date.

Change in Service Level

Parents may voluntarily report changes by submitting a Request to Change Services Form. The form must contain the requested change with the days and hours per day requested of care, effective date of the proposed change, acknowledgment that the parent understands that they may retain their current service level and support documentation. Changes can only be approved if funding is available. Notice to approve and/or deny changes will be issued not later than ten (10) business days after receipt of applicable. Changes in service level include:

- Increase days and/or hours of care
- Change in Income over 85%
- Vacation of parent or child

Please notify staff within five (5) calendar days of your address or telephone number changing to ensure we always have accurate contact information.

Family Disenrollment

When a family chooses to disenroll from the program, it is required that they notify the program in writing at least two (2) weeks in advance of the last day of attendance.

The program may deny services or disenroll a family for any of the following reasons, which include, but are not limited to:

- a. Non-compliance of the program policies
- b. Knowingly misrepresenting eligibility, using incorrect or inaccurate information to obtain a benefit that the parent would otherwise not be entitled to receive. This includes the following:
 - *Knowingly, and with intent, makes a false statement or representation to obtain benefits, obtain a continuance or an increase in benefits, or to avoid a reduction of benefits.
 - *Knowingly, and with intent, fails to disclose a fact which, if disclosed, could result in denial, reduction, or discontinuance of benefits
 - *Knowingly accepts benefits that the individual is not entitled to or are greater than what the individual is entitled.
- c. Abandonment of Care starts after 7 consecutive days of no contact from families Abandoned childcare for seven (7) consecutive days without notice. The - program does not allow families to be enrolled in the program if they are not using child care unless a gap in service has previously been approved. CAPMC shall issue a notice of action to disenroll the family on the basis of abandonment of care when there has been no communication with the program for a total of 30 consecutive calendar days.
- d. Failure to adhere to Child Attendance Plan
- e. Failure to provide current and correct information at the time of certification or recertification
- f. Failure to use certified care as agreed upon between the parent and the program
- g. Delinquency in the payment of family fees
- h. Family income exceeds the maximum income guidelines
 - i. Failure to keep appointments
 - j. Unavailability of program funds
- k. Violation of the Safe School policy. Our office and child care facilities are alcohol, drug and weapon free zones

In accordance with CDSS, CCD, Child Care and Development Division guidelines, families will be mailed a Notice of Action at least nineteen (19) days prior to disenrollment from the program.

Those families who are disenrolled for not following the programs policies shall be placed on a one (1) year penalty period during which the family shall not be eligible for services. The penalty period shall start from the termination effective date included in the Notice of Action. This penalty does not apply to families who have discontinued services by their own request.

PARTICIPANT QUALIFICATION & CONDITIONS

Family Fee Policy

Enrollment in this collaboration program requires parents to follow both Head Start and State requirements. Head Start does not require parents to pay a fee; however, California Department of Social Services, Child Care and Development (CDSS, CCD) may. When a family's income falls above a certain range and is enrolled in a program requiring a need, the family will be required to pay a family fee. Family fees are charged and collected in accordance with CDSS, CCD regulations. A family fee is based on the level of adjusted gross monthly family income and family size.

Fee Assessment

A family whose income falls within a certain range will be required to pay a family fee. Family fees are charged and collected in accordance with California Department of Social Services, Child Care and Development (CDSS, CCD) regulations. A family fee is based on the level of adjusted gross monthly family income and family size. The family fee is assessed per family, not per individual child.

The fee is based on the child using the most hours of care per month. A part-time fee is assessed per month if childcare is less than 130 hours per month. A full-time fee is assessed per month if childcare is 130 hours or more per month.

Fees will be assessed for families with unpredictable or variable income based upon the average income of the verified income source(s) from at least two (2) months or if the family chooses, up to 12 preceding months of income.

In the event that a family no longer has a fee or is terminated from the program resulting in a family fee credit, a refund will be issued within ninety (90) calendar days.

Exclusions from Fee Assessment

No fees shall be collected from families with an income level that, in relation to family size, is less than the first entry in the fee schedule or if any individual counted in the family size is currently receiving CalWORKS cash aid. Families receiving services because the child is at risk of abuse, neglect or exploitation, may be exempt from paying fees for up to twelve (12) months if the referral specifies that it is necessary to waive the family fee. Families receiving services because the child is receiving protective services may be exempt from paying fees for up to twelve (12) months if the referral specifies that it is necessary to waive the family from paying a fee.

Credit for Fees Paid to Other Service Providers

When the childcare and development program cannot meet all of a family's needs for childcare for which eligibility and need have been established, and services are being provided by another service provider, a fee credit equal to the amount paid to the other provider may be granted not to exceed the fee amount due for the same month. A receipt of payment or canceled check to the other service provider must be submitted on a monthly basis. The parent/guardian must pay any difference. The credit will be applied to the family's subsequent fee billing period. The family may not carry over a fee credit beyond the subsequent fee billing period.

Policy for Collection of Fees

Family fees are accrued monthly and are to be paid in advance of service. They are due on the last business day of each month, prior to service. Fees will be considered delinquent if not paid prior to the seventh day of services in any payment period. Payments are payable in the form of check or money order (Cash will not be accepted).

Upon determination of delinquent fees, the family will be mailed a written Notice of Delinquent Fees to discontinue services. It will state the amount of unpaid fees, the monthly fee, and the period of delinquency.

- **First Delinquent Fee:** If delinquent fees are paid by the effective date of the Notice of Action, the notice to disenroll will be rescinded. If the fees are unpaid, services will be discontinued.
- **Second Delinquent Fee:** If fees are delinquent a second time, the parent will be required to attend a meeting with their ERSEA Specialist to review the family fee policy and must pay delinquent fees by the effective date for the termination to be rescinded. If the fees remain unpaid and parent does not attend a meeting, services will be discontinued as of the effective date of the Notice of Action.

PARTICIPANT QUALIFICATION & CONDITIONS

- **Third Delinquent Fee:** If fees are delinquent a third time, the termination will stand. If the parent/guardian disagrees with the agencies action, they may appeal the notice to disenroll.

For information on how to submit a request for an appeal hearing, see “Notice of Action Complaints - Fair Hearing/Appeal” within this handbook.

The family shall be ineligible for childcare and development services until all delinquent fees are paid. A reasonable request for a payment plan from the parent/guardian for payment of delinquent fees may be accepted but may be limited to three (3) months.

Families on a payment plan must stay current with their current month’s fees and make additional payments for past due amounts as agreed upon in the payment plan.

To promote the continuity of childcare and development services, a family that no longer meets a particular program’s income, eligibility or need criteria may have their services continued if the contractor is able to transfer that family’s enrollment to another program for which the family continues to be eligible prior to the date of disenrollment of services. The transfer of enrollment may be to another program within the same contracting agency or to another agency that administers state or federally funded childcare and development programs.

Note: If a family does not receive a bill, they are still responsible to pay their family fee on time.

COUNTABLE/NON-COUNTABLE INCOME REFERENCE SHEET

Countable Income is income of individuals counted in the family size that shall be included when calculating the adjusted monthly income for purposes of determining income eligibility and family fees.	Non-Countable Income is income of individuals counted in the family size that shall be excluded when calculating the adjusted monthly income for purposes of determining income eligibility and family fees.
<ol style="list-style-type: none"> 1. Gross wage or salary, commissions, overtime, tips, bonuses, gambling or lottery winnings 2. Wages for migrant, agricultural, or seasonal work 3. CalWORKs cash aid 4. Gross income from self-employment less business expenses with the exception of wage draws 5. Disability or unemployment compensation 6. Worker’s compensation 7. Spousal support, child support from the former spouse or absent parent, or financial assistance for housing costs or car payments paid as part of or in addition to spousal or child support 8. Survivor (i.e., SSA) and retirement benefits 9. Dividends, interest on bonds, income from estates or trusts, net rental income or royalties 10. Rent for room within the family’s residence 11. Financial assistance received for the care of a child living with an adult who is not the child’s biological or adoptive parent 12. Veteran’s pension 13. Pension or annuities 14. Inheritance 15. Allowances for housing or automobiles provided as part of compensation 16. Insurance or court settlements for lost wages or punitive damages 17. Net proceeds from the sale of real property, stocks or inherited property 18. Other enterprise for gain 	<ol style="list-style-type: none"> 1. Earnings of child under eighteen (18) years 2. Loans 3. Grants or scholarships to students for educational purposes 4. Federal Supplemental Assistance Program (CalFRESH/SNAP) or Women, Infants and Children (WIC) benefits or other food assistance 5. Earned Income Tax Credit or tax refund 6. Foster care grants, payment or clothing allowances for children placed through child welfare services 7. Relative Caregiver Funding Program 8. California Guaranteed Income Pilot Program 9. GI Bill entitlements, hardship or hazardous duty, hostile fire or immediate danger pay 10. Adoption assistance payments 11. Non-cash assistance or gifts 12. All income of any individual counted in the family size who is collecting federal Supplemental Security Income (SSI) or State Supplemental Program (SSP) benefits 13. Insurance or court settlements including pain and suffering and excluding lost wages and punitive damages 14. Reimbursements for work-required expenses that include uniforms, mileage, or per diem expenses for food and lodging 15. Business expenses for self-employed family members 16. When there is no cash value to the employee, the portion of medical and/or dental insurance documented as paid by the employer and included in gross pay 17. Disaster relief grants or payments, except any portion for rental assistance or unemployment 18. AmeriCorps Volunteers In Service to America (VISTA) and Federal Emergency Management Agency (FEMA) stipends, room and board, and grants

Note: Verified child support payments paid by the parent whose child is receiving child development service may be subtracted from family’s countable income

ELIGIBILITY, RECRUITMENT, SELECTION, ENROLLMENT, ATTENDANCE (ERSEA)

ATTENDANCE AND ABSENCES


Your child's regular attendance is very important not only to assure a continuous educational program but also to assure the program meets the attendance percentage required by the grantee. We encourage parents to bring their children daily and maintain regular attendance unless the child is ill.

- If your child is ill or any other emergency occurs, contact your child's teacher within one hour of the program's start time.
- After TWO (2) consecutive absences without parent contact, the advocate may conduct a home visit or make other direct contact with a child's parents.
- After THREE (3) unexcused absences without contact from parents, the child will be dropped from the program and placed back on the waiting list.
- When a child has accumulated, FOUR (4) absences whether excused or unexcused a letter on attendance concerns will be issued to the parent letting them know that the child is at risk of missing ten percent of program instruction.
- Staff will make every effort to support families to promote the children regular attendance by providing support and resources as needed. Staff will keep documentation of children's absences and parent contacts in the child's file.
- When a child has accumulated SIX (6) or more absences whether excused or unexcused. Center Director with the advocate and family will develop a plan to ensure children maintain regular attendance, beginning immediately. If no improvement in attendance occurs and absences exceed the numbers of best interest days (limit 10), staff will make a determination whether to continue providing services or referring child to another program that best meets the needs of the family. Staff understands that each case is unique and as such each case will be discussed and evaluated before any determination is made.
- The ERSEA Specialist in consensus with the Head Start Director will have the authority to formally drop a child when absenteeism has not been resolved. If services are terminated, the family will be provided with resources/referrals to other preschool services.

****NOTE – A child who is ill and has been out for 3 days may need a doctor's note – this will be determined on a case-by-case basis. The Center Director and ERSEA Content Specialist will discuss and determine if a doctor's note is required.**


ATTEND TODAY, ACHIEVE TOMORROW

GOOD SCHOOL ATTENDANCE MEANS...



PRESCHOOLERS build skills and develop good habits for showing up on time	ELEMENTARY STUDENTS read well by the end of third grade	HIGH SCHOOLERS stay on track for graduation	COLLEGE STUDENTS earn their degrees	WORKERS succeed in their jobs
--	---	---	---	---

Too many absences—excused or unexcused—can keep students from succeeding in school and in life. How many are too many? 10% of the school year—that's 18 missed days or 2 days a month—can knock students off track.



Attendance Works
Assuring Student Success By Reducing Chronic Absence
www.attendanceworks.org



POLICIES

Standards of Conduct - All Adults

All parents, guardians, and all other adults present at the center will follow the Standards of Conduct. These standards must be followed during all interactions.

The Standards of Conduct are as follows:

1. Remember that the decisions made and actions taken benefit the children that are served;
2. Be courteous;
3. Maintain order;
4. Show respect of others;
5. Take responsibility for your own actions;
6. Be punctual; and
7. Communicate effectively

Code of Ethical Conduct

As a staff or parent/guardian of a child enrolled with CAPMC I certify that while present at the program I will demonstrate that:

- I respect and promote the unique identity of each child and family and refrain from stereotyping on the basis of gender, race, ethnicity, culture, religion, or disability;
- I will follow program confidentiality policies concerning information about children, families, and other staff members.
- I will not leave a child alone or unsupervised while under my care; and
- I will use positive methods of child guidance and will not engage in corporal punishment, emotional or physical abuse, or humiliation. In addition, I will not employ methods of discipline that involve isolation, the use of food as punishment or reward, or the denial of basic needs.

Our program parent/guardian violating the Standards and/or Code of Ethical Conduct may be prohibited from being

Child Supervision

Supervision is everyone's responsibility, so in addition to our staff, parents must also use active supervision techniques to ensure our environments are safe.

Staff /Providers will:

- Actively ensure that our environments are safe and no child will be left alone or unsupervised at any time.
- Develop a Child Active Supervision Plan which describes how staff actively ensures that our environments are safe and that children are actively supervised. Elements include
 - *Arrival//Departure
 - *Restroom Planning/Diapering
 - *Indoor/Outdoor Transition
 - *Meal & Nap Times
 - *Zoning & Child Counts
 - *Plans for children needing extra support
- Participate in training and monitoring support compliance

Parents will:

- Ensure gate and door is closed and secured
- Follow the no Cell Phone policy when dropping off/picking-up your child. Cell phones can be distracting. Give your child your undivided attention.
- Ensure your child is signed in and out every day with your full legal signature and exact time
- Hold your child's hand in the road and parking lot
- Encourage children to follow safety rules
- Report safety and supervision concerns to staff immediately

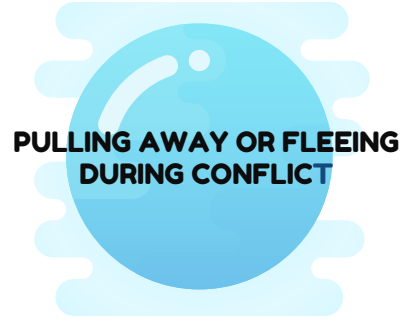
Children will:

- Follow safety rules
- Always stay with an adult
- Help keep self and others safe

UNDERSTANDING ACTIVE SUPERVISION & CHILD SAFETY

WE WILL ASK YOU:

- Has your child ever engaged in the following child safety concern behaviors?



YOU CAN ASK US: HOW DO I KNOW WHEN TO SAY "YES" TO A CHILD SAFETY CONCERN?

- Running away from caregivers, hiding, and fleeing from conflict are all part of the developmental process and for most young children, these types of behaviors are developmentally appropriate behaviors.

YOU SHOULD KNOW: WHAT IS DEVELOPMENTALLY APPROPRIATE?

- Children ages 0-5 years old are all working on their social emotional development and self-regulation skills at different levels, depending on their age and individual circumstances. Through relationships with a modeling from their caregivers children are learning how to:
 - listen and understand language
 - communicate and express themselves
 - name and identify their feelings
 - regulate their feelings and behavior
 - problem solve
 - socialize with other children
 - cope with and resolve conflict
 - keep themselves and others safe



Child safety concerns arise when a child struggles to learn or has never been taught these skills before and then engages in unsafe behaviors as a result.

POLICIES

UNDERSTANDING ACTIVE SUPERVISION & CHILD SAFETY



If you can check the box below any of these three behaviors, you should mark "Yes" to Child Safety Concerns on your child's Getting to Know You form

- **WANDERING/ELOPEMENT** - Wandering, also called elopement, refers to when a child leaves a safe area or a responsible caregiver. This typically includes situations where the child may be injured or harmed as a result.
- **HIDING**- Hide and seek is a normal part of childhood. However, hiding becomes a concern when a child can't be found for an extended period of time and doesn't respond when their name is called or to an adult's verbal prompts for discovery.
- **PULLING AWAY OR FLEEING DURING CONFLICT** - When a child pulls away and flees from conflict with adults or peers and runs away to an unsafe, unsupervised location or does not stop when an adult calls for them or comes after them, this type of behavior can put a child in danger and is considered unsafe.

WHY SHARING THIS INFORMATION WITH YOUR CHILD'S TEACHERS IS IMPORTANT

Our main priority when you entrust your child to our care is that we keep them safe. Knowing about these types of incidences helps us know how best support your child to teach them and keep them safe.

It is a performance standard of the Head Start program and a childcare licensing requirement that all of our staff ensure that a child is never left unsupervised or alone at any time. Our staff are thoroughly trained in providing active supervision of your children at all times.

In all of our early childhood classrooms and outdoor environments, we have implemented multiple active supervision and safety systems that ensure that your child is seen, heard, and kept safety at all times:

- meaningful teacher-child interactions and guided play experiences
- individualized child goals and behavior support that are planned specifically for your child.
- high-quality learning environments with developmentally appropriate and safe furniture, equipment, and materials
- frequent scanning, counting, & documenting of children in attendance
- locks & latches on doors, gates, and cupboards are secured and closed.



For more information about how to keep your children safe while they are at school, please contact your Center Director or Family Advocate at your center.

No Siblings Allowed in the Classroom

The agency's center license restricts the number of children in the center. All children in the centers must be enrolled in the program. Children not enrolled in the program are not permitted to visit the center or classroom.

The Adult Role in the Classroom

Adults model behavior for children by setting up appropriate environments and guidance techniques. The adult role is to facilitate learning. Children learn when they are given opportunities to problem solve and are encouraged in their efforts. You are a role model!

Adult Immunization Requirement

Health and safety is a primary concern at our centers. For this reason, all children enrolled, parents and adults or volunteers working at our centers must meet the State of California immunization requirements. **Adults and parents are required to provide proof of T.B. – Tuberculosis exam, vaccinations for TDaP and MMR, as well as an annual flu vaccination or documented flu refusal.** Adults will comply with the following:

- Encourage children to blow their own nose and to wash their hand afterwards.
- Periodically, the center holds fire, earthquake and evacuation drills. You are to assist when there is a drill; follow the teacher's directions in assisting the children out of the building calmly.
- When a child has an accident, you are to assist the child; but notify the teacher immediately.
- All information concerning children is confidential and is not to be discussed outside the center. This protects all children and parents right to privacy.

****You are a part of the teaching team. Your assistance as an adult supervising children is important in the safety of children. Report any concerns regarding children to the teacher promptly.**

NOTE: A community volunteer may have to be fingerprinted depending on the activity he/she is performing and the length of time he/she may be at the center.

Holiday/Celebrations Policy

Our curriculum is based, in part, on children's ideas and interests. Rather than focusing exclusively on holidays, we explore multicultural observances. All program activities are geared to children's ages and developmental levels and respect individual family practices.

Clothing and Items from Home

Your child will be very active during classroom activities and should dress in comfortable and washable clothes. Shoes must be worn at all times. Tennis shoes are great. Please send a change of clothes for your child in case of a spill or accident. Please discuss your ideas for sharing home materials with your child's teacher ahead of time. Toy guns and knives are not allowed in the center. The center is not responsible for any lost or damaged personal items.



Child Abuse Reporting

Our staff are mandated reporters. The safety and well being of your child always comes first. State law requires that staff report known or suspected instances of a child abuse to Child Protective Services or to local police officials. This abuse includes physical abuse, sexual abuse, emotional abuse or neglect.

If you or someone in your family wants to learn different ways to guide and discipline your child or to handle anger without hurting your child, please talk to your child's Teacher or Family Advocate.

There are resources available to help you, at no charge.

Infant and Child Car Seat

Per California Law V.C.27360(a), all children under 8 years of age MUST be properly secured in a car seat or booster seat in the back seat. California car seat law states that children under 2 years old must be rear-facing unless they weight 40lbs. or more, or are 40 inches tall or more.

Parents should always have a car seat for their child whenever they are being dropped off or picked up from the center. By Law, Head Start staff must report any violation to such law. Taken from: CA Office of Traffic Safety

NOTE: Please do not leave your child(ren) unattended in the car. It is against the law and reportable if observed by staff.

Active Supervision

Active supervision and safety of children is every staff and parent/guardian responsibility. Active supervision promotes a safe environment and prevents injuries in young children. It requires focused attention and intentional observation at all times. Staff use active supervision strategies to make sure children of all ages explore their environments safely. No child will be left alone or unsupervised at any time by staff and/or parent/guardian.

Classroom Zoning

- Zoning is a technique used to organize classroom staff.
- Each staff member is assigned a role.
- Zoning can be used throughout the whole day, not just for free choice time.

Child Count Board

Count boards are used in the classroom to document how many children are present. The staff can use your assistance in changing the number on the count board when your child arrives and leaves as requested by the staff.

Doors and Gates

To ensure the health and safety of the children, we encourage parents to use the assigned door for entering and leaving the facility at all times. Close doors when entering and leaving to ensure no other child/ren besides your leave the facility without an authorized adult. Gates – close and lock with the latch.

Safe School Notice

For the safety of everyone in our program, the following rules will be enforced:

- No real or pretend weapons.
- No drugs, tobacco, vaping or alcohol.
- No fighting, harassment or discrimination.
- No disruptive behavior
- No fire setting, vandalism and/or graffiti



Children with Special Health Needs

Our program will make every effort to work with parents and physicians to make accommodations for children with special health needs. An Individualized Health Care Plan (IHP) can be developed between staff, parent and child's physician. The plan is established prior to the child's entry date, or as the need arises.

Pets

Pets are not allowed on the premises except guide dogs. Contact your Center Director if you need to bring a guide dog.

Emergencies

Each center emergency plan is posted in the classroom and emergency drills are conducted monthly.

Diapers

The program provides diapers/pull ups while children are in care for children who are not yet potty-trained.

Napping

Children have the opportunity to nap or rest without distraction or disturbance from other activities by providing an individual napping space and a cot or mat. Any child who chooses not to sleep will be given the opportunity to do a quiet activity of their choosing.

Infants have their own individualized nap schedule. All infants must have a sleep environment that prevents injury and decreases the risk of Sudden Infant Death Syndrome (SIDS)

- Nothing is covering the infants head
- Sleeping on his or her back
- Dressed in sleep clothing, such as a one-piece sleeper
- No blanket, pillows, toys or loose objects
- Staff supervise napping infants and document sleep checks every 15 minutes
- Sleep plans will be developed with parents. Plans document the infants' first time rolling over.

Safe Environments

Health and Safety Screener is completed prior to the start of the year. A Daily Indoor/Outdoor safety check is completed to ensure there are no current hazards. Background checks are completed for all adults in the center prior to working with children. We ensure that a healthy, safe, nurturing environment. Center has emergency plans in place and conducts monthly Emergency Drills and inspections.

Procedures for Walking Your Child to Head Start Center

Children move quickly and are often unaware of danger. Most children are injured near their home or on their own street. Listed below are safety procedures to take into consideration as you and your child walk to our center.

When you cross the street with your child:

- Always hold your child's hand. Never allow a child to cross the street alone.
- Always stop at the edge of the curb or at parked cars before crossing the street.
- Always look LEFT, RIGHT, and LEFT again for moving cars.
- Only cross when it is clear and keep looking LEFT, RIGHT, and LEFT again.
- Always look for signs that a car is about to move (rear lights, exhaust smoke, sound of motor, wheels turning, etc.) and never walk behind vehicles that are backing up.
- Having a green light, the "WALK" signal, or being on a cross walk does not mean that it is safe to cross.
- Some drivers do not stop at red lights, or they turn right on red lights. Other drivers do not look out for pedestrians, or their view may be blocked. You must look LEFT, RIGHTS, and LEFT again before stepping off the curb. Cross when the street is clear and continue to look LEFT, RIGHT, and LEFT while crossing the street.
- Although a pedestrian may be able to see a driver, a driver may not be able to see the pedestrian. Be sure that the driver sees you and stops before you cross in front of him/her. Try to make eye contact with the driver.

Parent and Child Rights

During the registration process, families will receive the Parent's Rights and Personal Rights. It is the intent of the program to adhere to those requirements at all times. Below is a brief summary of the parent's and child's rights.

Parents have the right to:

- Inspect the center without notice
- File a complaint
- Review report of licensing visits and substantiated complaints against the licensee
- Make a complaint without discrimination or retaliation against you or your child
- Request in writing that a parent not be allowed to visit your child or take your child from the child care center, provided you have shown a certified copy of a court order
- Receive from the licensee the name, address and telephone number of the local licensing agency
- Be informed about criminal record exemptions
- Received from the licensee the Caregiver Background Check Process form

Children have the right to:

- Be accorded dignity in his/her personal relationships with staff and other persons.
- Be accorded safe, healthful and comfortable accommodations, furnishings and equipment to meet his/her needs.
- Be free from corporal or unusual punishment, infliction of pain, humiliation, intimidation, ridicule, coercion, threat, mental abuse, or other actions of a punitive nature, including but not limited to: interference with daily living functions, including eating, sleeping, or toileting; or withholding of shelter, clothing, medication or aids to physical functioning.
- Be informed, and to have his/her authorized representative, if any, informed by the licensee of the provisions of law regarding complaints including, but not limited to, the address and telephone number of the complaint receiving unit of the licensing agency and of information regarding confidentiality.
- Be free to attend religious services or activities of his/her choice and to have visits from the spiritual advisor of his/her choice.
- Not to be locked in any room, building, or facility premises by day or night.
- Not to be placed in any restraining device, except a supportive restraint approved in advance by the licensing agency.

Please refer to the Personal Rights & Parent's Rights Form for more information. When submitting a complaint to the Community Care Licensing send information to: Department of Social Services, Community Care Licensing, 1310 E. Shaw Avenue MS 29-01, Fresno, CA 93710, Phone # (559) 243-4588

PARENT COMPLAINT PROCEDURES

- STEP 1: Discuss the issue with the person with whom you have an issue or concern within 30 days of the incident. If the individual with whom you have an issue/concern with is unable to resolve the matter to your satisfaction, proceed to step two.
- STEP 2: Request a Parent/Community Complaint Form from the Center Director/Site Supervisor/Teacher. Complete the form and include: a description of the problem, dates of occurrence, name of person/people involved, and possible solution. The completed form must be returned to the Center Director/Site Supervisor/Teacher within 5 working days of meeting with the individual with whom you have a concern. Request a meeting with the Center Director/Site Supervisor/Teacher to resolve the issue. If no resolution has resulted, then proceed to step three.
- STEP 3: Request an appointment with the Head Start Program Director within 5 working days of your meeting with the Center Director/Site Supervisor/Teacher. If the Head Start Program Director determines that the complaint is related to the Nutrition Program, the appropriate form will be given and assistance provided. The Head Start Program Director shall issue a written response to you within 5 days after the meeting. If no resolution has been reached, proceed to step four.
- STEP 4: Request a meeting with Community Action Partnership of Madera County Executive Director within 5 working days of receiving Head Start Program Director's decision. The Executive Director shall issue a written response to you within 5 working days after the meeting. If no resolution has been reached, proceed to step five.
- STEP 5: Request the issue to be presented to the Head Start Policy Council/Committee Executive Committee within 5 working days of receiving the Executive Director's decision. The Executive Committee shall issue a written response to you within 5 working days after the hearing. If no resolution has been reached, proceed to step six.
- STEP 6: You may request that the issue be brought to the attention of the full Policy Policy/Committee within 3 working days of receiving the Executive Committee's decision. The Policy Council/Committee will hear the complaint and render a decision in writing within 5 working days of the hearing. (All materials and documents shall be forwarded for review). If you remain dissatisfied, proceed to step seven.
- STEP 7: An appeal to the Community Action Partnership of Madera County's Board of Directors Chairperson may be made in writing within 3 working days of receiving the Policy Council/Committee's decision. You must state the problem and desired solution. The Board of Directors shall hear the complaint and render a decision in writing within 5 working days of the hearing. (All materials and documents shall be forwarded for review).
- STEP 8: If you remain dissatisfied, you may file the complaint with Stanislaus County Office of Education at 1100 "H" Street, Modesto, CA 95354.

**COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY
PARENT/COMMUNITY COMPLAINT FORM**

Date:_____

Personnel about which complaint is issued:

Name:_____

Site Location:_____

Date of Incident: _____

Approximate Time of Incident:_____

Location of Incident: _____

Description of the problem (including names of participants/witnesses). Attach additional sheets if needed.

Describe in detail of your efforts to resolve the grievance at point of origin (inclusive of names and dates).

State desired solution.

Person filing complaint: Name (Please Print):_____

Signed:_____

Date Submitted:_____

PARENT COMPLAINT PROCEDURES (5 CCR 18094, 18118)

Notice of Action - Parent Appeal Process

Parents/Guardians enrolled in the CAPMC-State Base Migrant Preschool Program have the right to a fair and unbiased hearing if they disagree with a proposed action. Upon receipt of an on-time request for an appeal hearing, intended action shall be suspended and child care services shall continue until the appeal process has been completed. The review process is complete when the appeal process has been exhausted or when the parent/guardian abandons the appeal process. The Appeal Hearing process is as follows:

Step 1: Request a Hearing

The procedure to request an appeal hearing is outlined on the back of each Notice of Action received by parents/guardians. A request for an appeal hearing must be filed within fourteen (14) calendar days after the participant receives the Notice of Action (NOA). A request must include the effective date of the NOA, parent name, telephone number, full address, explanation why the parent disagrees with the agency's action and date the request is signed. The request for hearing may be submitted by mail, in person, phone, fax or e-mail to:

Community Action Partnership of Madera County
Attention: Deputy Director Direct Services
1225 Gill Ave.
Madera, CA 93637
(559) 507-507-8029

Step 2: Scheduling a Hearing

Within ten (10) days of receiving a parent's hearing request, the parent will be notified of the time and place of the hearing. To the extent possible, the hearing date and time will be convenient for the parent(s). The hearing shall not be scheduled more than fourteen (14) calendar days from the date the hearing officer contacts the parent to schedule the hearing. In the event that a parent or parent's Authorized Representative cannot keep the scheduled hearing date/time, the parent must notify the Hearing Officer in advance of the hearing date/time. A parent may request to re-schedule the hearing date one (1) time. Note: At any reasonable time, including before a hearing, a parent or the parent's Authorized Representative has the right to review the data file.

Step 3: Conduct the Hearing

In accordance with state regulation, the hearing will be conducted by an administrative staff person who shall be referred to as "the hearing officer." Hearings will be conducted at the Child Development Services – Madera Head Start, 1225 Gill Ave., Madera, CA 93637. In the event that a parent is unable to attend the hearing at the designated location accommodations will be arranged and agreed upon between the parent and hearing officer. For any hearing not conducted in person, verification of parent identity will be required, along with prior submission of support documentation. The hearing will be audio recorded. During the hearing, the parent or Authorized Representative will have an opportunity to provide support documentation and explain the reasons the parent disagrees with the proposed action indicated by the referenced NOA should not be carried out.

This will be a formal hearing, and the parent must comply with the directions of the hearing officer during the course of the hearing. Failure to comply with directions will result in the hearing being ended and the contested action being taken. A parent designating an Authorized Representative to be present must inform CAPMC-MHS in writing prior to the hearing. Please do not bring people to the hearing unless they are the designated Authorized Representative. No children are allowed to be present during the hearing. If parent fails to appear, it will be deemed that the parent has abandoned their appeal and care will end immediately.

Step 4: Hearing Decision Letter

The hearing officer will send notification in writing, of the decision within ten (10) calendar days after the hearing. If parent disagrees with the written decision, they have fourteen (14) days from the date of the written decision to file an appeal with the California Department of Social Services Child Care and Development Division Attn: Appeals Coordinator 744 P Street, MS 9-8-351 Sacramento, CA 95814. The appeal to CDSS, CCD must include a written statement specifying the reasons the parent believes CAPMC's decision was incorrect, a copy of the CAPMC's decision letter and a copy of both sides of the NOA. Once CDSS, CCD has rendered a decision, their decision is final.

PARENT COMPLAINT PROCEDURES

Uniform Complaint

It is the intent of the CAPMC State Based Migrant Preschool to adopt the uniform complaint procedures (UCP) that provides civil rights guarantees and annually notifies its students, employees, parents or guardians of its students, school advisory committees, and other interested parties of the complaint procedures. (These procedures address allegations of unlawful discrimination regarding actual or perceived sex, sexual orientation, gender, ethnic group identification, race, ancestry, national origin, religion, color, gender identification, mental or physical disability, or age or on the basis of a person's association with a person or group with one or more of these actual or perceived characteristics.) (See Attachment A for procedure)

Attachment A

Administrative Regulation

AR 1312.3
Community Relations

Uniform Complaint Procedures

Compliance Officers

Superintendent of Schools designates the following compliance officer(s) to receive and investigate complaints and to ensure County Office of Education compliance with law:

Jason Maggard
Chief of Staff: Human Resources
1100 H Street
Modesto, CA
(209) 238-1600

The Compliance Officer shall ensure that employees designated to investigate complaints are knowledgeable about the laws and programs for which they are responsible. Designated employees may have access to legal counsel as determined by the County Superintendent or designee.

(cf. 9124 - Attorney)

Notifications

The County Superintendent or designee shall annually provide written notification of the County Office's uniform complaint procedures to students, employees, parents/guardians, the County Office advisory committee, school advisory committees, appropriate private school officials or representatives, and other interested parties. (5 CCR 4622)

The County Superintendent or designee shall make available copies of the County Office's uniform complaint procedures free of charge. (5 CCR 4622)

The notice shall:

1. Identify the person(s), position(s), or unit(s) responsible for receiving complaints.
2. Advise the complainant of any civil law remedies that may be available to him/her under state or federal discrimination laws, if applicable
3. Advise the complainant of the appeal process pursuant to Education Code 262.3, including the complainant's right to take a complaint directly to the California Department of Social Services, Child Care and Development (CDSS, CCD) or to pursue remedies before civil courts or other public agencies.
4. Include statements that:
 - a. The County Office is primarily responsible for compliance with state and federal laws and regulations.
 - b. The complaint review shall be completed within 60 calendar days from the date of receipt of the complaint, unless the complainant agrees in writing to an extension of the timeline.
 - c. An unlawful discrimination complaint must be filed not later than six months from the date the alleged discrimination occurs, or six months from the date the complainant first obtains knowledge of the facts of the alleged discrimination.

PARENT COMPLAINT PROCEDURES

- a. The complainant has a right to appeal the CDSS, CCD by filing a written appeal within 15 days of receiving the County Office's decision.
- b. The appeal to the CDE must include a copy of the complaint filed with the County Office and a copy of the County's Office's decision (cf.5145.6- Parental Notifications)

Procedures

The following procedures shall be used to address all complaints which allege that the County Office has violated federal or state laws or regulations governing educational programs. Compliance officers shall maintain a record of each complaint and subsequent related actions, including all information required for compliance with 5 CCR 4631 and 4633.

All parties involved in allegations shall be notified when a complaint is filed, when a complaint meeting or hearing is scheduled, and when a decision or ruling is made.

Step 1: Filing of Complaint

Any individual, public agency or organization may file a written complaint of alleged noncompliance by the County Office. (5 CCR 4630)

A complaint alleging unlawful discrimination shall be initiated no later than six months from the date when the alleged discrimination occurred, or six months from the date when the complainant first obtained knowledge of the facts of the alleged discrimination. A complaint may be filed by a person who alleges that he/she personally suffered unlawful discrimination or by a person who believes that an individual or any specific class of individuals has been subjected to unlawful discrimination. (5 CCR 4630)

The complaint shall be presented to the compliance officer who shall maintain a log of complaints received, providing each with a code number and a date stamp.

If a complainant is unable to put a complaint in writing due to conditions such as a disability or illiteracy, County Office staff shall assist him/her in the filing of the complaint. (5 CCR 4600)

Step 2: Mediation

Within three days of receiving the complaint, the compliance officer may informally discuss with the complainant the possibility of using mediation. If the complainant agrees to mediation, the compliance officer shall make all arrangements for this process.

Before initiating the mediation of a discrimination complaint, the compliance officer shall ensure that all parties agree to make the mediator a party to related confidential information.

If the mediation process does not resolve the problem within the parameters of law, the compliance officer shall proceed with his/her investigation of the complaint.

The use of mediation shall not extend the County Office's timelines for investigating and resolving the complaint unless the complainant agrees in writing to such an extension of time. (5 CCR 4631)

Step 3: Investigation of Complaint

The compliance officer is encouraged to hold an investigative meeting within five days of receiving the complaint or an unsuccessful attempt to mediate the complaint. This meeting shall provide an opportunity for the complainant and/or his/her representative to repeat the complaint orally.

The complainant and/or his/her representative shall have an opportunity to present the complaint and evidence or information leading to evidence to support the allegations in the complaint. (5 CCR 4631)

PARENT COMPLAINT PROCEDURES

A complainant's refusal to provide the County Office's investigator with documents or other evidence related to the allegations in the complaint, or his/her failure or refusal to cooperate in the investigation or his/her engagement in any other obstruction of the investigation, may result in the dismissal of the complaint because of a lack of evidence to support the allegation. (5 CCR 4631)

The County Office's refusal to provide the investigator with access to records and/or other information related to the allegation in the complaint, or its failure or refusal to cooperate in the investigation or its engagement in any other obstruction of the investigation, may result in a finding, based on evidence collected, that a violation has occurred and may result in the imposition of a remedy in favor of the complainant. (5 CCR 4631)

Step 4: Response

Unless extended by written agreement with the complainant, the compliance officer shall prepare and send to the complainant a written report of the County Office's investigation and decision, as described in Step #5 below, within 60 days of the County Office's receipt of the complaint. (5 CCR 4631)

Step 5: Final Written Decision

The County Office's decision shall be in writing and sent to the complainant. (5 CCR 4631)

The County Office's decision shall be written in English and in the language of the complainant whenever feasible or as required by law.

The decision shall include:

1. The findings of fact based on the evidence gathered (5 CCR 4631)
2. The conclusion(s) of law (5 CCR 4631)
3. Disposition of the complaint (5 CCR 4631)
4. Rationale for such disposition (5 CCR 4631)
5. Corrective actions, if any are warranted (5 CCR 4631)
6. Notice of the complainant's right to appeal the County Office's decision within 15 days to the CDE and procedures to be followed for initiating such an appeal (5 CCR 4631)
7. For discrimination complaints, notice that the complainant must wait until 60 days have elapsed from the filing of an appeal with the CDSS, CCD before pursuing civil law remedies (Education Code 262.3)

If an employee is disciplined as a result of the complaint, the decision shall simply state that effective action was taken, and that the employee was informed of County Office expectations. The report shall not give any further information as to the nature of the disciplinary action.

Appeals to the California Department of Social Services Child Care and Development Division

If dissatisfied with the County Office's decision, the complainant may appeal in writing to the CDSS, CCD within 15 days of receiving the County Office's decision. When appealing to the CDSS, CCD, the complainant must specify the basis for the appeal of the decision and whether the facts are incorrect and/or the law has been misapplied. The appeal shall be accompanied by a copy of the locally filed complaint and a copy of the County Office's decision. (5 CCR 4632)

Upon notification by the CDSS, CCD that the complainant has appealed the County Office's decision, the County Superintendent or designee shall forward the following documents to the CDSS, CCD: (5 CCR 4633)

1. A copy of the original complaint
2. A copy of the decision
3. A summary of the nature and extent of the investigation conducted by the County Office, if not covered by the decision
4. A copy of the investigation file, including but not limited to all notes, interviews, and documents submitted by the parties and gathered by the investigator
5. A report of any action taken to resolve the complaint
6. A copy of the County Office's complaint procedures
7. Other relevant information requested by the CDSS, CCD

PARENT COMPLAINT PROCEDURES

The CDSS, CCD may directly intervene in the complaint without waiting for action by the County Office when one of the conditions listed in 5 CCR 4650 exists, including cases in which the County Office has not taken action within 60 days of the date the complaint was filed with the County Office.

Civil Law Remedies

A complainant may pursue available civil law remedies outside of the County Office's complaint procedures. Complainants may seek assistance from mediation centers or public/private interest attorneys. Civil law remedies that may be imposed by a court include, but are not limited to, injunctions and restraining orders. For discrimination complaints, however, a complainant must wait until 60 days have elapsed from the filing of an appeal with the CDSS, CCD before pursuing civil law remedies. The moratorium does not apply to injunctive relief and is applicable only if the County Office has appropriately, and in a timely manner, apprised the complainant of his/her right to file a complaint in accordance with 5 CCR 4622. Regulation STANISLAUS COUNTY OFFICE OF EDUCATION approved: November 9, 2006 Modesto, California



RESOURCES

CAPMC - RESOURCES

Community Services

559-673-9173

Energy Assistance

Weatherization

Drought Water Assistance Program

Child Care Alternative Payment Program and Resource & Referral

APP: 559-661-0779

R&R: 559-675-8469

Subsidized Child Care

Finding Quality Child Care

Child Care Initiative Project

Head Start

Madera: 559-673-0012

Fresno: 559-277-8641

Madera/Mariposa Regional Head Start

Madera/Migrant/Seasonal Head Start

Madera and Child Care Development (CMIG)

California State Preschool Programs

Fresno Migrant & Seasonal Head Start

Strengthening Families Program

Positive Parenting Program

325 S Pine St. #103

Madera, CA 93637

559-416-5655

Victim Services

559-661-1000

Hotline: 1(800)355-8989

Martha Diaz Shelter

Domestic Violence

Rape/ Sexual Assault

Victim & Witness Services

24-Hour Crisis Hotline

Unserved/ Underserved

Other Resources

Crisis Line: 888.275.9799 or 559.673-3508

Central Valley Suicide Prevention Hotline: 1.888.506.5991

Crisis Text Line: 741-741

The Friendship Line: 800.971.0016. The Friendship Line for Older Adults, Ages 60+ or Family and Friends. A crisis intervention, support and resource line for older adults.



Report to the Board of Directors

Agenda Item Number: D-10

Board of Directors Meeting for: August 8, 2024

Author: Maritza Gomez-Zaragoza

DATE: July 18, 2024

TO: Board of Directors

FROM: Maritza Gomez-Zaragoza, Head Start Director

SUBJECT: Review and approve 2023-2024 Fresno Migrant/ Seasonal Head Start self-assessment procedure, process, and planning guide

I. RECOMMENDATION:

Review and consider approving the 2023-2024 Fresno Migrant/Seasonal Head Start program procedure and plan for conducting the self-assessment.

II. SUMMARY:

In accordance with Head Start Performance Standards, a yearly self-assessment must be conducted. The assessment assists staff to determine if the systems are in place help the program comply with the 2007 Head Start Act and Performance Standards. The 2024 Monitoring Protocol will be used to conduct the self-assessment. The education team will include the CLASS assessment as part of the review.

III. DISCUSSION:

The following process will take place in order to ensure the program is still in compliance with Head Start Performance Standards.

- Review of all children's files for compliance in all service areas - Education, Health, Nutrition, Family, Disability/Mental Health and ERSEA
- Monitoring/review of ChildPlus data
- Health and Safety will be conducted to ensure centers are in compliance with safety standards and supervision of children is taking place.
- Utilize checklist developed based on the Office of Head Start monitoring protocol.

Once all the information is gathered, it will be used to identify possible trends, areas for strengths and areas for improvement. A report will be presented to the Policy Committee and Board of Directors by October 2024 detailing the result of the program's self-assessment.

IV. FINANCING: None



Report to the Board of Directors

Agenda Item Number: D-11

Board of Directors Meeting for: August 8, 2024

Author: Maritza Gomez-Zaragoza

DATE: July 18, 2024

TO: Board of Directors

FROM: Maritza Gomez-Zaragoza, Head Start Director

SUBJECT: Fresno Migrant/Seasonal Head Start's Planning Process Policy 2024-2025

I. RECOMMENDATION:

Review and approve the 2024-2025 Fresno Migrant/Seasonal Head Start's Planning Process Policy/Procedure and Calendar.

II. SUMMARY:

The policy/procedure determines and guides staff and Policy Committee in the 2024-2025 program planning and goal setting for Fresno Migrant/Seasonal Head Start.

II. DISCUSSION:

1. The planning process includes a review/analysis of:

- a) Required approvals by the Policy Committee & Board of Directors
- b) Assists in the completion of the annual refunding application
- c) Review the monitoring system of the program
- d) Updates on the 5-year goals and objectives, reviewed annually.

➤ The Fresno Migrant/Seasonal Head Start's Planning Process Policy 2024-2025 will be presented for approval to the FMSHS Policy Committee on August 7, 2024.

IV. FINANCING:

The entire Head Start budget serves to support the accomplishment of program goals/objectives.



Fresno Migrant & Seasonal Head Start Planning Process Calendar 2024-2025

	July 10, 2024	August 7, 2024	September 11, 2024	October 9, 2024	November 13, 2024
Policy Committee	<p>*Action</p> <p>*Seating of 2024-2025 Committee</p> <ul style="list-style-type: none"> - Election of Officers - Election of Executive Committee Rep. - Election of Reps to serve on CAPSLO Policy Council - CAPMC Audit <p>*Training-School Readiness Goals</p> <p>*Monthly Reports</p> <ul style="list-style-type: none"> - Staffing Changes - Budget Report - In-Kind - Program Enrollment & Attendance Report - CACFP <p>*Training July 8, 2024</p> <ul style="list-style-type: none"> - Purpose - Brown Act - Structure of Governance - Shared Governance - Proposed Governance - Regulations/Ethics - PC Code of Conduct - ERSEA - Eligibility, Recruitment, Selection, Enrollment and Attendance 	<p>*Action</p> <ul style="list-style-type: none"> - First Reading of the 2024-2025 Bylaws - Planning Process Policy with Planning Calendar - 2024-2025 Reimbursement Policy - Approve Self-Assessment Procedure (Distribute Health & Safety Checklist) - Budget Revisions <i>If Needed</i> <p>*Monthly Reports</p> <ul style="list-style-type: none"> - Staffing Changes - Budget Report - In-Kind - Program Enrollment & Attendance Report - CACFP - Correspondence from the Office of Head Start <p>*Training</p> <ul style="list-style-type: none"> - Classroom Assessment Scoring System (CLASS) 	<p>*Action</p> <ul style="list-style-type: none"> - Approve the 2024-2025 Bylaws - Internal Dispute Resolution - Suspension and Expulsion Policy - Approve No Fee Policy <p>*Monthly Reports</p> <ul style="list-style-type: none"> - Staffing Changes - Budget Report - In-Kind - Program Enrollment & Attendance Report - CACFP - Correspondence from the Office of Head Start <p>*Training</p> <ul style="list-style-type: none"> - Conscious Discipline 	<p>*Action</p> <ul style="list-style-type: none"> - Self-Assessment Review Results/Findings and Corrective Plan of Action <p><i>(Distribution of final Bylaws 2024-2025)</i></p> <p>*Monthly Reports</p> <ul style="list-style-type: none"> - Staffing Changes - Budget Report - In-Kind - Program Enrollment & Attendance Report - CACFP - Correspondence from the Office of Head Start <p>*Training</p> <ul style="list-style-type: none"> - Child Outcomes 2023-2024 	<p>*Action</p> <ul style="list-style-type: none"> - Review & Approve 2020-2025 Goals and Objectives Year five Update - Review & Accept Basic 2023-2024 Program Information Report - PIR numbers. <p>*Monthly Reports</p> <ul style="list-style-type: none"> - Staffing Changes - Budget Report - In-Kind - Program Enrollment & Attendance Report - CACFP - Correspondence from the Office of Head Start <p>*Training</p> <ul style="list-style-type: none"> - Family Engagement Data Report
	July 11, 2024	August 8, 2024	September 12, 2024	October 10, 2024	November 14, 2024
Board of Directors	<p>*Action</p> <p>-None</p> <p>*Monthly Reports</p> <ul style="list-style-type: none"> - Staffing Changes - Budget Report - In-Kind - Program Enrollment & Attendance Report - CACFP - Correspondence from the Office of Head Start 	<p>*Action</p> <ul style="list-style-type: none"> - Planning Process Policy with Planning Calendar - 2024-2025 Reimbursement Policy - Approve Self-Assessment Procedure (Distribute Health & Safety Checklist) <p>*Monthly Reports</p> <ul style="list-style-type: none"> - Staffing Changes - Budget Report - In-Kind - Program Enrollment & Attendance Report - CACFP - Correspondence from the Office of Head Start 	<p>*Action</p> <ul style="list-style-type: none"> - Approve the 2024-2025 Bylaws - Internal Dispute Resolution - Suspension and Expulsion Policy - Approve No Fee Policy <p>*Monthly Reports</p> <ul style="list-style-type: none"> - Staffing Changes - Budget Report - In-Kind - Program Enrollment & Attendance Report - CACFP - Correspondence from the Office of Head Start 	<p>*Action</p> <ul style="list-style-type: none"> - Self-Assessment Review Results/Findings and Corrective Plan of Action <p><i>(Distribution of final Bylaws 2024-2025)</i></p> <p>*Monthly Reports</p> <ul style="list-style-type: none"> - Staffing Changes - Budget Report - In-Kind - Program Enrollment & Attendance Report - CACFP - Correspondence from the Office of Head Start 	<p>*Action</p> <ul style="list-style-type: none"> - Approve 2020-2025 Goals and Objectives Report- Year five Update - Review & Accept Basic 2023-2024 PIR numbers. <p>*Monthly Reports</p> <ul style="list-style-type: none"> - Staffing Changes - Budget Report - In-Kind - Program Enrollment & Attendance Report - CACFP - Correspondence from the Office of Head Start

	December 11, 2024	January 8, 2025	February 12, 2025	March 12, 2025	April 9, 2025	May 7, 2025	June 11, 2025
Policy Committee	<p>*Action – None</p> <p>*Monthly Reports – Staffing Changes – Budget Report – In-Kind – Program Enrollment & Attendance Report – CACFP – Correspondence from the Office of Head Start</p>	<p>*Action – None</p> <p>*Monthly Reports – Staffing Changes – Budget Report – In-Kind – Program Enrollment & Attendance Report – CACFP – Correspondence from the Office of Head Start</p>	<p>*Action – None</p> <p>*Monthly Reports – Staffing Changes – Budget Report – In-Kind – Program Enrollment & Attendance Report – CACFP – Correspondence from the Office of Head Start</p>	<p>*Action – 2025-2026 Criteria for defining Enrollment, Recruitment, Selection, Eligibility and Attendance (ERSEA) – Approves Financial Audit and monitors the agency's actions to correct any audit findings – Approve Community Assessment</p> <p>*Monthly Reports – Staffing Changes – Budget Report – In-Kind – Program Enrollment & Attendance Report – CACFP – Correspondence from the Office of Head Start</p>	<p>*Action – Approve 2025-2026 Application/ Budget for Fresno Migrant/Seasonal Head Start – Training Plan – Basic Budget – Administrative Budget – Non Federal Share Budget – Service Area Plan – Annual Report 2023-2024</p> <p>*Monthly Reports – Staffing Changes – Budget Report – In-Kind – Program Enrollment & Attendance Report – CACFP – Correspondence from the Office of Head Start</p> <p>*Training – School Readiness Goals</p>	<p>*Action – None</p> <p>*Monthly Reports – Staffing Changes – Budget Report – In-Kind – Program Enrollment & Attendance Report – CACFP – Correspondence from the Office of Head Start</p>	<p>*Action – None</p> <p>*Monthly Reports – Staffing Changes – Budget Report – In-Kind – Program Enrollment & Attendance Report – CACFP – Correspondence from the Office of Head Start</p>
	December 12, 2024	January 9, 2025	February 13, 2025	March 13, 2025	April 10, 2025	May 7, 2025	June 12, 2025
Board of Directors	<p>*Action – None</p> <p>*Monthly Reports – Staffing Changes – Budget Report – In-Kind – Program Enrollment & Attendance Report – CACFP – Correspondence from the Office of Head Start</p>	<p>*Action – None</p> <p>*Monthly Reports – Staffing Changes – Budget Report – In-Kind – Program Enrollment & Attendance Report – CACFP – Correspondence from the Office of Head Start</p>	<p>*Action – None</p> <p>*Monthly Reports – Staffing Changes – Budget Report – In-Kind – Program Enrollment & Attendance Report – CACFP – Correspondence from the Office of Head Start</p>	<p>*Action – 2025-2026 Criteria for defining Enrollment, Recruitment, Selection, Eligibility and Attendance (ERSEA) – Approve Community Assessment</p> <p>*Monthly Reports – Staffing Changes – Budget Report – In-Kind – Program Enrollment & Attendance Report – CACFP – Correspondence from the Office of Head Start</p>	<p>*Action – Approve 2025-2026 Application/ Budget for Fresno Migrant/Seasonal Head Start – Training Plan – Basic Budget – Administrative Budget – Non Federal Share Budget – Service Area Plan – Annual Report 2023-2024</p> <p>*Monthly Reports – Staffing Changes – Budget Report – In-Kind – Program Enrollment & Attendance Report – CACFP – Correspondence from the Office of Head Start</p>	<p>*Action – None</p> <p>*Monthly Reports – Staffing Changes – Budget Report – In-Kind – Program Enrollment & Attendance Report – CACFP – Correspondence from the Office of Head Start</p>	<p>*Action – None</p> <p>*Monthly Reports – Staffing Changes – Budget Report – In-Kind – Program Enrollment & Attendance Report – CACFP – Correspondence from the Office of Head Start</p>



PROGRAM GOVERNANCE POLICIES AND PROCEDURES

Policy Number:	HSPPS: N/A Head Start Act of 2007: Sec. 642(c)(1)(i)-(iv)(II)	Page: 1 of 1
Approved by Policy Committee Date:	Approved by Policy Council Date:	Approved by Board of Directors: Date:

Subject: Planning Process

Performance Objective: Planning calendar is developed to guide the process to focus on the development of program goals, collecting outcome data, analysis of results, and continuous improvement.

Operational Procedure:

1. Head Start Director along with management staff will identify information and action items that will need to be presented to the Policy Council/Policy Committee as part of the refunding application process. The Program Planning elements include, but are not limited to;
 - a. Community Assessment
 - b. Program Goals & Objectives (long/short term)
 - c. Program Self-Assessment
 - d. On-going monitoring & reporting
 - e. Budget Planning, including service areas.
 - f. School Readiness & Outcome Data
 - g. Program Data – Program Information Report, Enrollment, Recruitment, Attendance, Finances, etc.
2. All of the elements are presented to the Policy Council/Policy Committee for review, input, and approval.
3. Once approved by the Committee/Council, the items are submitted to the Board of Directors to give members the opportunity for input and give final approval for each element presented.
4. The planning calendar is reviewed and updated as necessary on an annual basis and taken to the Policy Council/Policy Committee and Board of Directors for approval annually.



Report to the Board of Directors

Agenda Item Number: D-12

Board of Directors Meeting for: August 8, 2024

Author: Maritza Gomez-Zaragoza

DATE: July 31, 2024

TO: Board of Directors

FROM: Maritza Gomez-Zaragoza, Head Start Program Director

SUBJECT: Approval of the Fresno Migrant/Seasonal Head Start Policy Committee Members Meeting Reimbursement Policy for 2024-2025

I. RECOMMENDATIONS:

Review and consider approving the 2024-2025 Reimbursement Policy for the Policy Committee Members representing Fresno Migrant/Seasonal Head Start program.

II. SUMMARY:

The Policy Committee Members representing Fresno Migrant/Seasonal Head Start receive a reasonable financial childcare and mileage reimbursement to attend meetings and to participate fully in their responsibilities.

III. DISCUSSION:

The Policy Committee will decide whether or not to approve the policy at their regular meeting. The Head Start Program will provide reimbursement for childcare from 3 to 4 hours for a maximum of \$30.00 for Local members because of the logistics of the center locations and time of travel. Mileage reimbursement is from the home to the meeting place at the Internal Revenue Service's approval rate. The mileage reimbursement will be given to those members using their vehicle.

- The Approval of the Fresno Migrant/Seasonal Head Start Policy Committee Members Meeting Reimbursement Policy for 2024-2025 will be presented for approval to the PC on August 7, 2024.

IV. FINANCING:

Funds are an allowable cost under the Federal Regulations



PROGRAM GOVERNANCE POLICIES AND PROCEDURES

Policy Number:	HSPPS: 1301.3(e)	Page: 1 of 2
Approved by Policy Committee Date:	Approved by Policy Council Date:	Approved by Board of Directors Date:

Subject: Parent Policy Council/Parent Policy Committee Reimbursement

Performance Objective: Community Action Partnership of Madera County Head Start Policy Council and Policy Committee members will be reimbursed for reasonable expenses incurred while participating in approved activities.

Operational Procedure:

1. The Policy Council/Committee Reimbursement Policy will be reviewed and approved by Policy Council /Committee on an annual basis. The Policy Council/Committee approval/recommendation is submitted to Board of Directors for approval.

2. The Parent Meeting Payment Activity Voucher will be used when parents participate in the following activities.
 - a. Attend monthly or special Policy Council/Policy Committee meetings.
 - b. Agency/Head Start Grantee sponsored conference/training seminars.
 - c. Parents participate on issues related to the program activities as requested.
 - d. Attend the National Migrant or Head Start Conference.
 - e. Self-assessment process.
 - f. Board of Directors meetings.

3. Parents will be reimbursed in the following manner:
 - a. Parent reimbursement for childcare cost is \$30.00 for Policy Council/Policy Committee members that live locally and \$45.00 for members that live out of area (Mountains).
 - b. Mileage reimbursement is from the home to the meeting place at the Internal Revenue Service's approval rate. The mileage reimbursement will be given to those members using their vehicle.
 - c. Reimbursement is provided to the Policy Council/Policy Committee representative. If the representative does not attend, the alternate is eligible for the reimbursement. Reimbursement is for voting members at the time of the designated meeting only.
 - d. Both Policy Council/Policy Committee member and alternate are eligible for reimbursement at required trainings or upon staff request to attend the event.
 - e. If both the Representative and Alternate decide to car-pool, the reimbursement will be provided to the owner of the vehicle.

The Parent Activity Payment Voucher is to be completed in the following manner:

1. PC member name
2. Complete mailing address
3. Position on the Policy Council/Policy Committee
4. Activity
5. Total miles (round trip)
6. Signature and date
7. Once the information is complete, the Parent Activity Payment Voucher is turned into the Parent and Program Governance Specialist or Administrative Assistant for submission to the Fiscal Department. The Fiscal Department will send payment directly to the participating member.



Community Action Partnership of Madera County

1225 Gill Avenue, Madera, CA 93637 559.673.0012

BENEFICIARY & BOARD REIMBURSEMENT VOUCHER (Complete in Ink)

Instructions: Complete the spaces for your name and home address. Indicate the date of the meeting and the purpose/activity. The beginning and ending odometer readings must be included on the mileage. Subtract the ending odometer reading from the beginning odometer reading and record the difference as mileage. Total miles will be reimbursed at the current IRS reimbursement rate. Remember that if you are car pooling, only the driver is eligible for mileage reimbursement. Circle the appropriate meeting allowance rate. Add the mileage reimbursement and the meeting allowance together. Enter the sum as Total Expenses. Sign and date the form. CAPMC staff will complete the proper account coding.

Name: _____ Date of Meeting: _____
 Street Address: _____ Position: Policy Council/Committee Member
 City/Zip: _____ Activity: Policy Council/Committee Meeting
 Telephone: _____ Center: _____

Program: **Madera/Mariposa HS Madera MHS Fresno MHS**

<u>EXPENSES</u>	<u>AMOUNT</u>
Mileage @ _____ Miles x <u>Current IRS Rate</u> Per Mile =	\$ _____
Meeting Allowance (Low Income Committee Members)	
\$30.00 (Local) \$45 (Mountain/Huron)	\$ _____
Other: _____	_____
_____	\$ _____
TOTAL EXPENSES:	\$ _____

The expenses listed above were incurred by me while carrying out my duties for Community Action Partnership of Madera County.

Signed _____ **Date:** _____

This part is to be completed by CAPMC staff.

Program Account Mileage: 3__0-7111-__ - __ \$ _____
 Allowance: 3__0-7114-__ - __ \$ _____
Total: \$ _____

Authorized By: _____ Date: _____



Community Action Partnership del Condado de Madera
 1225 Gill Avenue, Madera, CA 93637 559.673.0012

BONO DE REMBOLSO
 (Complete con tinta)

Instrucciones: Complete los espacios de su nombre y dirección de su casa. Indique la fecha de la reunión y el objetivo / actividad. Las lecturas del odómetro inicial y final deben estar incluidas con el millaje. Reste la lectura del odómetro final a la lectura del odómetro principal y registre la diferencia en el millaje. El millaje será reembolsado de acuerdo a la tarifa aprobada por el IRS. Recuerde que si usted viene con otro miembro en un carro, sólo el conductor es elegible para el reembolso de millaje. Circule la tarifa apropiada para el tipo de reunión correspondiente. Agregue el reembolso de millaje y la asignación de reunión juntos. Escriba la suma de los gastos totales. Firme y feche el formulario. Personal de CAPMC completará la codificación de cuentas adecuadas.

Nombre: _____ Fecha de la Reunión: _____

Domicilio: _____ Posición: Miembro/Alternante del Concilio/Comité de Políticas

Ciudad/Código Postal: _____ Actividad: Reunión del Concilio/Comité

Teléfono: _____ Centro: _____

Programa: **Madera/Mariposa HS Madera/MHS Fresno MHS**

GASTOS

CANTIDAD

Millaje @ _____ Millas x Tarifa Actual del IRS Por Milla =\$ _____

Asignación de Reuniones (miembros del Comité de ingresos bajos)

\$30.00 (Local) \$45 (Montañas/Huron) \$ _____

Otro: _____ \$ _____

TOTAL DE GASTOS: \$ _____

Los gastos antes mencionados fueron realizados por mí llevando acabo las funciones para Community Action Partnership del Condado de Madera

Firma: _____

Fecha: _____

Esta parte debe ser completada por el personal CAPMC.

Cuenta del Programa Millaje: 3____.0-7111-____ - ____ \$ _____

Asignación: 3____.0-7114-____ - ____ \$ _____

Total: \$ _____

Autorizado por: _____

Fecha: _____



Report to the Board of Directors

Agenda Item Number: D-13

Board of Director's meeting for: August 8, 2024

Author: Leticia Murillo

DATE: August 8, 2024
TO: Board of Directors
FROM: Leticia Murillo, Program Manager
Child Care Alternative Payment and Resource & Referral Program Manager
SUBJECT: Child Care Alternative Payment – Parent & Provider Handbook of Written Policies

I. **RECOMMENDATION:**

Approve the Child Care Alternative Payment Program - Parent & Provider Handbook of Written Policies for FY 2024-25.

II. **SUMMARY:**

Parents and Child Care Providers who participate in the subsidized child care program administered by CAPMC – Child Care Alternative Payment Program are issued a handbook so they may understand and comply with program policies and procedures.

III. **DISCUSSION:**

1. The CAPMC Child Care Alternative Payment Program - Parent & Provider Handbook of Written Policies meets the following regulations listed in the Funding Terms and Conditions and Program requirements for Child Development Programs:
 - Information on Contractor Policies (EC8261;5CCR 18221)
 - Information to be Given to Parents (EC8225and 8261;5CCR18222 and 18224.2)
 - Procedures for Provider Participation (EC8261;5CCR18223)
 - Written Materials to be Given to Providers (EC8261;5CCR18224)
2. The FY 2024-25 Child Care Alternative Payment Program - Parent & Provider Handbook of Written Policies has been revised to include new regulations and requirements that have been issued from California Department of Social Services - Child Care and Development Divisions & any new CAPMC/APP procedures since last CAPMC Board approval of August 13, 2020.
3. The approved handbook is distributed to parents and providers at their initial enrollment and annually at re-certification; it is available in English and Spanish. It includes the requirement that a receipt is signed by the parent or provider with the agreement to adhere to program written procedures (handbook) and applicable policies.

IV. **FINANCING:** Included in the budget



Child Care Alternative Payment Program

Parent & Provider Handbook of Written Policies



APPROVED BY THE CAPMC BOARD OF DIRECTORS XX/XX/XXXX

Table of Contents

WELCOME	1
CHILD CARE ALTERNATIVE PAYMENT PROGRAM: AN OVERVIEW	4
SECTION I: PARENT INFORMATION & RESPONSIBILITIES.....	5
Parental Choice Offerings for Parents Eligible for Services/Your Child Care Options	5
Eligibility.....	5-4
General Eligibility Requirements.....	4-5
Need Requirements.....	8-7
Enrollment/Recertification Requirements.....	10-8
Family Fees	12-10
Certified Hours, Attendance & Termination	13-14
Family Rights/Grievance Process/Appeal Process/Confidentiality	19-17
SECTION II: PROVIDER INFORMATION & RESPONSIBILITIES	16
Licensed Provider Participation Requirements	22-18
License-Exempt Provider Participation Requirements.....	19-20
Provider Exclusions/ <i>Child Care Agreement</i> Certificate for Services	24
Attendance	25-23
Payment/Reimbursement Procedures	23
Reimbursement Rates	27-24
Submitting <i>Attendance Sheets</i> and <i>Statement of Services</i> for Reimbursement	29
Family Fees	30-27
Provider Rights and Grievance Process	31-28
SECTION III: CAPMC/APP FRAUD PREVENTION	27
Fraud Defined	33
Fraud Policy.....	33
Harassment Policy	30
Discrimination Statement.....	30
Confidentiality & Use of Information.....	30
Acknowledgement of Receipt of Written Policies.....	31
Electronic Communication & Text Messaging Authorization.....	31

OUR MISSION

Helping people, changing lives, and making our community a better place to live by providing resources and services that inspire personal growth and independence.

OUR VISION

CAPMC will be recognized as a premier social service agency that eliminates the effects of poverty by helping people obtain knowledge and skills to achieve self-reliance and economic stability... one life at a time.

THE PROMISE OF COMMUNITY ACTION

Community Action changes people's lives, embodies the spirit of hope, improves communities, and makes America a better place to live.

We care about the entire community, and we are dedicated to helping people help themselves and each other.

OUR VALUES

Trustworthiness, Respect, Responsibility, Fairness, Caring, Citizenship



Agency Hours

Monday-Friday

8:00am to 5:00pm

Closed on all Major Holidays

APP/R&R Clients will be seen by appointment only

Community Action Partnership of Madera County, Inc.

Child Care Alternative Payment and Resource & Referral Program

1225 Gill Avenue, Madera, CA 93637

Main Phone (559) 661-0779 ◦ Toll Free (800) 505-0404 ◦ Fax (559) 661-0764

We encourage parents and providers to access the CAPMC website at <https://www.maderacap.org>.

During a Pandemic, Epidemic and/or Government Shutdown, our agency will be taking measures for our safety and those of our clients. Parent and Providers will be contacted if these changes occur via the United States Postal Service and our agency website.

WELCOME

Welcome to the Community Action Partnership of Madera County (CAPMC) Child Care Alternative Payment and Resource & Referral Program (APP/R&R). We are a private non-profit agency organized for the expressed purpose of helping people become self-sufficient by providing high level, quality services to the children and families of Madera County.

This is accomplished through coordination, advocacy, as well as with direct and indirect services. CAPMC provides assistance on a non-discriminatory basis extending equal treatment and access to services for children, parents and providers of child care without regard to race, color, creed, religion, national origin, ethnicity, ancestry, age, sex, sexual preference or disability.

To offer maximum support for parents and providers, CAPMC will provide access to the following services:

- Resources and referrals for parents to help them make quality child care choices
- Financial assistance with child care expenses for eligible families
- Professional training, technical assistance, and information for providers
- Other social service information, health information and referrals
- Information to parents and providers related to child development

The purpose of this handbook is to give families and providers an overview of the APP/R&R program and provide information about policies and procedures. The APP/R&R program is governed by the California Department of Social Services (CDSS), Child Care and Development Division (CCDD), Title 5 – Education Regulations and specific requirements or clarification can be cited from this code of regulations. These programs, administered by the California Department of Social Services (CDSS) are state and federally funded.



CHILD CARE ALTERNATIVE PAYMENT PROGRAM: AN OVERVIEW

Child care is an important partnership between parents and providers. Parents and caregivers must work together to develop a warm, caring and responsive relationship as well as a safe environment for children. CAPMC APP/R&R recognizes the importance of their role in helping to provide quality care for children in Madera County.

This CAPMC APP/R&R program is designed to make full or partial child care subsidies available to families who demonstrate a need for assistance based on various eligibility requirements, including family size and income. CAPMC APP/R&R creates an agreement with the child care provider that the eligible family has chosen, as parents are best able to choose and evaluate child care for their own children. CAPMC's goal is to help families find the child care setting best suited to their needs.

CAPMC APP/R&R offers eligible families a choice to work with a license-exempt provider or to enroll in any of the following: Early Head Start/Head Start, California State Preschool Programs, private child care centers, a family child care home network, a licensed family child care home, or sectarian care. R&R can provide individualized referrals to licensed homes or centers and counsel parents on how to choose quality care. We encourage parents to carefully interview providers and check references before placing children in their care, as CAPMC APP/R&R cannot guarantee the quality of any provider.

Quality child care is characterized as a warm, caring, and safe environment that fosters social and emotional experiences, enriched by interactions between children and adults. Licensed family child care homes and center-based programs are licensed by the California Department of Social Services (CDSS) and must meet standards for health, safety and nutrition. They also provide a nurturing atmosphere that helps meet the multicultural and multilingual needs of children. An appropriate family child care environment allows for emotionally nurturing interactions and facilitates feelings of trust and security. As children grow in the environment, they explore, question and experiment with concepts, thus encouraging problem solving, self-help skills and language development.

The purpose of this handbook is to ensure parents and providers fully understand the subsidized child care and development service provided by CAPMC APP/R&R. **Please read the entire handbook to fully understand the requirements for both the parent and child care provider.**



SECTION I: PARENT INFORMATION & RESPONSIBILITIES

Parental Choice Offerings for Parents Eligible for Services/*Your Child Care Options*

Providers whose purpose is to prepare children for success in school.

These programs operate both full day and part day. They serve preschoolers, infants, and toddlers, and include after-school programs for school-age children directly funded by the state and federal government. They operate in a manner that invests in each child's developmental progress, supporting their future success in school.

These programs include state-funded early education programs such as Head Start, Early Head Start, Migrant Head Start and other locally administered school readiness programs. They meet licensing health and safety standards and employ trained teachers who use effective, developmentally appropriate teaching strategies monitored by their funding agency. Nutrition services for children are also provided.

Providers that comply with health and safety requirements

These programs are licensed family child care homes and licensed child care centers monitored by the DSS Community Care Licensing Division to ensure health and safety requirements. The advantage of meeting these requirements is that children are supervised and hazards in the environment are minimized. Some of these programs may also contain an educational component. It is the parent's responsibility to evaluate and consider the value of the educational services provided to children.

Providers that are not subject to either educational or licensing standards

License-exempt providers provide flexibility to the parent, a family environment with the same values and culture as the parent, and/or the ability to accommodate non-traditional work schedules. They include but are not limited to some relative caregivers, cooperative child care programs, some afterschool programs, and public recreation programs. While license-exempt providers do not have to adhere to licensing regulations, if they are not a close relative of the child(ren) in their care, they must register with TrustLine and complete a *Health and Safety Self-Verification* form to receive payment from state or federal child care subsidy programs.

Note: The above descriptions are for informational purposes only and not intended to promote the preference for any particular provider.

Parent Involvement and Parent Survey – Program Self-Evaluation

The CDSS – Child Care and Development Division (CCDD) mandates that CAPMC APP/R&R conducts annual Desired Results for Children and Families – Parent Survey. These surveys serve to gather feedback on past experiences with APP/R&R, the quality of information provided by the program, and the overall benefits to families. Parental input is essential to improving the services offered.

Additionally, CAPMC APP/R&R is required to analyze the findings from Compliance Reviews and other self-assessments activities to identify areas for improvement. Upon identification, a list of tasks must be created promptly. Procedures for ongoing program monitoring that meet the standards will be continued, while any areas requiring modifications will be addressed promptly and effectively.

CAPMC APP/R&R is expected to submit a summary of their self-evaluation findings to CDSS by June 1st each year. Furthermore, necessary adjustments to the program must be made based on the identified areas for improvement.

Eligibility Requirements General Admission Procedures (5 CCR 18105)

Families must meet eligibility requirements based on family gross income and family size as well as need requirements as established by CDSS CCDD—California Code of Regulations, Title 5—Education.

- Priority: Families whose children receive child protective services or are at-risk, upon written referral from a legal, medical, or social services agency.
- Second Priority: For those not falling under the first priority, admission will be based on family monthly gross income. Families with the lowest monthly gross income in relation to their family size as determined by the CDSS's income ranking schedule will be admitted first. Public assistance grants are considered as part of the income.

Program Eligibility Waitlist

The CAPMC APP Eligibility Waitlist is a database of parents awaiting assistance through the General Alternative Payment Program for subsidized child care, funded by CDSS-CCDD. It maintains a current list based on admission priorities. Upon application, families are ranked according to family size and monthly gross income, requiring proof of all total countable income. When vacancies occur, families with the lowest rank number are contacted first; families are not selected on a first come, first serve basis. All program spaces or certified services are contingent on funding. **To remain active on the waitlist, families must update their need and income every six (6) months and must have a working contact phone number with message capability.**

CalWORKs Child Care

CAPMC APP receives funding for CalWORKs families referred by the Madera County Department of Social Services: CalWORKs families entering from Stage one, and CalWORKs families who transfer from Stage two child care to Stage three.

****For CalWORKs Stages two (2) and three (3), the 24-month eligibility period does not apply. They will be certified at no less than 12 months.***

Cal-SAFE Child Care

CAPMC APP receives funding for student-parents referred by their high school or equivalent educational institution.

Child is under Child Protective Services (CPS) or At-Risk

CAPMC APP receives a referral for services from qualified agencies or legally certified professionals.

Emergency Child Care Bridge Program for Foster Children

Eligible Foster Families may receive a time-limited child care voucher or payment to help pay for child care costs for foster children birth through age 12, children with exceptional needs and severely disabled children up to the age of 21. (Up to six (6) months initially, with the possibility of extension for compelling reasons, beyond the 12-months limit if eligible.)

General Eligibility Requirements

To be eligible for subsidized child care, the family must meet all the following:

Be income eligible based on "Total Countable Income" guidelines. The parent shall obtain and provide documentation of the family's total countable income for the purposes of determining whether a family is income eligible and/or assessing

the appropriate family fee, as applicable. The parent(s) shall provide documentation of total countable income for all the individuals counted in the family size as follows:

- Payroll check stubs, or an independently drafted letter from the employer, or other record of wages issued by the employer from either month of the two (2) month window immediately preceding the initial certification, or the recertification of eligibility for services.
- In cases where the employer refuses or fails to provide requested documentation, or where the parent states that providing such documentation would adversely affect their employment, the parent shall provide alternative verification of income. Acceptable forms of verification may include but are not limited to, the following: a list of clients and amounts paid, the most recently signed and completed tax returns, quarterly estimated tax statements, or other records of income to support the reported income, along with a self-certification of income.
- Self-employed parents shall obtain and provide a combination of documentation necessary to establish current income eligibility from either month of the two (2) month window immediately preceding the initial certification or the recertification of eligibility of services. Acceptable forms of verification may include but are not limited to an independently drafted letter from the source of the income; a copy of the most recently signed and completed tax return with a statement of current estimated income for tax purposes; or other business records, such as ledgers, receipts, or business logs; along with a self-certification of income.
- Families with income that has no recognizable pattern (ex: overtime, unpredictable days, and hours of employment, self-employed) shall submit documentation of income for the preceding three (3) months to no more than twelve (12) months.
- Other sources of income that shall be reported and counted, may include but are not limited to:
 - Gross wages or salary, commissions, overtime, tips, bonuses, gambling, or lottery winnings
 - Wages for migrant, agricultural, or seasonal work
 - Public Cash Assistance (CalWORKs or TANF)
 - Gross income from self-employment less business expenses with the exception of wage draws.
 - Disability / Unemployment Compensation / Worker's Compensation
 - Spousal support and/or child support from former spouse or absent parent, or financial assistance for housing costs or car payments paid as part of or in addition to spousal or child support.
 - Survivor (i.e. SSA) and retirement benefits
 - Rent for room within the family's residence.
 - Dividends, interest on bonds, income from estates or trusts, net rental income or royalties
 - Foster care grants, payments or clothing allowances for children placed through child welfare services.
 - Financial assistance received for the care of a child living with an adult who is not the child's biological or adoptive parent.
 - Veterans Pension / Pension / Annuities, or Inheritance
 - Allowances for housing or automobiles provided as part of compensation.
 - Insurance or court settlements for lost wages or punitive damages
 - Net proceeds from the sale of property, stocks, or inherited property.
 - Other enterprise for gain
- Meet need criteria for child care that precludes the provision of care and supervision of the family's child(ren) for some of the day. In other words, a parent/guardian in the family is not available to provide

care for the child(ren) during the time requested, and supervision of the child(ren) is not otherwise provided by a school, person, or any other entity.

- Need for child care due to employment, seeking employment, experiencing homelessness, seeking housing for family stability, vocational training leading directly to a recognized trade/profession, engaged in an educational program, or parental incapacity.
- Work in, or reside in Madera County, California.
- Need for child care for children under the age of 13 or for children with exceptional needs up to age 21.

Need Requirements

It is the parent's responsibility to provide **all** the information and documentation necessary for CAPMC to determine whether the family meets both eligibility and need qualifications. The Family Services Associate (FSA) will indicate what documentation will be needed based on the criteria for services; the family will be certified for child care services **only** when it is determined that the documentation meets the criteria. Additional documentation may be requested to verify need & eligibility, only if the parent **voluntarily** reports an update in service.

Child is under Child Protective Services or "At-Risk"

In these cases, a parent/guardian provides a written referral from a county child welfare caseworker certifying that child care services are a necessary component of the family maintenance/preservation plan for not less than **24-months**. An "At-Risk" referral can be from a legally certified professional stating that the child is at risk from abuse or neglect, for not less than **24-months**.

Emergency Child Care Bridge Program for Foster Children

CAPMC APP/R&R will provide eligible families referred by Madera County Department of Social Services (MCDSS) with access to emergency child care and child care navigator services, and a time-limited monthly voucher for child care for **up to six (6) months initially, with the possibility of extension for compelling reasons, beyond the 12-months limit if eligible**. Child Care providers serving children in the Bridge Program will have access to the **trauma-informed care training and coaching sessions**.

Employment

Documentation shall include the parents/guardian's days and hours of employment. This can include but is not limited to pay stubs indicating days and hours worked and an employment verification statement from the employer with an independent telephone and/or fax number to contact the employer to verify hours. Title 5 - Education Regulations, Section 18081 & 18086, provides additional methods to document non-regular or non-typical employment.

If a parent's work takes place within the family home or on the property where the family resides, they must provide a written statement explaining the reason they require child care services. This written statement should include details about the nature of their work, the age of the child needing care, and, if the child is over five (5) years old, any specific child care needs. CAPMC APP shall determine and document whether the parent's employment and the identified child care needs preclude the supervision of the family's need.

If the parent is employed as an assistant in a licensed large family day care home under Health and Safety Code section 1596.78(b), and is requesting services for their own child within the same family day care home, the must provide documentation that substantiates the following:

- **A copy of the family day care home license indicating it is licensed as a large family day care home.**
- **A signed statement from the licensee stating that the parent is the assistant, pursuant to the staffing ratio requirement of California Code of Regulations, title 22, section 102416.5.**

- Proof that the parent's fingerprints are associated with that licensed family day care home as its assistant, CAPMC APP may verify with the local community care licensing office.
- Payroll deductions withheld for the assistant by the licensee, which may be pay stub.

Self-Employment

Documentation for self-employment must include a declaration of need, under penalty of perjury, providing a description of the employment and an estimate of the days and hours worked per week. To demonstrate these details, one or more of the following must be provided: appointment logs, client receipts, job logs, mileage logs, a list of clients with contact numbers information, or similar records. Additionally, if applicable, a copy of a business license, a work space lease, or a rental agreement should be included.

Seeking Employment

The period of eligibility is for not less than 12 months or 24-months depending on the program type. Services will be based on stated need with no more than five (5) days per week, less than six (6) hours a day and less than 30 hours per week. The period of eligibility starts on the day authorized by CAPMC APP and will extend for consecutive working days.

Documentation shall include a declaration under penalty of perjury that the parent is seeking employment and shall include the parent's plan to secure, change or increase employment.

Vocational Training

Vocational training (school) must be leading towards a recognized trade or profession. **Services are limited to six (6) years from the initiation of service based on need for vocational training or 24 units after the attainment of a bachelor's degree.** Documentation shall include: a current class schedule printout, or a Training Verification Form bearing the registrars' stamp and/or a signature, statement of vocational goal, proof of grades or GPA (a minimum 2.0 is required), or a copy of the most current transcript. For ongoing eligibility for services based on vocational training is contingent upon making adequate progress.

If at recertification the parent has not made adequate progress, the parent shall be recertified for services for another 12 months or 24-months depending on the program type. At the conclusion of this 12 month or 24-month certification period, the parent shall have made adequate progress. If the parent has not made adequate progress, and cannot establish another basis of need for services, the family will be:

- Disenrolled from services, and
- The parent shall be ineligible to be certified for services based on enrollment in vocational training for six (6) months from the date of disenrollment.

Engaged in an Educational Program

Documentation for services for an Educational Program must be from a recognized program for English Language Learners / English as a Second Language (ESL) or a program to attain a high school diploma or General Education Development / High School Equivalency certificate services. Services shall be for not less than twelve months. Documentation shall include a current class schedule printout, or a Training Verification Form bearing the registrars' stamp and the number of hours needed for the program.

Seeking Permanent Housing

The period of eligibility is not less than 12 months or 24-months depending on the program type. Services shall occur no more than five (5) days per week, less than six (6) hours a day and for less than 30 hours per week. The period of eligibility starts on the day authorized by CAPMC APP and will extend for consecutive working days.

Documentation shall include a declaration under penalty of perjury that the parent is seeking permanent housing and shall include the parent's search plan to secure a fixed, regular, and adequate residence along with when services will be needed.

Homelessness

The period of eligibility is not less than 12 months. Parents must provide a written referral from an emergency shelter or other legal, medical, social service agency, local educational agency liaison for homeless children and youths. If the need is for the child identified as homelessness, a written referral from a legal, medical, or social services agency, a local educational agency liaison for homeless children and youth, a Head Start Program or Emergency of transitional shelter must be provided.

Parental Incapacity

Documentation must come from a legally qualified health professional stating why the parent is incapable of providing care and supervision for the child(ren), the days and hours needed for child care, and the date of incapacitation. Services shall not exceed 50 hours per week.

Family Size

The parent must provide the names of the parents and the names, gender, and birthdates of the children under 18 years old in the family that are living in the home. This information shall be documented on the **Confidential Application for Child Development Services and Certification of Eligibility (Form CCD26)** and used to determine family size. The number of children shall be documented by providing the following: birth certificates, court orders regarding child custody, adoption documents or foster care placement records, school or medical records, or any other reliable document that demonstrates the parent/child relationship or legal guardianship. *If there is a child custody agreement between both parents, a copy should be submitted for accurate approval in child care services.*

Self-Certification, Absent Parent and Single Parent Status

If only one parent has **signed** an application for enrollment and the information provided on the application indicates there is a second parent who has not signed the application. The parent who has signed the application shall self-certify the presence or absence of the second parent under penalty of perjury (Sections I and V Confidential Application for Child Development Services and Certification of Eligibility). The parent who has signed the application shall **not** be required to submit additional information documenting the presence or absence of the second parent.

Child's Exceptional Needs

The documentation for adjustment factors concerning exceptional needs in children aged 13 through 21 shall include the following:

- A copy of the portion of the active Individual Family Service Plan (IFSP) or the Individualized Education Program (IEP).
- A statement signed by a legally qualified professional that:
 - The child requires the special attention of adults in a child care setting.
 - Includes the name, address, license number, and telephone number of the legally qualified professional who is rendering the opinion.

Enrollment/Recertification Requirements

State regulations require a formal application and certification for child development services. Parents must sign a **Confidential Application for Child Development Services and Certification of Eligibility (Form CCD26)** and will receive written notice of eligibility no later than 30 days from the date the form was signed. All families shall be recertified for services no later than 50 calendar days following the last day of the certification period (12 or 24 months depending on

the program type), which starts with the day the agency's representative signed the last application for services. ***During a Pandemic, Epidemic and/or Government Shutdown, all recertification and modifications will take place via-mail, until further notice.***

Therefore, it is not required to report income changes between recertification, UNLESS your adjusted total family income exceeds eighty-five percent (85%) of State Median Income (SMI). It is the parent's responsibility to report to Alternative Payment Program, within 30 days, if income changes and it puts the family over the eighty-five percent (85%) of SMI.

A parent may at any time voluntarily request a reduction in their service level. A written request needs to be submitted and must include the days and hours of care needed per day, the effective date of a proposed reduction of service needed, and a written acknowledgment that the parent understands they may retain the current certified child care service need until the certified need has been recertified.

A parent may voluntarily request a reduction to their family fee by reporting a change such as family income, days and hours of care needed, or family size to assess the family fee. The parents must provide documentation to support the reported change. If eligible for a family fee reduction, the reduction will take effect on the first of the month following the receipt and approval of the required supporting documentation.

Missed Appointments/Late Arrivals or Incomplete Documentation

CAPMC APP must be notified prior to the appointment if a family is unable to keep an appointment. All CAPMC APP staff have voicemail available 24 hours per day seven (7) days a week for messages. **Failure to keep an appointment without proper notification may result in denial of services.** If you are more than 15 minutes late without prior notification, your appointment will be rescheduled. ***(During a Pandemic, Epidemic and/or Government Shutdown, all recertification and modifications will take place via-mail, until further notice.)*** Note: **ALL documentation requested by CAPMC APP must be completed prior to your appointment in blue or black ink and present at the time of your appointment. Failure to do so will result in rescheduling your appointment. After the third (3) missed appointment, your child care services will be denied, and a Notice of Action (NOA) Denial of Services will be issued.**

Parents Responsibility to Notify the Agency of Changes to Family Circumstances

It is your responsibility as a parent to report to CAPMC APP if any changes to your family circumstances affect your eligibility or need. These changes can include but are not limited to:

- Report increases to your family's income that exceeds the 85% SMI income thresholds within 30 days.
- ~~Provide a 2-week notice to your provider and agency when changing or ending child care services.~~ Before the last day of the certification period (12 or 24 months depending on the program type), please provide a two (2) week notice to both your child care provider and the agency if you intend to change or terminate child care services.
- ~~Use established child care hours as indicated on the Child Care Agreement.~~
- Report changes to your address and phone number.

You may also **voluntarily** report income or other changes in order to:

- Reduce your Family Fees.
- Increase your Family's Child Care service hours.
- Decrease your Family's Child Care service hours.

Reported changes that modify the reimbursement rate and/or family fee will take effect on the first of the month following the receipt and approval of the required supporting documentation.

Notice of Action (NOA)

A NOA is a legally binding document stating decisions and/or changes to the family's participation in the Program that is issued by an FSA, Supervisor, Program Manager or authorized CAPMC personnel.

Child Care Agreement

The *Child Care Agreement* is the certificate for services based on the certified need and authorized days and hours of child care. Reimbursement rates to the provider are based on the applicable monthly ceiling rate established by regulations for subsidized care. The Child Care Agreement must be signed, dated, and returned in order to reimburse your provider. Failure to do so will result in non-payment.

License-Exempt Provider Participation

Regulations require license-exempt providers to register with TrustLine within 30 days of submitting their application. CAPMC APP cannot issue payment until the provider registers. TrustLine is a registry that checks for criminal convictions and the Child Abuse Index for reports of substantiated child abuse. Your provider has been informed that TrustLine requires submission of an application and fingerprints.

A notice will be sent to your provider with information on how to register with TrustLine and the due date by which it must be done. If you wish to select another license-exempt provider not registered with TrustLine, that provider will have 30 calendar days to submit an application and fingerprints and become registered. The telephone number to reach TrustLine is (800) 822-8490.

Note: License-exempt providers who are the grandparent, aunt or uncle of the child(ren) in their care by blood, marriage, or court decree do not have to register with TrustLine to be paid for services. They must complete a *Declaration of Exemption from the Health & Safety Self-Certification*.

Family Fees

The CDSS prepares a family fee schedule based on family income and size, and hours of certified care for the month. The family fee applies to the cost of the family's child care, and it is considered the contribution to their child care services. Family fees are either a flat monthly full-time fee or a flat monthly part-time fee and are based on the hours of care certified for the month, income, and family size. Fees are based on the child who uses the most hours of care each month. Families with a certified need of less than 130 hours per month will be assessed a part-time fee, while families with a certified need of 130 hours or more per month will be assessed a full-time fee. The family fee is effective immediately upon the authorization of services based on initial enrollment or return from a temporary suspension of services. *Family Fees may be impacted during a Pandemic, Epidemic and/or Government Shutdown. Unless the current governor issues an Executive Order stating otherwise regarding Family Fees.*

The parent may **voluntarily** request a reduction to the family fee by reporting a change such as family income, days and hours of care needed, or family size to assess the family fee. The parents must provide documentation to support the reported change. If eligible for a family fee reduction, the reduction will take effect on the first of the month following the receipt and approval of the required supporting documentation. **No adjustments for excused or unexcused absences.**

Temporary Suspension of Services

A parent may **voluntarily** request a temporary suspension of services for a time period of no more than 12 weeks within their 12 month eligibility. The time of the gap in services, along with the family fee amount(s) will be indicated in the Notice of Action approving the change in service. **Please be Advised – An approved TSS does not guarantee a saved spot with your current child care provider. In addition, it is the parent’s responsibility to inform the current child care provider of their TSS.**

Fee Collection

The CDSS requires that the family pay their fees to the provider in advance. Therefore, the family is required to pay the provider directly within the first five (5) days of the month. Family fees are found on *NOAs, Attendance Sheets* and *Child Care Agreements*.

Providers are responsible for collecting family fees from the family. The provider will fill out the pre-printed receipt on the back of the child’s *Attendance Sheet (one receipt per family, written on the Attendance Sheet that has the fee amount printed on the front)* when the fee is collected from the parent. This receipt will show the total paid to the provider. Missing receipts will delay payment to the provider. When CAPMC APP processes reimbursement for a family with family fees, the fee amount will be deducted from the provider’s reimbursement check for the month (the fee and reimbursement can be found on the voucher printout).

If services are also being provided by another child care and development program in which the family is required to pay a family fee, a fee credit equal to the amount paid to the other provider may be granted. A receipt of payment to the other service provider must be submitted monthly and the parent will pay the difference. A credit will be applied to the family’s subsequent fee billing period and cannot be carried over beyond the subsequent fee-billing period. *Family Fees may be impacted during a Pandemic, Epidemic and/or Government Shutdown. Unless the current governor issues an Executive Order stating otherwise regarding Family Fees.*

Past due Family Fees

Termination of services can occur if family fees are not paid to the provider. CAPMC APP will contact families who fail to pay their family fees and issue a *NOA* stating a Delinquency of Family Fee. Fees are delinquent seven calendar days after due date. Services shall be terminated within two (2) weeks unless paid within two (2) weeks. A reasonable repayment plan will be accepted, and the parent must comply with the repayment plan to continue services.

Co-Payments

You may choose a provider regardless of the provider’s rate. However, when a provider’s rate and other allowable charges exceed the maximum subsidy amount, the parent is responsible for paying the provider the difference between the provider’s rate and the maximum subsidy amount. This shall be considered the parents’ co-payment. CAPMC APP is not responsible for collecting co-payments.

Attendance

Attendance Sheets for each child enrolled in subsidized child care are mailed to the child care provider before the beginning of each month. If the *Attendance Sheets* are not received, a temporary document, such as a blank *Attendance Sheet*, may be used to record the days and exact times the child(ren) were in and out of child care. Both the provider’s created *Attendance Sheet* and the one received from CAPMC APP must be retained by the provider. At the end of the month, both the parent and provider must sign and date the *Attendance Sheet(s)* under penalty of perjury, affirming the accuracy of the information. Once *Attendance Sheet(s)* are received, they cannot be modified by the provider. However, providers can submit modifications or invoices based on their own *Attendance Sheet*. Reimbursement will occur within 21 calendar days upon receipt of the complete *Attendance Sheet* or invoice for services. Any necessary adjustments to payments will be processed during the following months reimbursements.

Attendance Sheets or invoices will be processed for reimbursement without parents' signature when all the following conditions apply:

- The parent has not communicated with the provider for a minimum of seven (7) consecutive days.
- The provider has notified CAPMC APP (by phone or noted on the *Attendance Sheet*) of the parent's lack of communication in accordance with 5 CCR section 18066.5.
- CAPMC APP has documented the providers unsuccessful attempts to collect a signature.

Attendance Sign-In/Sign-Out Sheet

Parent or the provider are required to sign the child(ren) in and out at the exact clock time in, utilizing pen ink only, on the *Attendance Sheet* every day of care. The provider shall enter the exact clock time of arrival or departure for school age for split schedule children, such as before and after school. Reimbursement for services is dependent on the submission of evidence that care has been given, and this evidence is based on complete and accurate daily sign-in/sign-out *Sheets* that include the child's name. It is important to follow the attendance sign-in/sign-out requirements in order to keep services and payment reimbursement intact in a contract year (July 1–June 30).

CAPMC APP will issue a "Non-Compliance Notice - Incorrect Attendance Sheet and/or Non-Utilization of Certified Child Care Schedule" when the attendance sign-in/sign-out requirements are not met:

1. Parent will be contacted by phone as a first warning and the FSA will case note the conversation in the parent file.
2. Issue a Non-Compliance for the second incident.
3. Issue a Non-Compliance for the third incident and set-up an appointment for a one-on-one review with the parent and/or provider.
4. Issue a *Termination NOA* for the fourth incident and withheld reimbursement (this will be a case-by-case scenario based on the number of non-compliances issued).

Certified Hours

Parents must follow the contracted hours of the *Child Care Agreement* and the *NOA*. Providers will be reimbursed based on the hours of services provided that are broadly consistent with the certified hours of need stated in the *Child Care Agreement*; any change in the parent's approved level of service will be done through an *NOA*. Registration fees and other customary fees charged by the provider are payable up to the monthly maximum Regional Market Rate Ceiling (RMR). **Any other days, hours, late fees, evenings, weekends, vacations, holidays, or miscellaneous charges not certified by CAPMC APP are the parent's responsibility.** Please be Advised - Provider reimbursements may be impacted during a Pandemic, Epidemic and/or Government Shutdown. Unless the current governor issues an Executive Order stating otherwise regarding provider reimbursements.

Determination of Child Care Hours

Services are only available if the parent meets a Need Criteria that prevents a parent from providing care of and supervision of their child for a portion of the day. In a two-parent household, child care services can be approved when neither parent is available to care for the child.

Schedule Types

Schedule types are determined based on verified need documentation:

- Set schedule means the child care schedule is approved when the days and hours of a parent's need activity are the same each week or have a predictable cycle or pattern.

- Inconsistent and/or unstable hours of employment worked week-to-week (variable schedule). Variable child care schedules are authorized “up to” a maximum number of days and hours per week. The scheduled days and hours are determined by the week with the highest number of hours in the previous month.

Travel Time for Employment, Vocational Training, or an Educational Program

Parents may request child care for travel time to-and-from the location at which child care services are being provided to their place of employment, vocational training, or educational program location. APP will determine the travel time authorized based on the parents request and what amount is reasonable, based on the distance and the parents' method of transportation.

- Travel time for **employment** cannot be more than half of the daily hours authorized, or four hours per day, whichever is less.
- Travel time for **vocational training** or an **educational program** cannot be more than half of the weekly hours authorized for the training or educational program, or four (4) hours per day, whichever is less.

Sleep Time for Employment

Parents may request child care for sleep time if they work anytime between 10:00pm and 6:00am, not to exceed the number of hours authorized for employment and travel between those hours. Sleep time hours start immediately after the parents work shift. Sleep time will be less than or equal to the amount of hours worked between 10:00pm and 6:00am

Sleep time will **not** be provided when:

- There is a parent in the family available and capable of providing care for the family’s child(ren) during the time care is requested; or
- Supervision of the family’s child(ren) is (are) otherwise being provided by:
 - Scheduled time in a public educational program available to school-age child(ren)
 - A private school in which the child(ren) is (are) enrolled and attending; or
 - A time when a child(ren) is (are) receiving any other early learning and care services.

Policy on Utilization of Certified Child Care Schedule

When a parent has a day of non-utilization (i.e. their child is absent from child care on a certified day of child care) s/he shall **write the specific reason for the absence (illness, sick, best interest day, family emergency, etc....) on the Attendance Sheet under the appropriate date and column marked absence reason.**

When utilization of the certified child care schedule falls below the eighty percent (80%) threshold for broadly consistent, CAPMC APP will:

1. Issue a warning letter for the first incident.
2. Issue a warning letter for the second incident.
3. Issue a *Termination NOA* for the third incident (absences due to illness or emergency will be considered prior to issuing a *Termination NOA*).

Broadly Consistent Attendance Sheet and Certified Hours

CAPMC APP will review the attendance sheets to ensure that the days and hours of services provided are broadly consistent with the certified need for care as documented in the child care agreement and Notice of Action (NOA). If in review of the *Attendance Sheets* the hours of services are **not broadly consistent** with the parents certified need, the FSA shall inform the parent of the broadly consistent violation and the consequences and inform the parent of their right to voluntarily request a change to their service level.

The FSA shall explain the process of submitting a written request that includes the days and hours of care needed per day, the effective date of the proposed reduction of service, and a written acknowledgment that the parent understands that they may retain their current certified child care hours until the end of their approved certification date.

If there is a **notable pattern** in the utilization of care for each week of the month that is consistent with the child(ren)'s certified schedule, the FSA will contact the parent by phone. The parent will then be notified that the utilized hours reflected on the submitted monthly Attendance Sheets (minimum two (2) months), demonstrates the child care is being utilized on a Set-Schedule of (Pt-Hourly, Pt-Weekly, Pt-Monthly, Ft-Weekly, Ft-Monthly) and no longer as an Unpredictable/Variable Schedule. A *Child Care Agreement* and *Notice of Action* will be issued following the parent's approval via-phone and the FSA will case note the conversation in the family file.

Temporary Suspension of Services (TSS)

A parent may **voluntarily** request a temporary suspension of services for a time period of no more than 12 weeks within their 12-month eligibility. The time of the gap in services, along with the family fee amount(s) will be indicated in the Notice of Action approving the change in service. **Please be Advised – An approved TSS does not guarantee a saved spot with your current child care provider. In addition, it is the parent's responsibility to inform the current child care provider of their TSS.**

Submitting Attendance Sheets and Statement of Services for Reimbursement

Attendance records must be submitted by the third (3) day of the following month, no more than two (2) months after the due date for the month to be reimbursed, and no more than seven (7) days after the due date for the last month of the fiscal year (June). **Late reimbursements will not be made for the last month of the fiscal year.**

Attendance Sheets must be submitted by the third day of the following month. Reimbursement will occur within 21 calendar days upon receipt of the complete *Attendance Sheet* or invoice for services. If CAPMC APP is unable to make payment within 21 calendar days due to extenuating circumstances, the impacted provider will be notified within a reasonable timeframe. Extenuating circumstances include, but are not limited to, an emergency or payment system malfunction.

Resolution for overpayments and underpayments

Overpayments and underpayments will be identified through regular reconciliation of provider invoices with payment records. Providers will be promptly notified in writing of any identified overpayments or underpayments. This notification will include details of the discrepancy and the proposed resolution process. This will be resolved within the current fiscal year. Providers must provide written consent for the recovery of overpayments. This consent should specify the amount to be recovered and propose a repayment schedule. Overpayments may be recovered through deduction from future reimbursements or alternative repayment arrangements agreed upon by both parties.

Fraudulently Completed Attendance Sheets/Withheld Reimbursements

The parent and provider must sign at the end of the month in pen ink, attesting under the penalty of perjury, that the information on the attendance record or invoice is accurate. CAPMC APP will disallow reimbursement for the month of service in which inauthentic *Attendance Sheets* are submitted and the parent will be responsible for payment to the provider. The parent shall receive a *NOA* informing them of the decision to withhold reimbursement to their provider and possible termination for misrepresentation or fraud. The provider will also be informed of the decision to withhold reimbursement. *If a mistake is made on the Attendance Sheet, lineout the mistake, correct and initial. Please do not scratch out or use whiteout.*

Provider Holidays/Facility Non-Operational Days

CAPMC APP will provide payment for ten non-operational days documented on the licensed facility's contract and policy statement in a contract year (July 1-June 30). Examples of commonly chosen non-operational days are federal holidays

and provider vacations. CAPMC APP does not provide reimbursement when the provider is unavailable to provide services (e.g. due to illness or any day elected by the provider to not provide services that exceeds the 10 non-operational days). Families with a family fee will continue to pay their provider, no exceptions. Families with no fees will need to contact their FSA for additional information. Please be Advised - Provider reimbursements may be impacted during a Pandemic, Epidemic and/or Government Shutdown. Unless the current governor issues an Executive Order stating otherwise regarding provider reimbursements.

Provider Policies/Parent and Provider Relationship

Each Child Care Provider sets policies for their program, not CAPMC APP. It is the parent's responsibility to obtain these policies and follow them to establish effective communication with the provider.

Notice to Self-Terminate/Change Providers

Parents must notify CAPMC APP if they wish to self-terminate from the program or would like to change providers. The parent is responsible for giving their current provider a minimum of two (2) week notices of said change. This notice will be the responsibility of the parent and not the agency. Services with the current provider will terminate immediately following the change of service to parent's request and the two (2) weeks' notice and/or reimbursement will no longer be the responsibility of CAPMC APP; it will be parent's responsibility.

Commencing July 1, 2020, APPs shall provide notice to a child care provider of a change in reimbursement amounts for child care services, a change in the hours of care, rates, or schedules, an increase or decrease in parent fees, or a termination of services. For purposes of this section, the notice shall occur electronically, if requested by the child care provider, or via the United States Postal Service. APP shall provide the notice, as well as the effective date of any changes described above, on the same day a notice of action is issued to a family. *AB2883, Sec.3 8227.7*

Families shall not change providers more than once in a contract year unless the change is due to serious and compelling reasons. The Program Manager, on a case-by-case basis, will consider requests for more than one (1) change per year.

Multiple Providers

Parents are limited to one (1) provider except under the following conditions:

1. The primary provider is unable to accommodate all hours of certified care;
2. One (1) provider is a licensed center for the purpose of providing preschool; or
3. The child is ill or the child's primary provider is closed (in this case an eligible alternate provider can be reimbursed by CAMPC APP for services provided and is **limited to 10 days per child per fiscal year**).
 - o Payment may be extended beyond the 10 days if the parent provides a physician verification. (Extension only applies when the child is ill)

*An alternate provider is only approved when the regular provider has a paid day of non-operation in their contract and/or the child is ill, and a parent has to obtain an alternate provider to meet the certified need for child care services. *5 CCR 18076.2*

Contractors may reimburse more than one provider per child when the hours of operation of the primary provider cannot accommodate the certified need for child care services. *5 CCR 18076.*

Provisional Child Care Provider

- A family may select a provisional child care provider as defined in Implementation Guidance, *Section 18078 (o)*, if there is an immediate need for child care.
- A family may use a provisional child care provider during a single 30 calendar day period. The first day on which child care services are provided marks the beginning of this 30-day period.
- At the conclusion of 30 consecutive calendar days, the provisional child care provider must become Trustline Registered and, if so, may be reimbursed for child care services performed or the parent shall select an eligible provider who can meet the parents need for care.

Abandonment of Care Policy

Providers must drop the parent after seven (7) consecutive days of non-attendance when there has been no contact with the parent. These days of non-attendance will be considered unexcused, and the family will be processed based on the policies for non-utilization found on page 12. *Except for children who are recipients of Child Protective Services (CPS) or At-Risk of abuse, neglect or exploitation, excused absences shall be limited to ten (10) days during the contract period.*

When the family has not communicated with the provider for seven (7) consecutive days (unexcused absence) without notifying the provider of the reason for the lapse in service usage. The following will take place:

- The provider must notify CAPMC APP when there has been no communication from the family for seven (7) consecutive days.
- CAPMC APP will then attempt to contact the parent with the current contact information in the family file. Various methods of communication will consist of but are not limited to contacting the family by phone, non-compliance notices, email, or text message (if consented by the parent).
 - At least one (1) communication attempt will be documented either in writing or electronically.
- The parent will be informed in writing that failure to communicate with either CAPMC APP or provider may lead to termination of services.
- If there has been no communication with either party for a total of 30 consecutive calendar days, CAPMC APP will issue a Notice of Action for Termination of Services due to the abandonment of care.

Regarding excused absences, they are defined as either a family emergency or time spent with a non-custodial parent or other relative as mandated by a court order. A copy of the court order must be provided to CAPMC APP at initial certification/recertification.

Causes for Termination

Termination from the Program may occur for the following reasons:

- Failure to meet subsidy requirements.
- Knowingly misrepresenting eligibility.
- Providing incorrect or inaccurate information to obtain a benefit that the parent would otherwise not be entitled to receive.
- Violating CAPMC's policies and procedures.
- Federal and/or state contract funding ends; or
- Non-utilization of certified child care schedule resulting in three or more non-compliances issued (this will be a case-by-case scenario based on the number of non-compliances issued).

Family Rights and Grievance Process

Parental Choice

CAPMC APP is a parental choice subsidy program which supports the parent's rights and responsibility to select the most appropriate child care provider for their child(ren). State funding prohibits payment to providers whose services offer non-secular instruction or worship; therefore, parents who chose a facility offering religious instruction or worship may only do so if funding is available from federal sources.

Parents Rights/Family Child Care Homes and Child Care Centers

Parents/Authorized Representatives have the right to:

1. Enter and inspect the family child care home or child care center without notice whenever child(ren) are in care.
2. File a complaint against the licensee with the Community Care Licensing Office.
Complaint Hotline: (844) 538-8766
3. Review the licensee's public file kept by the Community Care Licensing Office.
Web Facility Search: <https://www.cclcd.dss.ca.gov/carefacilitysearch/>
4. Review reports of licensing visits and substantiated complaints against the licensee made during the last three (3) years at the family child care home or child care center.
5. Complain to the Community Care Licensing Office and inspect the family child care home or child care center without discrimination or retaliation against them or their child(ren).
6. Be notified and receive, from the licensee, a written notice that lists the name of any person not allowed in the family child care home or child care center while children are present. (NOTE: This notice is only required when the Department of Social Services has excluded someone in writing from the family child care home or child care center on or after January 1, 2001).
7. Make a written request that the non-custodial parent is not allowed to visit their child(ren) or take their child(ren) from the family child care home or child care center when a certified copy of a court order has been shown.
8. Receive from the licensee the name, address, and telephone number of the local licensing office.

Licensing Office Name: Community Care Licensing Fresno Regional Office
Licensing Office Address: 1314 E Shaw Ave., Fresno, CA 93710
Licensing Office Telephone: (559) 243-8080

9. Upon request, be informed by the licensee of the name of any adult granted a criminal record exemption, and the type of association to the family child care home or child care center (the name of the person may also be obtained by contacting the Community Care Licensing Office).
10. Receive from the licensee the *Caregiver Background Check Process* form.
11. Be informed, by the licensee, whether the facility has liability insurance or bond that covers injury to clients due to the negligence of the licensee or employees of the facility.

Note: California state law states that the licensee may deny access to the family child care home or child care center to a parent/authorized representative if the behavior of the parent/authorized representative poses a risk to child(ren) in care.

For the Department of Justice Registered Sex Offender database go to www.meganslaw.ca.gov

Uniform Complaint Procedure

Individuals, agencies, organizations, students and interested third parties have the right to file a complaint regarding the Community Action Partnership of Madera County's alleged violation of federal and/or state laws. This includes allegations of unlawful discrimination (ED Code, sections 200 and 220 and Government Code, Section 11135) in any program or activity funded directly by the State or receiving federal or state financial assistance.

Complaints must be signed and filed in writing with the **California Department of Social Services**.

California Department of Social Services
Child Care and Development Division
Attn: Appeals Coordinator
744 P Street, MS 9-8-351
Sacramento, CA 95814
Phone: (916) 322-6233 Fax: (916) 654-1048
Email: CCDDAppeals@cdss.ca.gov

If the complainant is not satisfied with the final written decision of the California Department of Social Services, remedies may be available in federal or state court.

Complaint or Grievance against a CAPMC Staff Member

First attempt to resolve the issue within 30 days of the incident by discussing it with the FSA or CAPMC APP&RR staff person involved. If the issue is not resolved, request a *CAPMC Parent/Community Complaint Form* and submit it within seven (7) days to the staff member's Supervisor, who will schedule a meeting to discuss the matter and submit a written resolution. If a satisfactory resolution is not reached, request a meeting with the Program Manager. The Program Manager will issue a written response to the complainant within five (5) days after the meeting.

If a satisfactory resolution has not been reached, request a meeting with the Executive Director within five (5) days after the meeting with the Program Manager, stating the problem and desired solution. The complainant will receive a written response within 10 days of the meeting. If a satisfactory solution is still not met, the complainant has five (5) days after receipt of the Executive Director's decision to request a hearing with the Executive Committee of the CAPMC Board of Directors. Upon conclusion of the hearing, the Executive Committee will issue a written response. If the complainant is still dissatisfied, s/he may request the issue be brought to the full CAPMC Board of Directors by submitting a written request to the Chairperson of the Board within three (3) days of receiving the Executive Committee's decision. The Board of Directors will hear the complaint and render a final decision within five (5) days of the hearing.

Report Concerns

Any incident that is suspected to be a breach of ethics or in violation of federal, state, or local laws should be reported immediately to one of the following sources:

- Executive Director (559) 675-5749
- Ethics Hotline (877) 453-7244 or reportlineweb.com/capmc

The Ethics Hotline is available 24 hours a day, seven (7) days a week. Translators are available. The Ethics Hotline is operated by an independent company that specializes in handling calls of this type.

Complaints against Licensed Providers

Parents may contact R&R to register a complaint. The complaint will be documented in writing and the parent will be advised to contact the California Department of Social Services Community Care Licensing Complaint Hotline at (844) 538-8766 or call the office in Fresno, California; R&R will be notified if the complaint is substantiated.

Complaints against License-Exempt Providers

Parents may make complaints of non-compliance of health and safety issues against license-exempt providers by providing a written and signed complaint. CAPMC APP will inform the provider of the complaint and advise the provider of their right to a written rebuttal. CAPMC APP will notify the parent and provider that child care payments will cease in two (2) weeks unless both the parent and provider submit a written declaration stating that the health and safety deficiency is complete.

Appealing a *Notice of Action (NOA)*

Families have the right to appeal decisions made by CAPMC APP that affect their participation in the Program. The procedure for the appeal process is detailed on the back of every *NOA* and must be followed to protect appeal rights.

Please visit <https://www.cdss.ca.gov/inforesources/child-care-and-development/parent-resources/parent-appeals> to read the *Parent Appeal Information Pamphlet*. In addition, a *Parent Appeal Information Pamphlet* is given to the parents at the time of their initial enrollment process.

Parents have the right to have an authorized representative (AR) act on their behalf at the local appeal hearing. An authorization form to request an AR is available and should be submitted with the appeal request, but any written or oral notice that an AR has been duly authorized by a parent is sufficient. Services can continue throughout the appeal process.

To appeal to an *NOA*, file a request for a hearing within 14 days from the date the *NOA* was received. The request can be made in writing, in person, by faxing (559) 661-0764 or by emailing appchildcare@maderacap.org. Notification of the time and place of the appeal hearing will be sent out within 10 calendar days; the appellant and/or their AR are required to attend the hearing. Failing to attend results in the abandonment of the right to appeal (**postponement of an appeal hearing with prior notice is allowed one (1) time**). A written decision will be sent to the appellant within 10 calendar days following the hearing.

If the appellant disagrees with the written decision, s/he has 14 days to appeal to the CDSS. The CDSS will issue a written decision within 30 calendar days after receiving the appeal. If the appeal is denied, services will terminate immediately on the date of the written notice.

Confidentiality

Authorized CAPMC APP representatives, fiscal auditors, legal/court ordered persons; CDSS and CDSS are allowed access to family and child care provider files. The disclosure or release of any information that pertains to child care services is restricted to purposes directly related to the administration and delivery of our services. FSAs and other CAPMC/APP staff members do not provide information to outside sources.



SECTION II : PROVIDER INFORMATION & RESPONSIBILITIES

CAPMC APP requires that all child care providers participating with eligible parents in our program submit documentation before payment for child care services can begin. Therefore, if a parent begins using child care services before an authorized start date for subsidized payment or uses services after services have been terminated, the parent is responsible for payment of child care services.

Licensed Provider Participation Requirements

Licensed providers are required to:

- Provide a copy of their child care license(s) from California Department of Social Services Community Care Licensing Office and adhere to all CCL requirements.
- Provide a statement of current fees and/or rates that are normal, customary, and charged to all families (private pay and subsidized). **Updated rates shall be effective within 60 days of submission of the updated information pursuant to subdivision (c) and (e). (Assembly Bill 131, Welfare Institution Code (WIC) 10228 (f)).**
- Provide a copy of their contract and policies; contracts can be updated once per contract year (July 1-June 30) during their annual re-certification date. Policies can be modified once per contract year (July 1 – June 30). The policies modification will become effective following the new month when the new contract has been received. *A 30-day notice is required for any modifications for the FSA to make changes to the family file if requested by the parent/provider.*
- Provider contract must have the days & hours of operation along with the scheduled vacation days and list of holidays per contract year (July 1–June 30).
- Provide a copy of their valid California Driver License or state issued ID bearing the current address being used for child care.
- Provide proof of residence. *Acceptable documents: Rental/Lease Agreement, Utility Bill and/or Bank Statement. Documents must be current within the last 30 days. No advertisement or “junk mail” will be accepted.*
- **Provider must complete and sign the W-9 form with either their social security number or Federal Employer Identification Number (FEIN).**
- Allow CAPMC APP/R&R staff to make site visits to the home or facility during any contract hours.
- Complete and sign a tax identification form (W-9) annually.
- Read the CAPMC APP - Parent & Provider Handbook of Written Policies submit a signed and dated *Acknowledgement of Receipt of Written Polices.*

- Operate the child care facility on a non-discriminatory basis, providing equal treatment and services without regard to race, color, creed, religion, sex, national origin, ancestry, physical or mental disability or any other category prohibited by law.
- Allow parents unlimited access to their child(ren) during normal hours of operation and whenever children are in care.
- If the Provider is currently employed and/or attending school. The Provider must submit a completed *Employment Verification form and/or Vocational Training (school) form* provided by CAPMC APP/R&R in order to demonstrate availability for subsidized child care services.

License-Exempt Provider Participation Requirements

A license-exempt provider is defined as a family member or friend 18 years of age or older in good health who cares for child(ren) from only one (1) family other than their own. Exempt providers are required to:

- Provide a copy of their valid California Driver License or state issued ID bearing the current address being used for child care.
- Provide proof of residence. *Acceptable documents: Rental/Lease Agreement, Utility Bill and/or Bank Statement. Documents must be current within the last 30 days. No advertisement or "junk mail" will be accepted. *If residing with someone, a handwritten, signed, and dated Declaration Statement from homeowner stating current family's address along with proof of residence will need to be submitted. (Ex. Utility Bill, PG&E Bill, etc...*
- Complete and sign a *Health and Safety Self Certification Form (CCP1 or CCP4)*.
- **Provider must complete and sign the W-9 form with their social security number.**
- Complete and sign a tax identification form (W-9) annually.
- Obtain a current *CPR/First Aid Certificate* within 30 days of enrollment.
- Have a current working phone number for contact and emergencies.
- Allow CAPMC APP/R&R staff to visit the home or facility any time during contract hours.
- Allow parents unlimited access to their child(ren) during normal hours of operation and whenever child(ren) are in care.
- If the Provider is currently employed and/or attending school. The Provider must submit a completed *Employment Verification form and/or Vocational Training (school) form* provided by CAPMC APP/R&R in order to demonstrate availability for subsidized child care services.

- Read the CAPMC APP/R&R - Parent & Provider Handbook of Written Policies submit a signed and dated *Acknowledgement of Receipt of Written Polices*.

Complete the TrustLine fingerprint background check and receive clearance **within 30 days** after submitting the application. CAPMC APP cannot issue payment until the provider has registered. TrustLine is a registry that checks for criminal convictions and the Child Abuse Index for reports of substantiated child abuse. (For relative exemption, see “Note: License-Exempt...” below).

Information on how to get fingerprinted and the due date by which it must be done will be provided during the provider enrollment appointment. The telephone number to reach TrustLine is (800) 822-8490.

Note: License-exempt providers who are the grandparent, aunt or uncle of the child(ren) in their care by blood, marriage, or court decree do not have to register with TrustLine to be paid for services, must complete a *Declaration of Exemption from the Health & Safety Self-Certification form*.

Provider Exclusions

A provider **cannot** be someone who is:

- The guardian of the child who is enrolled in the program.
- Living in the same home as another provider who is receiving payment from the program for child care services.
- Under 18 years of age.
- Does not have all approved forms.
- Does not or cannot give all forms or documents to complete the Provider Participation enrollment process.
- Has had his/her child care license suspended or revoked but wants to continue as a license-exempt provider.
- Denied Trustline
- Does not have the time available to commit to the parent’s full certified need, due to another job, school or other commitments that may prevent the individual from being physically present as the child’s child care provider.

Termination of payment will occur if CAPMC APP receives notification from Community Care Licensing (CCL), that a facility’s license has been revoked or received a Temporary Suspension Order (TSO). No payment will be made for care after the effective date of the CCL action. APP will notify the provider and families (utilizing the provider) in writing and no payment will be made beyond the effective date of CCL license suspension or revocation and the reason for termination.

Child Care Agreement Certificate for Services

A *Child Care Agreement* is issued after the parent and provider have completed the requirements. The *Child Care Agreement is the Certificate for Services* based on the certified need and authorizes the days and hours of child care. Reimbursement rates are based on certified need not to exceed the provider’s full-time monthly rate or applicable monthly ceiling rate established by regulations for subsidized care, whichever is lower. Updates to the *Child Care Agreement* may occur periodically due to modifications in the parents’ schedule and need. In such cases, providers will be issued an update to the *Agreement* and the parents will be issued a *NOA* indicating the change. The *Child Care Agreement* must be signed, dated and returned in order to reimburse the provider. Failure to do so will result in non-payment.

Attendance

Attendance Sheets for each child enrolled in subsidized child care are mailed to the child care provider before the beginning of each month. If the *Attendance Sheets* are not received, a temporary document, such as a blank *Attendance Sheet*, may be used to record the days and exact times the child(ren) were in and out of child care. Both the provider's created *Attendance Sheet* and the one received from CAPMC APP must be retained by the provider. At the end of the month, both the parent and provider must sign and date the *Attendance Sheet(s)* under penalty of perjury, affirming the accuracy of the information. Once *Attendance Sheet(s)* are received, they cannot be modified by the provider. However, providers can submit modifications or invoices based on their own *Attendance Sheet*. Reimbursement will occur within 21 calendar days upon receipt of the complete *Attendance Sheet* or invoice for services. Any necessary adjustments to payments will be processed during the following months reimbursements.

Attendance Sign-In/Sign-Out Sheet

Parents, or the provider are required to sign the child(ren) in and out at the exact clock time in, utilizing pen ink only, on the *Attendance Sheet* every day of care. The provider shall enter the exact clock time of arrival or departure for school age for split schedule children, such as before and after school. Reimbursement for services is dependent on the submission of evidence that care has been given, and this evidence is based on complete and accurate daily sign-in/sign-out *Sheets* that include the child's name. It is important to follow the attendance sign-in/sign-out requirements in order to keep services and payment reimbursement intact in a contract year (July 1 – June 30).

CAPMC APP will issue a "Non-Compliance Notice - Incorrect Attendance Sheet and/or Non-Utilization of Certified Child Care Schedule" when the attendance sign-in/sign-out requirements are not met:

1. The parent will be contacted by phone as a first warning and the FSA will case note the conversation in the parent file.
2. Issue a Non-Compliance for the second incident.
3. Issue a Non-Compliance for the third incident and set-up an appointment for a one on one review with the parent and/or provider.
4. Issue a *Termination NOA* for the fourth incident and withheld reimbursement (this will be a case-by-case scenario based on the number of non-compliances issued).

Certified Hours

Parents must follow the contracted hours of the *Child Care Agreement* and the *NOA*. Providers will be reimbursed based on the hours of services provided that are broadly consistent with the certified hours of need stated in the *Child Care Agreement*; any modification in the parent's approved level of service will be done through an *NOA*. Registration fees and other customary fees charged by the provider are payable up to the monthly maximum Regional Market Rate Ceiling (RMR). **Any other days, hours, late fees, evenings, weekends, vacations, holidays, or miscellaneous charges not certified by CAPMC APP are the parent's responsibility. Please be Advised - Provider reimbursement may be impacted during a Pandemic, Epidemic and/or Government Shutdown. Unless the current governor issues an Executive Order stating otherwise regarding provider reimbursement.**

Policy on Utilization of Certified Child Care Schedule

When a parent has a day of non-utilization (i.e. their child is absent from child care on a certified day of child care) s/he shall **write the specific reason for the absence (*illness, sick, best interest day, family emergency, etc....*) on the *Attendance Sheet* under the appropriate date and column marked *absence reason*.**

When utilization of the certified child care schedule falls below the eighty percent (80%) threshold for broadly consistent, CAPMC APP will:

1. Issue a warning letter for the first incident.
2. Issue a warning letter for the second incident.
3. Issue a *Termination NOA* for the third incident (absences due to illness or emergency will be considered prior to issuing a *Termination NOA*).

Broadly Consistent Attendance Sheet and Certified Hours

CAPMC APP will review the attendance sheets to ensure that the days and hours of services provided are broadly consistent with the certified need for care as documented in the child care agreement and Notice of Action (NOA). If in review of the *Attendance Sheets* the hours of services are **not broadly consistent** with the parents certified need, the FSA shall inform the parent of the broadly consistent violation and the consequences and inform the parent of their right to voluntarily request a change to their service level.

The FSA shall explain the process of submitting a written request that includes the days and hours of care needed per day, the effective date of the proposed reduction of service, and a written acknowledgment that the parent understands that they may retain their current certified child care hours until the end of their approved certification date.

If there is a **notable pattern** in the utilization of care for each week of the month that is consistent with the child(ren)'s certified schedule, the FSA will contact the parent by phone. The parent will then be notified that the utilized hours reflected on the submitted monthly Attendance Sheets (minimum two (2) months), demonstrates the child care is being utilized on a Set-Schedule of (Pt-Hourly, Pt-Weekly, Pt-Monthly, Ft-Weekly, Ft-Monthly) and no longer as an Unpredictable/Variable Schedule. A *Child Care Agreement* and *Notice of Action* will be issued following the parents approval via-phone and the FSA will case note the conversation in the family file.

Fraudulently Completed Attendance Sheets Withheld Reimbursements

The parent and provider must sign at the end of the month in pen ink, attesting under the penalty of perjury, that the information on the attendance record or invoice is accurate. CAPMC APP will disallow reimbursement for the month of service in which inauthentic *Attendance Sheets* are submitted and the parent will be responsible for payment to the provider. The parents shall receive a *NOA* informing them of the decision for a reduction of reimbursement to their provider and possible termination for misrepresentation or fraud. The provider will also be informed of the decision to withhold reimbursement. *If a mistake is made on the Attendance Sheet, line out the mistake, correct and initial. Please do not scratch out or use whiteout.*

Provider Holidays/Facility Non-Operational Days

CAPMC APP will provide payment for 10 non-operational days documented on the licensed facility's contract and policy statement in a contract year (July 1-June 30). Examples of commonly chosen non-operational days are federal holidays and provider vacations. CAPMC APP does not provide reimbursement when the provider is unavailable to provide services (e.g. due to illness or any day elected by the provider to not provide services that exceeds 10 non-operational days).

Provider Policies/Parent & Provider Relationship

Each Child Care Provider sets policies for their program, not CAPMC APP. It is the parent's responsibility to obtain these policies and follow them to establish effective communication with the provider.

Notice of Termination/Change in Providers

Parents must notify CAPMC APP if they wish to self-terminate from the program or would like to change providers. The parent is responsible for giving their current provider a minimum of two (2) weeks' notice of said change. This notice will be the responsibility of the parent and not the agency. Services with the current provider will terminate immediately following the change of service to parent's request and the **two (2) weeks' notice and/or reimbursement will no longer be the responsibility of CAPMC APP; it will be parent's responsibility.**

Commencing July 1, 2020, APPs shall provide notice to a child care provider of a change in reimbursement amounts for child care services, a change in the hours of care, rates, or schedules, an increase or decrease in parent fees, or a termination of services. For purposes of this section, the notice shall occur electronically, if requested by the child care provider, or via the United States Postal Service. APP shall provide the notice, as well as the effective date of any changes described above, on the same day a notice of action is issued to a family. *AB2883, Sec.3 8227.7*

Abandonment of Care Policy

~~Providers must drop the parent after seven (7) consecutive days of non-attendance when there has been no contact with the parent. These days of non-attendance will be considered unexcused and the family will be processed based on the policies for non-utilization found on page 12. Except for children who are, recipients of Child Protective Services (CPS) or At Risk of abuse, neglect or exploitation, excused absences shall be limited to ten (10) days during the contract period.~~ When the family has not communicated with the provider for seven (7) consecutive days (unexcused absence) without notifying the provider of the reason for the lapse in service usage. The following will take place:

- The provider must notify CAPMC APP when there has been no communication from the family for seven (7) consecutive days.
- CAPMC APP will then attempt to contact the parent with the current contact information in the family file. Various methods of contacting will consist of but are not limited to contacting the family by phone, non-compliance notices, email, or text message (if consented by the parent).
 - At least one (1) communication attempt will be documented either in writing or electronically.
- The parent will be informed in writing that failure to communicate with either CAPMC APP or provider may lead in termination of services.
- If there's been no communication with either party for a total of 30 consecutive calendar days, CAPMC APP issues a Notice of Action for Termination of Services due to abandonment of care.

Regarding excused absences, they are defined as either a family emergency or time spent with a non-custodial parent or other relative as mandated by a court order. A copy of the court order must be provided to CAPMC APP at initial certification/recertification.

Payment/Reimbursement Procedures

Providers are chosen by enrolled families to provide child care services. Providers contracted with CAPMC APP are **not employees** of CAPMC and are responsible for their own tax reporting and liabilities (CAPMC will issue a *1099 Miscellaneous Income Statement* for all payments totaling \$600.00 or more in a tax year).

Reimbursement Rates

Providers are paid based on the rates they charge parents who pay privately (non-subsidized parents). It is fraudulent to charge different rates to parents on subsidized child care programs and to parents who pay privately. A Family/Child is eligible for reimbursement when they are certified for child care services. Child care reimbursement is based on the need for care, the child's age, the type of care, and the pay rate based on the Regional Market Rate (RMR) and the required provider invoice; in which the lesser of the two will be paid out. The Statement of Services will be reviewed with the authorized Child Care Agreement hours of care and the Attendance Sheets. Providers may be reimbursed the amount requested in their Statement of Services, up to the maximum which is allowed by the State.

Additional information for the Regional Market Rate Ceiling (RMR) and/or the California Code of Regulations can be found in the following websites:

<http://government.westlaw.com/linkedslice/default.asp?SP=CCR-1000> Select: Title 5.

Education>Division 1. California Department of Education>Chapter 19. Child Care and Development Programs>Subchapter 2.5. Utilization of the Regional Market Rate Ceiling>Article 1. General Provisions

<https://rcscm.dss.ca.gov> Select the following: “Effective”: choose the current year services are being provided/ “County”: the county in which you are providing services. www.maderacap.org Select: Resources>Forms>Regional Market Rate.

A copy of the RMR can be requested from the program or accessed from our website.

Assembly Bill 131 – Welfare Institution Code (WIC) 10228 (f) - Each licensed child care provider may alter rate levels for subsidized children, as needed, and shall provide the Alternative Payment Program and Resource & Referral agency with the updated information pursuant to subdivisions (c) and (e), to reflect any changes. Updated rates shall be effective within 60 days of submission of the updated information pursuant to subdivision (c) and (e).

Method to Determine Applicable Reimbursement Ceiling on the Child Care Agreement for Licensed Providers

5 CCR § 18075. Reimbursement Rate Categories

- **Hourly**, which shall only be used for the following:
 - A child’s certified need for child care or fewer than **25 hours per week and fewer than five hours on any day**; or
 - An unscheduled but documented need of fewer than **five (5) hours per occurrence**, such as the parents need to work overtime, that exceeds the certified need for child care.
- **Daily**, which shall only be used for the following:
 - A certified need for child care of **six (6) hours or more per day**; or
 - An unscheduled but documented need of **six (6) hours or more per occurrence**, such as the parents need to work on a regularly scheduled day off, that exceeds the certified need for child care.
- **Part-time weekly**, which shall only be used when a certified need for child care **less than 30-25 hours** per week.
- **Full-time weekly**, which shall only be used when a certified need for child care is **30 25 hours or more** per week.
- **Part-time monthly**, which shall only be used for the following:
 - A certified need for child care for **fewer than 25 hours per week** and that need occurs in every week of the month; or
 - A certified need for child care averages **fewer than 25 hours per week** when calculated by dividing the total number of hours of need in the month by 4.33, and that need occurs in every week of the month.
- **Full-time monthly**, which shall be used for the following:
 - A certified need for child care of **25 hours or more per week** and that need occurs in every week of the month; or
 - A certified need for child care averages **25 hours or more per week** when calculated by dividing the total number of hours of need in the month by 4.33, and that need occurs in every week of

Reimbursement for License – Exempt Providers

Hourly Rate up to Full-time Monthly maximum.

Evening/Weekend Rate for Licensed Providers

Rate adjustments for after hour care apply to license providers when “after hour” services include 10% or more of the total hours of care used, when services occur between the hours of 6:00 pm and 6:00 am and/or weekends.

Submitting Attendance Sheets and Statement of Services for Reimbursement

Attendance Sheets and Statement of Services are the primary source for child care reimbursement and auditing purposes. Attendance records must be submitted by the third (3) day of the following month, no more than two (2) months after the due date for the month to be reimbursed, and no more than seven (7) days after the due date for the last month of the fiscal year (June). Late reimbursements will **not** be made for the last month of the fiscal year. Attendance Sheets and the Statement of Services can be faxed to (559) 661-0764, delivered to CAPMC APP during business hours Monday – Friday 8:00am – 5:00pm, delivered to the APP drop box located outside on the east side of the CAPMC building, or mailed to 1225 Gill Ave, Madera, CA 93637 (must be postmarked before or on the 3rd of the following month of service). **(If Attendance Sheets and Statement of Services are faxed or emailed, originals MUST be mailed and received for payment to be processed on time.)**

Reimbursement for Provider

Submission of request for reimbursement must include Attendance Sheets and Statement of Services for each child served. Attendance Sheets must be completed, signed, and dated in ink at the bottom of the form with full signature by the Parent and Provider. The Statement of Services must be sent to the CAPMC APP Office with Attendance Sheets and include the following:

- A. Provider and/or Business Name
- B. Contact information
- C. Service month and year
- D. First and last name of the family
- E. First and last name of the child
- F. Age of the child
- G. Number of units
- H. Type of Unit/Care Type
- I. Rate per Unit
- J. Grand total you are invoicing the family.

You are welcome to use the Statement of Services located behind our pre-printed attendance sheets.

Statement of Services - For Provider Use

# of Units	*Type of Unit/**Care Type	***Rate per Unit	Total

*Type of Unit: hour, day, week, month, annual

**Care Type: holiday, registration fee, drop notice fee, evening, or weekend adjustment, etc.

***Rate per Unit: dollar and cents amount Grand Total \$ _____

Payment Schedule and Late Attendance

Payment is made once a month on the third (3) Friday via mailed check or direct deposit (pay dates can be found on the *Attendance Sheet & Payment Schedule* available at the office or on our website). CAPMC APP recommends that providers choose direct deposit for their reimbursement for optimum timeliness and safety of funds; checks cannot be picked up at the CAPMC office.

Payment is processed monthly on the third (3) Friday via mailed check or direct deposit (pay dates available on the *Attendance Sheet* and *Payment Schedule*, available at the office or on our website at www.maderacap.org). CAPMC APP recommends providers to choose direct deposit for optimal timeliness and secure reimbursements. Checks cannot be collected from the CAPMC office.

Reimbursement will occur within 21 calendar days upon receipt of the complete *Attendance Sheet* or invoice for services. If CAPMC APP is unable to make payment within 21 calendar days due to extenuating circumstances, the impacted provider will be notified within a reasonable timeframe. Extenuating circumstances include, but are not limited to, an emergency or payment malfunction.

Please note that any late *Attendance Sheets* submitted after the end of the fiscal year (July 1 – June 30), will not be eligible for reimbursement.

Funding Sources

CAPMC APP reserves the right to alter the *Attendance Sheet* and *Payment Schedule* in the event of a delayed allocation from its funding source. CAPMC APP will notify parents and providers in case of such an event.

Lost Checks

Payment will be stopped and CAPMC will reissue checks 10 working days after the date the checks were originally mailed.

Inaccurate Reimbursement

In case of an inaccurate reimbursement, please contact the family's FSA. The payment will be audited, and any necessary adjustments will be issued on the next payment schedule. *Payment is made once a month on the third Friday via mailed check or direct deposit as noted under Payment Schedule.*

~~Late Attendance Sheets~~

~~*Attendance Sheets* received by CAPMC APP after the due date will be considered late and will not be processed for payment until the pay date for the following month according to the *Attendance Sheet & Payment Schedule*.~~

~~**Late payments will not be reimbursed for the last month of the fiscal year (July 1 – June 30).**~~

Family Fees

The CDSS prepares a family fee schedule based on family income and size, and hours of certified care for the month. The family fee applies to the cost of the family's child care, and it is considered the contribution to their child care services.

Family fees are either a flat monthly full-time fee or a flat monthly part-time fee and are based on the hours of care certified for the month, income, and family size. Fees are based on the child who uses the most hours of care each month. Families with a certified need of less than 130 hours per month will be assessed a part-time fee, while families with a certified need of 130 hours or more per month will be assessed a full-time fee. The family fee is effective immediately upon the authorization of services based on initial enrollment or return from a temporary suspension of services.

The parent may **voluntarily** request a reduction to the family fee by reporting a change such as family income, days and hours of care needed, or family size to assess the family fee. The parents must provide documentation to support the reported change. If eligible for a family fee reduction, the reduction will take effect on the first of the month following the receipt and approval of the required supporting documentation. **No adjustments for excused or unexcused absences.**

Temporary Suspension of Services (TSS)

A parent may **voluntarily** request a temporary suspension of services for a time period of no more than 12 weeks within their 12-month eligibility. The time of the gap in services, along with the family fee amount(s) will be indicated in the Notice of Action approving the change in service. **Please be Advised – An approved TSS does not guarantee a saved spot with your current child care provider. In addition, it is the parent’s responsibility to inform the current child care provider of their TSS.**

Fee Collection

The **CDSS** requires that the family pay its fees to the provider in advance. Therefore, the family is required to pay the provider directly within the first five (5) days of the month. Family fees are found on *NOAs, Attendance Sheets* and *Child Care Agreements*.

Providers are responsible for collecting family fees from the family. The provider will fill out the pre-printed receipt on the back of the child’s *Attendance Sheet (one receipt per family, written on the Attendance Sheet that has the fee amount printed on the front)* when the fee is collected from the parent. This receipt will show the total paid to the provider. Missing receipts will delay payment to the provider. When CAPMC APP processes reimbursement for a family with family fees, the fee amount will be deducted from the provider’s reimbursement check for the month (the fee and reimbursement can be found on the voucher printout).

If services are also being provided by another child care and development program in which the family is required to pay a family fee, a fee credit equal to the amount paid to the other provider may be granted. A receipt of payment to the other service provider must be submitted on a monthly basis and the parent will pay the difference. A credit will be applied to the family’s subsequent fee billing period and cannot be carried over beyond the subsequent fee-billing period.

Past Due Family Fees

Termination of services can occur if family fees are not paid to the provider. CAPMC APP will contact families who fail to pay their family fees and issue a *NOA* stating a Delinquency of Family Fee. **Fees are delinquent seven (7) calendar days after due date. Services shall be terminated within two (2) weeks unless paid within the two (2) weeks. A reasonable repayment plan will be accepted, and the parent must comply with the repayment plan to continue services.**

Co-Payments

When the provider’s rate and other allowable charges exceed the maximum subsidy amount, the parent is responsible for paying the difference. The difference is considered the parent’s co-payment. CAPMC APP is not responsible for collecting co-payments.

Provider Rights and Grievance Process

Complaint or Grievance against a CAPMC Staff Member

First attempt to resolve the issue within 30 days of the incident by discussing it with the FSA or CAPMC APP/R&R staff person involved. If the issue is not resolved, request a *CAPMC Parent/Community Complaint Form* and submit it within seven (7) days to the staff member’s Supervisor, who will schedule a meeting to discuss the matter and submit a written

resolution. If a satisfactory resolution is not reached, request a meeting with the Program Manager. The Program Manager will issue a written response to the complainant within five (5) days after the meeting.

If a satisfactory resolution has not been reached, request a meeting with the Executive Director within five (5) days after the meeting with the Program Manager, stating the problem and desired solution. The complainant will receive a written response within 10 days of the meeting. If a satisfactory solution is still not met, the complainant has five (5) days after receipt of the Executive Director's decision to request a hearing with the Executive Committee of the CAPMC Board of Directors. Upon conclusion of the hearing, the Executive Committee will issue a written response. If the complainant is still dissatisfied, s/he may request the issue be brought to the full CAPMC Board of Directors by submitting a written request to the Chairperson of the Board within three (3) days of receiving the Executive Committee's decision. The Board of Directors will hear the complaint and render a final decision within five (5) days of the hearing.

Limits of Provider Participation Minimum Wage Law

Since child care providers are independent contractors and not employees of CAPMC, CAPMC is not responsible for federal and state tax obligations. Please note that in California, parents may be considered to be the employer of the child care provider (domestic service worker) and as such, may be responsible for minimum wage, social security taxes, state workers compensation requirements, and unemployment taxes for in home care. If necessary, CAPMC will require a minimum number of children in care at the same time by an in-home (child's home) license-exempt provider to comply with the Fair Labor Standards Act (FLSA). The number of children is subject to change based on the current minimum wage plus rates allowed for the payment.

If the parent chooses to be the employer, the parent must submit copies of employer documents filed with the appropriate federal and state agencies, copies of check stubs to the provider, and copies of any required withholding tax payments for an amount that is in conjunction with the reimbursement, inclusive of any parent fees, that equals or exceeds minimum wage.

Rejection of Provider Participation

Providers may be denied an agreement for services if a child care setting is deemed a health and/or safety threat, or consideration, to children or provider has a criminal record that would be detrimental to the provision of child care services.

Termination of Provider Participation

A provider's agreement for services will be terminated for any of the following:

- If the license-exempt provider is denied clearance by TrustLine,
- For non-conformity with licensing regulations,
- If the license is under a temporary suspension order or has been revoked,
- For submission of false information,
- For failure to provide pertinent information,
- For threatening or inflicting of physical/verbal abuse on staff, parents or child(ren),
- In case of refusal to provide access to CAPMC staff or parents, or
- For failure to comply with the laws, rules or regulations established by the State of California or the federal government.

Confidentiality

Authorized CAPMC APP representatives, fiscal auditors, legal/court ordered persons; **CDSS and CCDD** are allowed access to family and child care provider files. The disclosure or release of any information that pertains to child care services is restricted to purposes directly related to the administration and delivery of our services. FSAs and other CAPMC APP staff members do not provide information to outside sources.

SECTION III: CAPMC/APP FRAUD PREVENTION

Fraud Defined

Fraud is defined as:

- Intentionally providing false or misleading information on participant agreements and/or eligibility and need documentation (e.g. employment verification forms, check stubs, training verification forms, provider contract agreements, provider rate sheets, family size, increased income that exceeds the eighty-five percent (85%) SMI not reported, other parent related to child in home, no need for care, care is being done by person other than provider of record, child not dependent of parent).
- Intentionally failing to report an increase to your family's income that exceeds the eighty five percent (85%) SMI income thresholds within 30 days.
- Alteration or forgery of any eligibility or need documents.
- Claiming to have received child care services that you know your family has not received and/or that your provider of record has not given.
- In any way, intentionally providing misleading information, documentation and/or statements regarding your child care eligibility or need.

Fraud Policy

- If services are received by willful and intentional misrepresentation or withholding of pertinent eligibility or need information, CAPMC will hold the parent accountable and immediately terminate the family from the Program.
- CAPMC collaborates with the Madera County District Attorney's office and other law enforcement agencies to investigate and prosecute fraudulent activity.
- If substantiated, intentional misrepresentation is found against a provider, the provider will be permanently ineligible to receive subsidized child care reimbursements.
- CAPMC will act to recover any misappropriated funds, including those services provided during any appeal process. Parents are responsible for reimbursing CAPMC for costs of services fraudulently obtained. CAPMC will issue an overpayment letter to collect the money directly from parents who it determines have obtained services fraudulently. If parents dispute the amount of the overpayment, CAPMC will provide the opportunity for review of the overpayment, but CAPMC does not re-hear the original termination issues.
- Limit of Future Services:

- CAPP & CalWORKs Stage three (3) Families: After repayment of funds for services obtained through fraud, parents in either CAPP or CalWORKs Stage three (3) contracts are prohibited from future services for a period of one (1) year from the date of the receipt from CAPMC indicating repayment was made in full.
- CalWORKs Stage two (2) Families: In agreement with the Madera County Department of Social Services, after repayment of funds for services obtained through fraud has been made, parents in CalWORKs Stage two (2) contracts are eligible for future services with no probation period.

Harassment Policy

Any person who makes threats against, harasses, uses profane language, destroys property, verbally or physically abuses, or endangers the safety of any child(ren), parent, provider, CAPMC staff member or representative will be immediately terminated from the Program and will be permanently ineligible to receive subsidized child care reimbursements. *This includes but is not limited to social media: Facebook, Instagram, LinkedIn, YouTube, Snap Chat, and other sources of communications.*

Discrimination Statement (5 CCR 18107(d))

The determination of eligibility shall be without regard to the immigration status of the child(ren) or the child(ren)'s parent(s) unless the child(ren) or the child(ren)'s parent(s) is under a final order of deportation from the United States Department of Homeland Security.

Confidentiality and Use of Information

"Information provided from applicants or participants in programs operated and administered by Community Action Partnership of Madera County (CAPMC) such as Head Start, Migrant Head Start, Victim Services, Drought Assistance, etc. is confidential and used **only** in connection with determining eligibility and participation in CAPMC programs. **It is not and cannot be used for any other purpose without your permission.** Such information is **not** provided or available to other government agencies or programs including, but not limited to, Department of Homeland Security, Immigration and Customs Enforcement (ICE) or other law enforcement agencies such as the police or sheriff's department. In addition, all CAPMC employees agree to keep all information regarding CAPMC clients in the strictest confidence."

Uniform Complaint & Grievance Procedure

The California *SCCR*, Section 4610 authorizes the CDE responsibility over Uniform Complaint Procedures (UCP) and Child Care and Development Programs are covered under UCP, which includes Alternative Payment, CalWORKs Stage two (2) and Stage three (3), Exceptional Needs, Family Child Care Homes, General, Migrant, Protective Services, complaints under the UCP procedures. For additional general information on Uniform Complaint Procedures, contact Categorical Programs:

Complaint Management Office, CDE, Legal and Audits Branch

1430 "N" Street, Suite #5408

Sacramento, CA 95814

Phone: (916) 319-0929

Website: <http://www.cde.ca.gov/re/cp/uc>

Acknowledgement of Receipt of Written Policies

Parents/Providers who participate in a subsidized child care program administered by Community Action Partnership of Madera County are issued this handbook so they may comply with program policies and procedures. Signing below indicates receipt of the handbook and applicable policies and agreement to comply with Program requirements.

I, (Print Name) _____ under penalty of perjury of the State of California and the County of Madera, do hereby attest that I have read, understand and agree to abide by the policies and procedures of the CAPMC Alternative Payment Program as outlined in the Parent & Provider Handbook.

Parent or Provider Signature

Date

Electronic Communication & Text Messaging Authorization

I CONSENT for Community Action Partnership of Madera County, Inc. Child Care Alternative Payment and Resource & Referral Program to contact me via-text using this cell phone number. *Message and data rates may apply.*

Cell Phone Number: _____

I CONSENT for Community Action Partnership of Madera County, Inc. Child Care Alternative Payment and Resource & Referral Program to contact me through electronic communication (email) by using this email address.

Email Address: _____

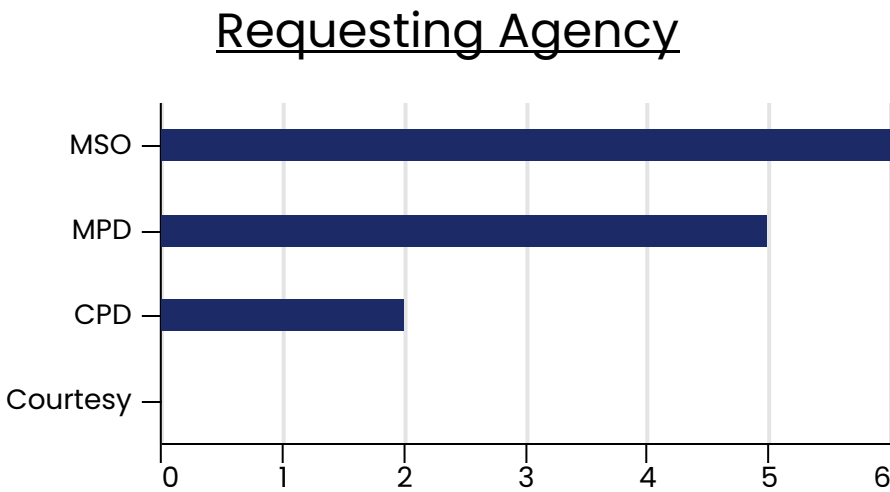
I DO NOT CONSENT for Community Action Partnership of Madera County, Inc. Child Care Alternative Payment and Resource & Referral Program to contact me via-text message or via-email.

Parent or Provider Signature

Date

Madera County Child Advocacy Center (CAC)

July 2024



Mental Health Services

Referrals Made: 5

Onsite Therapy Sessions: 4

*Law Enforcement investigations are conducted as a joint response with Madera County Child Protective Services

Child Forensic Interviews Year to Date

Year	Jan.	Feb.	Mar.	Apr.	May	Jun.	Jul.	Aug.	Sep.	Oct.	Nov.	Dec.
2024	7	14	27	41	52	59	72					
2023	8	17	27	37	44	53	64	69	75	79	94	97



**ALTERNATIVE PAYMENT AND RESOURCE & REFERRAL PROGRAM
MONTHLY REPORTING – [July 2024](#)**

NUMBER OF CHILDREN ENROLLED IN EACH PROGRAM FOR THE ALTERNATIVE PAYMENT PROGRAM

General Contract - CAPP	489
CalWORKs Stage 2 – C2AP	145
CalWORKs Stage 3 – C3AP	133
Bridge Program - BP	32
Total Children Enrolled	799

**NUMBER OF IN-HOME LICENSE CHILD CARE PROVIDERS AND LICENSE-EXEMPT CHILD CARE PROVIDERS
FOR ALTERNATIVE PAYMENT PROGRAM**

IN - HOME LICENSE CHILD CARE PROVIDERS – SMALL	41
IN – HOME LICENSE CHILD CARE PROVIDERS – LARGE	46
LICENSE-EXEMPT CHILD CARE PROVIDERS	63
Total Providers Enrolled	150

RESOURCE & REFERRAL LICENSED PROVIDERS

ACTIVE - LICENSED CHILD CARE PROVIDERS	137
CLOSED - LICENSED CHILD CARE PROVIDERS	N/A

CHILD CARE INITIATIVE PROGRAM PROVIDER WORKSHOPS/TRAININGS

CHILD CARE INITIATIVE PROJECT (CCIP) Workshops:

- Child Care Initiative Project End-of-the-Year: 40 attendees

Family, Friend, and Neighbor Activity:

- No workshops were administered due to planning the end-of-year workshop. Workshops will resume via Zoom in August 2024.

Bridge Program:

- Coaching Session (Spanish) – 19 attendees



Community Services Monthly Report to the Board of Directors

July 2024

LOW INCOME HOME ENERGY ASSISTANCE PROGRAM

Program	Monthly Households Served	11-1-2021 to June 30, 2024 Fiscal YTD Total
ESLIHEAP 2023 – non-emergency	12	187
ESLIHEAP 2023 – FAST TRACK	8	277
ESLIHEAP 2023 WOOD/PROPANE/OIL	0	15
HEAP 2024 – non-Emergency	48	333
FAST TRACK 2024 – Emergency	56	370
WPO 2024 – WOOD/PROPANE/OIL	0	19

LOW INCOME HOME WATER ASSISTANCE PROGRAM

PROGRAM	Monthly Households Served	Fiscal YTD Totals
LIHWAP Past Due Water Bills	0	624

HOMELESS PROGRAMS

PROGRAM	Residents	Vacancies
Shunammite Place	41	3
Madera Mental Health Services Act	9	3

Kaiser Permanente Housing for Health Grant Opportunity

Spending Period July 1, 2023 through June 30, 2024

	Application Submitted	YTD Expenses	Budget Balance	Achievement
Funding	\$50,000	\$50,000	\$0	100%
Objective	Goal	YTD Achieved	Balance	% Achieved

Kaiser Permanente Housing for Health Grant Opportunity

Spending Period July 1, 2024 through June 30, 2025

	Application Submitted	YTD Expenses	Budget Balance	Achievement
Funding	\$25,000	\$1,202.71	\$23,797.29	0.048%
Objective	Goal	YTD Achieved	Balance	% Achieved

HOUSED: 4

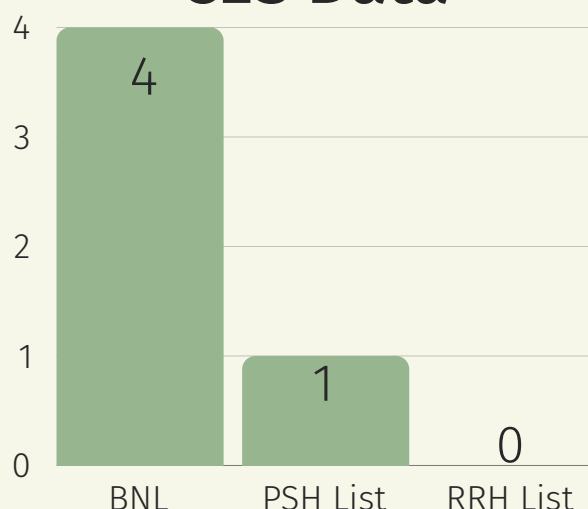


Permanent Supportive Housing: 1



Permanent Housing: 3

CES Data



New Clients

Engaged Per Area

Chowchilla City

10

Madera City

45

Eastern Madera

6

Subgroups



Families

6



DV Victims

2



Individuals

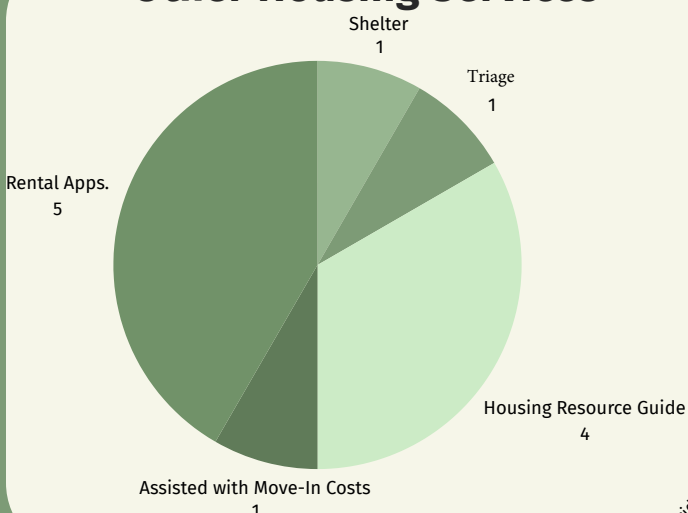
61



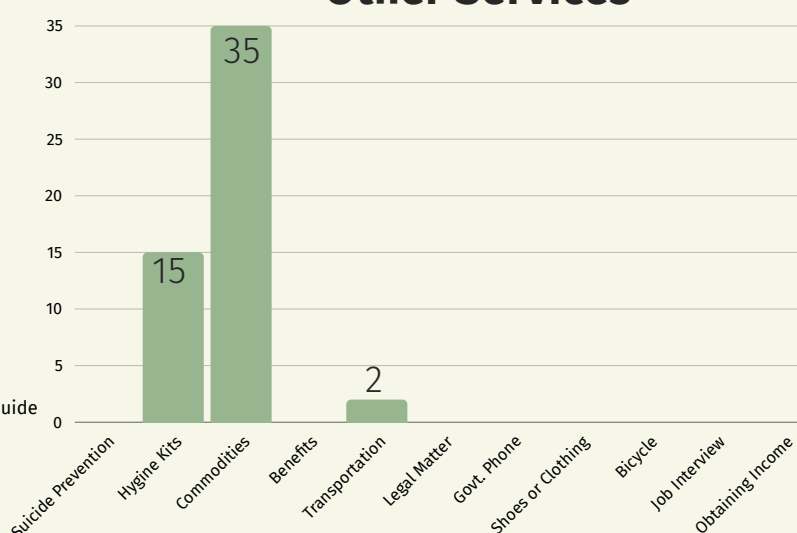
TAY

3

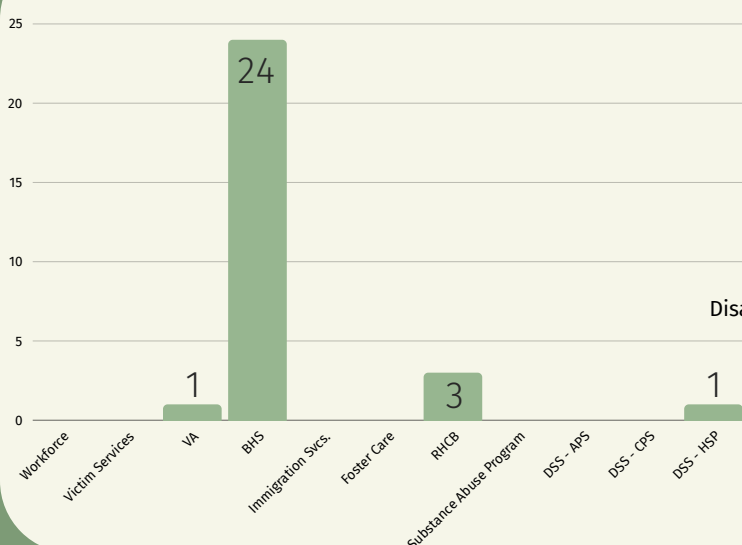
Other Housing Services



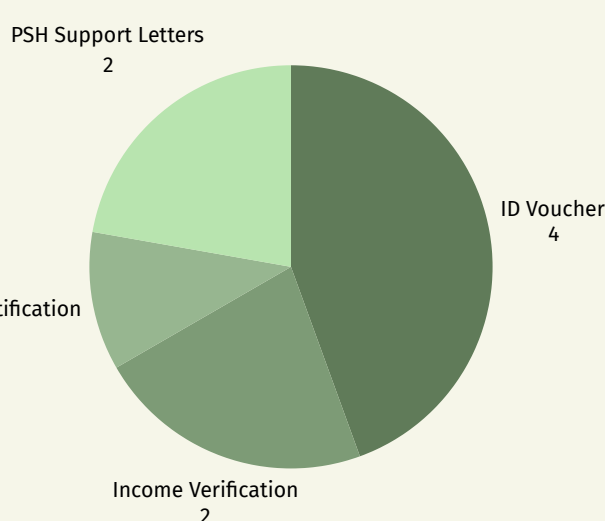
Other Services



Referrals



Document Collection



Madera County Website Referrals



9 Referrals

July 2024 - Outcomes

- 3: duplicate referrals
- 3: unsuccessful – no contact
- 3: already connected to services
- 3: not homeless
- 0: out of state/county

Emergency Housing Vouchers



- 8 of 8 EHV's matched & applications submitted
- 7 of 8 approved have received EHV
- 1 of 7 recipients has been housed



Homeless Engagement for Living Program (HELP Center) Services Report - July 2024



Below are the number of services provided and contacts made in Madera County for the period of 07/01/2024 - 07/31/2024.

	Individuals	Families	DV	TAY	Veterans
Madera City	45	6	2	3	0
Chowchilla City	10	0	0	0	0
Eastern Madera	6	0	0	0	0
Total:	61	6	2	3	0

Outcomes - Services Offered		
HOUSING SERVICES	CURRENT MONTH	YEAR TO DATE
SHELTER	1	1
TRIAGE HOUSING	1	1
REUNIFICATION WITH FAMILY	0	0
HOUSING RESOURCE GUIDE	4	4
SUBMITTED RENTAL APPLICATIONS	5	5
PERMANENT HOUSING	3	3
PERMANENT SUPPORTIVE HOUSING	1	1
PROVIDED MOVE-IN COSTS	1	1
RECEIVED EMERGENCY HOUSING VOUCHER	0	0
DOCUMENT COLLECTION	CURRENT MONTH	YEAR TO DATE
DMV VOUCHER FOR ID	4	4
SOCIAL SECURITY CARD	0	0
BIRTH CERTIFICATE	0	0
INCOME VERIFICATION	2	2
DISABILITY CERTIFICATION	1	1
PSH SUPPORT LETTERS	2	2
EMOTIONAL SUPPORT ANIMAL LETTER	0	0
REFERRALS	CURRENT MONTH	YEAR TO DATE
WORKFORCE	0	0
VICTIM SERVICES	0	0
VETERAN AFFAIRS	1	1
BEHAVIORAL HEALTH	24	24
IMMIGRATION SERVICES	0	0
FOSTER CARE SERVICES	0	0
RH COMMUNITY BUILDERS	3	3
SUBSTANCE ABUSE PROGRAM	0	0
DEPARTMENT OF SOCIAL SERVICES - APS	0	0
DEPARTMENT OF SOCIAL SERVICES - CPS	0	0
DEPARTMENT OF SOCIAL SERVICES - HOUSING	1	1
OTHER NON-CASH BENEFITS	CURRENT MONTH	YEAR TO DATE
ASSISTED IN OBTAINING MEDICAL APPTS	1	1
ASSISTED IN OBTAINING CASH AID / TANF	0	0
ASSISTED IN OBTAINING CALFRESH BENEFITS	0	0
ASSISTED IN OBTAINING HEALTH INSURANCE	0	0
OTHER SERVICES	CURRENT MONTH	YEAR TO DATE
SUICIDE PREVENTION	0	0
PROVIDED HYGIENE KITS	15	15
DELIVERED COMMODITIES	35	35
ASSISTED WITH SSI BENEFITS	0	0
ARRANGED TRANSPORTATION	2	2
ADVOCACY WITH LEGAL MATTER	0	0
ASSISTED IN OBTAINING A GOVT. PHONE	0	0
PROVIDED SHOES OR CLOTHES TO CLIENT	0	0
PROVIDED BICYCLE FOR TRANSPORTATION	0	0
ASSISTED WITH JOB INTERVIEW	0	0
ASSISTED IN OBTAINING INCOME	0	0
OTHER COORDINATED ENTRY	CURRENT MONTH	YEAR TO DATE
PLACED ON PSH PRIORITY LIST	1	1
PLACED ON RRH PRIORITY LIST	0	0
PLACED ON BY-NAME LIST	4	4



Victim Services

October 2023 - September 2024

Domestic Violence Program

Services	1 st quarter (Oct.-Dec.)	2 nd quarter (Jan-March)	3 rd quarter (April-June)	4 th quarter (July-Sept.)	Total
Crisis Intervention	224	167	133		
Individual or group counseling/support	336	477	418		
Criminal/Civil Legal Advocacy	121	181	241		
Assistance with protective/custody orders	56	72	84		

Shelter

Bed Nights/Individuals	344/24	50/4	175/15		
Emergency food & clothing	12	3	7		

Victim Witness

Crisis Intervention	189	67	60		
Individual Counseling	174	174	210		
Criminal Advocacy/accompaniment	210	218	216		
Assistance in obtaining protection or restraining order	19	1	37		
Number of Victims of Crime Compensation claims submitted	11	11	4		

Sexual Assault

Crisis Intervention	287	128	98		
Individual Counseling	198	246	251		
Individual Advocacy	50	94	89		
Criminal Justice Advocacy/Accompaniment	78	83	54		
On-scene Response	4	1	3		

Fiscal Year January-December 2024**Unserviced/Underserved**

Services	1 st Quarter (Jan.- March)	2 nd Quarter (April-June)	3 rd Quarter (July- Sept.)	4 th Quarter (Oct.-Dec.)	Total
Crisis Intervention	43	13			
Presentations to underserved population	4	1			
Outreach Events	5	3			
Immigration Assistance (visas, continued presence application, and other immigration relief)	19	15			
Provide information about the criminal justice process	54	21			
Criminal Justice Advocacy or Accompaniment	64	39			
Individual Advocacy (assist. With public assistance benefits, return of personal property)	12	5			

Transitional Housing

Services	1 st Quarter (Jan.- March)	2 nd Quarter (April- June)	3 rd Quarter (July- Sept.)	4 th Quarter (Oct.- Dec.)	Total
Individual Counseling	19	29			
Individual Advocacy (assist. with public assistance benefits, return of personal property)	24	26			
Individuals Rec. Rental Assistancess	3	9			



Report to the Board of Directors

Agenda Item Number: E-1

Board of Directors Meeting for: August 8, 2024

Author: Sandra Ramirez

DATE: July 26, 2024

TO: Board of Directors

FROM: Sandra Ramirez, Accountant Program Manager

SUBJECT: 2023-2024 Basic, Blended and One-time Carryover Grant Budget Revisions

I. RECOMMENDATION:

Review and approve Community Action Partnership of Madera County 2023-2024 Basic, Blended, and One-time Carryover Comparison Budget Revisions to Stanislaus County Office of Education (SCOE). Comparison Budgets included.

II. SUMMARY:

We have prepared comparison budget revisions based on SCOE recommendation to balance variances between Basic, Blended and One-time Carryover budgets before closeout of the 2023-2024 program.

III. DISCUSSION:

Amendment #3 for One-time Only Carryover funds extended closeout of the 2023-2024 contract to February 2025 to complete necessary equipment purchases and maintenance projects at the centers.

- A. Project costs are higher than additional one-time funds. Allowable to transfer savings between budgets.
- B. Basic savings a total of \$99,651 in multiple categories.
- C. Blended over budget by \$26,426 from the purchase of two A/C units for Sierra Vista Migrant Head Start Center.
- D. One-time Carryover funds for equipment, building and ground maintenance over budget by \$73,225. Savings from Basic used to purchase playground structure at Los Ninos Migrant Head Start Center.

- The 2023-2024 Basic, Blended and One-time Carryover Grant Budget Revisions will be presented for approval to the MHS Policy Committee on August 6, 2024.

IV. FINANCING: None

**STANISLAUS COUNTY OFFICE OF EDUCATION
MIGRANT HEAD START
BASIC BUDGET COMPARISON REVISION
March 1, 2023 - February 29, 2024**

Delegate Agency: **COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.**

321 BASIC		Approved Budget	Modification Changes	Revised Budget
6a	Personnel	2,955,657	(16,666)	2,938,991
6b	Fringe	785,486	(2,650)	782,836
6c	Travel	-	516	516
6d	Equip >5,000	234,471	(41,832)	192,639
6e	Equip <5,000	-	-	-
6e	Supplies	362,663	61,870	424,533
6f	Contracts	-	-	-
6g	Renovations	-	-	-
6h	Other	721,258	(96,065)	625,193
	Total Direct	5,059,535	(94,827)	4,964,708
6i	Indirect	439,082	(4,824)	434,258
	Total	5,498,617	(99,651)	5,398,966

Explanation of requested variance/changes:

			Changes
6a	Net Decrease:	Decrease; transfer savings to Blended Program to 6a Personnel.	(16,666)
6b	Net Decrease:	Decrease; transfer savings to Blended Program to 6a Personnel.	(2,650)
6c	Net Increase:	Increase; excess staff travel costs. Transfer in from savings in 6h Other.	516
6d	Net Decrease:	Decrease; transfer savings to One-time Only Carryover fund to 6d Equipment for playground structure at Los Ninos Head Start Center.	(41,832)
6e	No Change		-
6e	Net Increase:	Increase; to purchase books, instructional supplies, and other supplies for the centers. Transfer in from saving in 6h Other.	61,870
6f	No Change		-
6g	No Change		-
6h	Net Decrease:	Decrease; from E-rate refunds in Telephone expense. Transfer savings to 6e Supplies and 6c Travel. Remainder balance transfer Blended and One-Time Carryover fund budgets.	(96,065)
6i	Net Decrease:	Decrease; savings from decrease amount from Basic budget. Transfer amounts to Blended budget.	(4,824)
Total			(99,651)

Approval Section	
Delegate Director:	Date:
Agency Executive Director:	Date:
Policy Committee Approval:	Date:
Board Approval:	Date:
Grantee Director:	Date:

**STANISLAUS COUNTY OFFICE OF EDUCATION
MIGRANT HEAD START
BLENDED BUDGET COMPARISON REVISION
March 1, 2023 - February 29, 2024**

Delegate Agency: **COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.**

362 BLENDED		Approved Budget	Modification Changes	Revised Budget
6a	Personnel	249,629	19,430	269,059
6b	Fringe	68,991	7,838	76,829
6c	Travel	-	-	-
6d	Equip >5,000	17,354	121	17,475
6e	Equip <5,000	-	-	-
6e	Supplies	104,976	(33,422)	71,554
6f	Contracts	-	-	-
6g	Renovations	-	-	-
6h	Other	165,338	30,264	195,602
	Total Direct	606,288	24,231	630,519
6i	Indirect	53,592	2,195	55,787
	Total	659,880	26,426	686,306

Explanation of requested variance/changes:			Changes
6a	Net Increase:	Increase; Transfer in savings from Basic Budget 6a-Personnel & 6b Fringe.	19,430
6b	Net Increase:	Increase; Transfer in savings from Basic Budget 6h Other and 6i Indirect.	7,838
6c	No Change		-
6d	Net Increase:	Increase; Transfer in savings from Basic Budget 6i Indirect.	121
6e	No Change		-
6e	Net Decrease:	Decrease; Transfer savings to 6h Other and 6i Indirect	(33,422)
6f	No Change		-
6g	No Change		-
6h	Net Increase:	Increase; Additional costs for building maintenance to install two A/C units.	30,264
6i	Net Increase:	Increase; Indirect adjusted do to the increase in Other category	2,195
Total			26,426

Approval Section	
Delegate Director:	Date:
Agency Executive Director:	Date:
Policy Committee Approval:	Date:
Board Approval:	Date:
Grantee Director:	Date:

**STANISLAUS COUNTY OFFICE OF EDUCATION
MIGRANT HEAD START
BLENDED BUDGET COMPARISON REVISION
March 1, 2023 - February 29, 2024**

Delegate Agency: **COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.**

MHS-Carry Over Funds		Approved Budget	Modification Changes	Revised Budget
6a	Personnel	-	-	-
6b	Fringe	-	-	-
6c	Travel	-	-	-
6d	Equip >5,000	178,013	122,053.00	300,066
6e	Equip <5,000	-	-	-
6e	Supplies	-	-	-
6f	Contracts	-	-	-
6g	Renovations	-	-	-
6h	Other	405,092	(44,756)	360,336
	Total Direct	583,105	77,297	660,402
6i	Indirect	36,863	(4,072)	32,791
	Total	619,968	73,225	693,193

Explanation of requested variance/changes:

Changes

6a	No Change	-
6b	No Change	-
6c	No Change	-
6d	Net Increase: Increase; for playground structure and surfacing at Los Ninos Head Start center. Transfer from 6h Other and 6i Indirect savings in Carryover funds. Plus transfer in from Basic Budget 6h Equipment & 6h Other categories.	122,053
6e	No Change	-
6e	No Change	-
6f	No Change	-
6g	No Change	-
6h	Net Decrease: Decrease; transfer savings in 6h Other to 6d Equipment	(44,756)
6i	Net Decrease: Decrease indirect for equipment costs related to 6d category.	(4,072)
Total		73,225

Approval Section

Delegate Director:	Date:
Agency Executive Director:	Date:
Policy Committee Approval:	Date:
Board Approval:	Date:
Grantee Director:	Date:



Report to the Board of Directors

Agenda Item Number: E-2

Board of Directors Meeting for: August 8, 2024

Author: Maritza Gomez-Zaragoza

DATE: July 18, 2024
TO: Board of Directors
FROM: Maritza Gomez-Zaragoza, Head Start Program Director
SUBJECT: 2023-2024 Basic Grant Budget Revision

I. RECOMMENDATION:

Review and approve Community Action Partnership of Madera County 2023-2024 Basic Comparison Budget Revision to Community Action Partnership of San Luis Obispo. Comparison Budget included.

II. SUMMARY:

The Selma Migrant Head Start center needs the AC unit replaced. Staff have identified funds in other category to support the expense.

III. DISCUSSION:

The Selma MHS center has had issues with the AC unit that has caused the closure of the site for multiple weeks. Per Community Care Licensing, the indoor temperature cannot be over 85 degrees. With the summer heat the temperature rose above 85 degrees and children cannot attend until the AC unit is repaired.

Unfortunately, after multiple repair visits, the AC unit could not be repaired and therefore, CAPMC requested authorization to replace the unit. Staff reviewed the current budget and identified available funds that could be transferred to the equipment category to support the purchase of the replacement unit.

In reviewing the budget, it was also identified that the supply budget categories were overspent. Therefore, adjustments were also made to add additional funds to the supply category. Due to the emergency need for the AC unit replacement, the revised budget was submitted to the Recipient for approval.

- The 2023-2024 Basic Grant Budget Revision will be presented for approval to the FMSHS Policy Committee on August 7, 2024.

A. FINANCING:

A total of \$89,771 funds were transferred to the equipment and supply categories. Attached is the budget revision for review.

COMMUNITY ACTION PARTNERSHIP OF SAN LUIS OBISPO COUNTY, INC
MIGRANT AND SEASONAL HEAD START
COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.
BUDGET REVISION GRANT #90CM009851-04
SEPTEMBER 1, 2023 - AUGUST 31, 2024

	AWARDED <u>2023-2024</u>	BUDGET REVISION <u>#1</u>	REVISED <u>TOTALS</u>
A. PERSONNEL	3,459,647.00		3,459,647.00
B. FRINGE BENEFITS	791,991.00		791,991.00
TOTAL PERSONNEL COSTS	<u>4,251,638.00</u>		<u>4,251,638.00</u>
C. OUT OF AREA TRAVEL	13,032.00		13,032.00
D. EQUIPMENT	48,000.00	16,771.00	64,771.00
E. SUPPLIES	195,252.00	73,000.00	268,252.00
F. CONTRACTUAL	0.00		0.00
H. OTHER	878,411.00	(88,315.00)	790,096.00
J. INDIRECT	485,788.00	(1,456.00)	484,332.00
K. TOTAL BUDGET	<u>5,872,121.00</u>	0.00	<u>5,872,121.00</u>

Note: As of July 2024 YTD, CAPMC has savings in Telephone and Internet services from its participation in the E-Rate Schools and Libraries USF Program. Additionally, CAPMC would like to transfer funding to the Supply Category for increased costs in Data Processing Supplies and Program Supplies utilizing the savings from the Other Category. This category is currently overspent. Since the revised budget includes additional equipment and equipment over \$5,000 is not part of the indirect cost base, then there is further savings of \$1,456 that CAPMC would like to transfer to the Supply Category.



Report to the Board of Directors

Agenda Item Number: E-3

Board of Directors Meeting for: August 8, 2024

Author: Ana Ibanez

DATE: August 8, 2024

TO: Board of Directors

FROM: Ana Ibanez, Community Services Program Manager

SUBJECT: Madera County Encampment Resolution Fund (ERF-3-R) Project in Oakhurst

I. RECOMMENDATION:

Ratify and approve the submission of the Madera County Encampment Resolution Fund (ERF-3-R) Project application. The ERF-3-R will address the encampment in the Oakhurst area through a collaborative program involving Madera County and Community Action Partnership of Madera County's Homeless Engagement for Living Program (HELP) Center.

II. SUMMARY:

The ERF-3-R funding will be allocated to target the encampment found in the Oakhurst area. The program aims to lease 10 housing units from a local Oakhurst-area motel owner for eligible single adults and families. These units will serve as a triage center and interim housing to address the needs of individuals facing housing instability, homelessness, and behavioral health conditions.

III. DISCUSSION:

1. Housing and Duration:

- Lease 10 housing units from a local motel owner in Oakhurst.
- Housing units to serve as interim housing/triage center for 6-12 months, based on individual care plans.

2. Target Population:

- Individuals from the Oakhurst Encampment.
- Focus on those experiencing housing instability, homelessness and behavioral health conditions.

3. Services Provided:

- Temporary stable housing with supportive wraparound services.
- Connection to services and permanent housing options.

4. Staffing Provided:

- Eight (8) staff members provided by CAPMC.
 - Part-time Community Services Program Manager
 - Part-time Housing Coordinator
 - Two (2) full-time Housing Navigators
 - Three (3) full-time Housing Case Workers
 - Two (2) full-time Homeless Outreach Workers
- Staff will oversee project activities, coordinate services, and ensure access to supportive services.

5. Data and Reporting:
 - Project data will be submitted through the Homeless Management Information System (HMIS).
 - Outcomes and progress reports will be issued to oversight and advisory groups.
6. Partnership and MOU:
 - Madera County will develop a Memorandum of Understanding (MOU) with CAPMC.
 - The MOU will outline the scope of activities and services provided by each partner.

IV. FINANCING:
\$4,768,554.00





Report to the Board of Directors

Agenda Item Number: E-4

Board of Directors Meeting for: August 8, 2024

Author: Irene Yang

DATE: July 25, 2024
TO: Board of Directors
FROM: Irene Yang, Human Resources Director
SUBJECT: Chief Financial Officer

I. **RECOMMENDATION:**

Review and consider approving the selected candidate for the Chief Financial Officer position

II. **SUMMARY:**

The Chief Financial Officer position was classified for recruitment as of May 23, 2024, and recruitment activities resulted with seven preliminary candidates, narrowing down to three qualified candidates, and certified with one candidate on the eligibility list. The selected candidate's information is presented before the Board of Directors and Policy Committee / Council members upon the approval of the Office of Head Start.

III. **DISCUSSION:**

- A. Ms. Kerry Medellin is the selected candidate. The candidate is equipped with a baccalaureate degree in Economics with Accounting emphasis. She has exhibited sufficient knowledge, experience, and competencies to meet the responsibilities of the position and to understand the fiscal complexity of the organization and applicable financial management requirements.
- B. Ms. Medellin has over nineteen years of experience in the home builder industry as the Vice President of Finance and earned her ranking to Division President. She demonstrated that she was able to collaborate with the management team to resolve, implement strategic initiatives and achieve financial and operational goals and objectives. She managed and maintained integrity in all accounting functions such as general ledger, monthly financial statement and reports, cost analysis, reconciliation, and audit preparation. She performed risk assessments and implemented solutions as well as developing budgets based on goals and objectives. She also developed internal controls to manage coordinators and accounting staff members.
- C. Ms. Medellin also worked as Finance Director for a healthcare organization and a Senior Finance Manager for a data processing company. She developed and implemented financial plans; she provided direction for resource capacity planning; she researched and analyzed cost-saving opportunities and recommended strategies for efficiency. She was able to identify internal control and audit issues to

implement solutions to ensure compliance with GAAP and company operational policies.

- D. Ms. Medellin has demonstrated that she has the skills to minimize the program's fiscal and legal risks by assessing compliance monitoring and improving internal controls and staff to staff members. Her experienced demonstrated that she can ensure staff members and contracts have sufficient knowledge to fulfill responsibilities and have high-quality service delivery. Ms. Medellin has proven that she understands the complexity of the diverse program grants from various sources. Her job knowledge and direct experience show that she can review financial records and analyze program trends to formulate necessary and appropriate approaches to reach sound management decisions and funding requirements.
- E. Ms. Medellin has completed conditional background clearance with FBI and DOJ, debarment clearance, sex offender registry, pre-employment physical assessment, as well as associating with CAPMC's child development licensing under the California Community care Licensing clearance and child abuse index.
- F. Commencing Ms. Medellin's employment is pending upon receipt of the approval from the Office of Head Start in addition to the approval of the Board of Director, Head Start Policy Council / Policy Committee.

➤ The selected candidate for the Chief Financial Officer position will be presented for approval to the FMSHS Policy Committee on August 7, 2024.

IV. **FINANCING:** The position is under the indirect budget with benefits.



Report to the Board of Directors

Agenda Item Number: E-5

Board of Directors' Meeting for: August 8, 2024

Author: Tina Gomez

DATE: June 17, 2024

TO: Board of Directors

FROM: Tina Gomez, Accounting Supervisor

SUBJECT: Compensation Schedules and Salary Schedules

I. RECOMMENDATION:

Review and approve the updated employee compensation schedules and salary schedule for Community Action Partnership of Madera County (CAPMC).

II. SUMMARY:

The updated compensation and salary schedules for all programs reflect a 2.5% cost of living adjustment (COLA) increase retroactively effective for the 2024/2025 program years. The compensation schedules are being updated to reflect the permanent COLA increase for Head Start staff (both union and non-union) and all other agency staff.

III. DISCUSSION:

- A. The Board of Directors has previously approved the applications for all of the Head Start programs, including Fresno which is not represented by the bargaining unit (SEIU Local 521). The Office of Head Start provided additional funding for these "across the board" salary adjustments.
- B. The schedules were last updated June 17, 2024 to reflect range adjustments for Head Start employees and was approved by the Board of Directors on July 11, 2024.
- C. Any new positions and job descriptions that have been approved by the Board of Directors have been included in the appropriate compensation schedules at the approved rate of pay.
- D. The attached Compensation Schedules and Salary Schedule reflects the 2.5% COLA effective as follows: March 1, 2024 for Madera Migrant Head Start; June 1, 2024 for Regional Head Start; July 1, 2024 for all Non Head Start programs and September 1, 2024 for Fresno Migrant Head Start. These dates correspond with the program and fiscal years for the Head Start programs and July 1st is the beginning of the agency's fiscal year.
- E. Through August 8, 2024 CAPMC has approval from all of Regional Head Start, Stanislaus County Office of Education and Community Action Partnership of San Luis Obispo.

IV. **FINANCING**: All applicable salary and fringe benefit increases have been included in the current year budgets in the appropriate programs.

Community Action Partnership of Madera County, Inc.
Non-Represented Non-Head Start Employee Compensation Schedule
Includes 2.5% COLA Effective 7/01/2024

REVISED 06/17/2024

P

Class Title	Current Range	Hourly Amounts		Monthly Salary Based	
		Steps A to I	2.5% Increments	On 40 Hours Per Week	
		From Step A	To Step I	From Step A	To Step I
<u>Administration</u>					
Accountant - Program Manager	32.0	38.20	46.55	6,622	8,068
Chief Financial Officer	40.5	58.13	70.83	10,076	12,277
Child Care Alternative Payment and Resource & Referral Program Manager	33.0	40.14	48.91	6,957	8,477
Community Services Program Manager	33.0	40.14	48.91	6,957	8,477
Grant Management and Compliance Administrator/Executive Director Support	31.0	36.36	44.31	6,303	7,680
Human Resources Director	37.5	50.13	61.08	8,689	10,586
Information Technology Manager	33.0	40.14	48.91	6,957	8,477
Victim Services Program Manager	33.0	40.14	48.91	6,957	8,477
<u>Mid-Management Series</u>					
Accounting Supervisor	24.5	26.38	32.14	4,572	5,571
Community Services Coordinator	24.5	26.38	32.14	4,572	5,571
Housing Coordinator	24.5	26.38	32.14	4,572	5,571
Human Resources Generalist	24.5	26.38	32.14	4,572	5,571
IT Communication Specialist	26.5	29.12	35.48	5,047	6,149
IT Network Specialist	26.5	29.12	35.48	5,047	6,149
Program Accountant	24.0	25.74	31.36	4,461	5,435
R&R Child Care Initiative Project (CCIP) Coordinator	25.5	27.71	33.77	4,804	5,853
Strategic Plan Coordinator/Assistant to Executive Director	25.0	27.04	32.94	4,687	5,710
Victim Services Coordinator	24.5	26.38	32.14	4,572	5,571

Longevity Steps: 5% - 10 years; 5% - 15 years; 5% - 20 years

Clerical & Technical Series

Accounting Technician	21.0	22.19	27.04	3,847	4,687
Administrative Aide	18.5	19.61	23.90	3,400	4,142
Advocate II/Victim Services	20.0	21.12	25.74	3,661	4,461
Advocate III/Victim Services	21.0	22.19	27.04	3,847	4,687
Child Advocacy Center (CAC) Case Worker	23.0	24.50	29.85	4,246	5,173
Child Care Navigator	23.5	25.11	30.59	4,352	5,303
Customer Assistance Technician	18.5	19.61	23.90	3,400	4,142
Data Entry Technician	16.5	17.77	21.65	3,080	3,753
Executive Administrative Aide	20.0	21.12	25.74	3,661	4,461
Family Services Associate I (APP)	19.5	20.61	25.11	3,572	4,352

Community Action Partnership of Madera County, Inc.
Non-Represented Non-Head Start Employee Compensation Schedule
Includes 2.5% COLA Effective 7/01/2024

REVISED 06/17/2024

P

Class Title	Current Range	Hourly Amounts Steps A to I 2.5% Increments		Monthly Salary Based On 40 Hours Per Week	
		From Step A	To Step I	From Step A	To Step I
Family Services Associate II (APP)	20.5	21.65	26.38	3,753	4,572
Family Service Associate III (R&R/APP)	22.0	23.32	28.41	4,041	4,924
Quality Assurance Associate I	21.0	22.19	27.04	3,847	4,687
Quality Assurance Associate II	22.5	23.90	29.12	4,142	5,047
Quality Assurance Associate III	24.0	25.74	31.36	4,461	5,435
Human Resources Assistant I	20.5	21.65	26.38	3,753	4,572
Human Resources Assistant II	21.5	22.75	27.71	3,943	4,804
Homeless Outreach Worker	18.5	19.61	23.90	3,400	4,142
Housing Case Worker	23.0	24.50	29.85	4,246	5,173
Internet Technology (IT)/Help Desk Support Technician	21.0	22.19	27.04	3,847	4,687
Maintenance Worker I	18.5	19.61	23.90	3,400	4,142
Homeless Outreach Worker	18.5	19.61	23.90	3,400	4,142
Prevention Advocate	21.0	22.19	27.04	3,847	4,687
Program Assistant/Clerk Typist II	16.5	17.77	21.65	3,080	3,753
Program Assistant/Clerk Typist II-(R&R/APP)	17.5	18.67	22.75	3,236	3,943
Provider Services Associate	19.5	20.61	25.11	3,572	4,352
Receptionist	16.0	17.34	21.12	3,005	3,661
Shelter/Resident Support Aide	15.5	16.91	20.61	2,932	3,572
Shunammite Place Resident Manager	23.5	25.11	30.59	4,352	5,303
Specialty Advocate (VS)	23.0	24.50	29.85	4,246	5,173
Transitional Housing Case Worker	23.0	24.50	29.85	4,246	5,173

Longevity Steps: 5% - 10 years; 5% - 15 years; 5% - 20 years

**Community Action Partnership of Madera County, Inc.
Non-Represented Head Start Employee Compensation Schedule
Includes 2.5% COLA and 5% Retention**

**For Madera Migrant/Seasonal/CMIG effective 03/01/2024, Regional/Early/CSPP
effective 06/01/2024 and Fresno Migrant/Seasonal/Early effective 09/01/2024**

REVISED 06/17/2024

B

Class Title	Current Range	Hourly Amounts Steps A to I 2.5% Increments		Monthly Salary Based On 40 Hours Per Week	
		From Step A	To Step I	From Step A	To Step I
<u>Administration</u>					
Head Start Director	37.0	48.91	59.59	8,477	10,328
Head Start Deputy Director - Child Development Services	32.5	39.16	47.71	6,788	8,270
Head Start Deputy Director - Child & Family Services	32.5	39.16	47.71	6,788	8,270
<u>Mid-Management Series</u>					
Administrative Analyst	26.0	28.41	34.61	4,924	5,999
Area Manager	29.5	33.77	41.14	5,853	7,131
Center Director I	26.0	28.41	34.61	4,924	5,999
Center Director II	27.5	30.59	37.27	5,303	6,461
Center Director/Teacher	24.0	25.74	31.36	4,461	5,435
Disabilities/Mental Health Services Content Specialist	28.0	31.36	38.20	5,435	6,622
Eligibility, Recruitment, Selection, Enrollment, Attendance (ERSEA) Services Content Specialist	28.0	31.36	38.20	5,435	6,622
Facilities Supervisor	25.5	27.71	33.77	4,804	5,853
Family Child Care Development/Quality Assurance Specialist	25.5	27.71	33.77	4,804	5,853
Head Start Professional Development Coach	28.0	31.36	38.20	5,435	6,622
Health Services Content Specialist	28.0	31.36	38.20	5,435	6,622
Human Resources Specialist	28.0	31.36	38.20	5,435	6,622
Nutrition Services Content Specialist	28.0	31.36	38.20	5,435	6,622
Parent and Governance Specialist	28.0	31.36	38.20	5,435	6,622
Site Supervisor/Teacher I	25.5	27.71	33.77	4,804	5,853
Site Supervisor/Teacher II	27.5	30.59	37.27	5,303	6,461

Longevity Steps: 5% - 10 years; 5% - 15 years; 5% - 20 years

**Community Action Partnership of Madera County, Inc.
 Non-Represented Head Start Employee Compensation Schedule
 Includes 2.5% COLA and 5% Retention**

**For Madera Migrant/Seasonal/CMIG effective 03/01/2024, Regional/Early/CSPP
 effective 06/01/2024 and Fresno Migrant/Seasonal/Early effective 09/01/2024**

REVISED 06/17/2024

B

Class Title	Current Range	Hourly Amounts Steps A to I 2.5% Increments		Monthly Salary Based On 40 Hours Per Week	
		From Step A	To Step I	From Step A	To Step I
<u>Clerical & Technical Series</u>					
Administrative Aide	19.5	20.61	25.11	3,572	4,352
Advocate II	21.5	22.75	27.71	3,943	4,804
Advocate III	23.0	24.50	29.85	4,246	5,173
Associate Teacher	20.5	21.65	26.38	3,753	4,572
Child Care Assistant (SFP)	17.0	18.21	22.19	3,157	3,847
Data Technician	19.5	20.61	25.11	3,572	4,352
Executive Administrative Aide	21.5	22.75	27.71	3,943	4,804
Family Skills Instructor (SFP)	23.5	25.11	30.59	4,352	5,303
Food Service Worker/Instructional Aide I	17.0	18.21	22.19	3,157	3,847
Food Service/Cook (40 meals or less)	18.0	19.14	23.32	3,317	4,041
Food Service/Head Cook (40+ meals)	18.5	19.61	23.90	3,400	4,142
Instructional Aide I/Janitor	17.0	18.21	22.19	3,157	3,847
Instructional Aide II/Janitor	17.5	18.67	22.75	3,236	3,943
Instructional Aide III	18.0	19.14	23.32	3,317	4,041
Janitor **FRESNO ONLY**	17.0	18.21	22.19	3,157	3,847
Maintenance Worker I	19.5	20.61	25.11	3,572	4,352
Maintenance Worker II	22.5	23.90	29.12	4,142	5,047
Program Technician	19.5	20.61	25.11	3,572	4,352
Teacher I	22.0	23.32	28.41	4,041	4,924
Teacher II	23.5	25.11	30.59	4,352	5,303
Teacher III	25.0	27.04	32.94	4,687	5,710

Longevity Steps: 5% - 10 years; 5% - 15 years; 5% - 20 years

**Community Action Partnership of Madera County, Inc.
 Union (SEIU Local 521) Employee Compensation Schedule
 Includes 2.5% COLA and 5% Retention
 For Madera Migrant/Seasonal effective 03/01/2024 and
 Regional/Early Head Start effective 06/01/2024
 REVISED 06/17/2024**

Y

Class Title	Current Range	Hourly Amounts Steps A to I 2.5% Increments		Monthly Salary Based On 40 Hours Per Week	
		From Step A	To Step I	From Step A	To Step I
Clerical & Technical Series					
Advocate II	21.5	22.75	27.71	3,943	4,804
Associate Teacher	20.5	21.65	26.38	3,753	4,572
Data Technician	19.5	20.61	25.11	3,572	4,352
Early Head Start Family Facilitator	22.5	23.90	29.12	4,142	5,047
Food Service Worker/Instructional Aide I	17.0	18.21	22.19	3,157	3,847
Food Service/Cook (40 meals or less)	18.0	19.14	23.32	3,317	4,041
Food Service/Head Cook (40+ meals)	18.5	19.61	23.90	3,400	4,142
Health Services Technician	19.5	20.61	25.11	3,572	4,352
Instructional Aide I/Janitor	17.0	18.21	22.19	3,157	3,847
Instructional Aide II/Janitor	17.5	18.67	22.75	3,236	3,943
Instructional Aide III	18.0	19.14	23.32	3,317	4,041
Maintenance Worker I	19.5	20.61	25.11	3,572	4,352
Master Teacher	22.0	23.32	28.41	4,041	4,924
Program Technician	19.5	20.61	25.11	3,572	4,352
Program Technician-CSPP and CMIG	19.5	20.61	25.11	3,572	4,352
Program Technician-Human Resources	19.5	20.61	25.11	3,572	4,352
Program Technician-In-kind and White Fleet	19.5	20.61	25.11	3,572	4,352
Program Technician-Purchase	19.5	20.61	25.11	3,572	4,352
Teacher I	22.0	23.32	28.41	4,041	4,924
Teacher II	23.5	25.11	30.59	4,352	5,303
Teacher III	25.0	27.04	32.94	4,687	5,710

Longevity Steps: 5% - 10 years; 5% - 15 years; 5% - 20 years

**COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.
SALARY SCHEDULE FOR ALL PROGRAMS, INCLUDING HEAD START AND NON-HEAD START**

**FOR MADERA MIGRANT/SEASONAL/CMIG, REGIONAL/EARLY/CSPP HEAD START
FRESNO MIGRANT/SEASONAL/EARLY HEAD START AND ALL OTHER PROGRAMS
REVISED 06/17/2024**

RANGE #	STEP A	STEP B	STEP C	STEP D	STEP E	STEP F	STEP G	STEP H	STEP I	STEP J 10 YRS,	STEP K 15 YRS.	STEP L 20 YRS.
15.5 HOURLY	2932 16.91	3005 17.34	3080 17.77	3157 18.21	3236 18.67	3317 19.14	3400 19.61	3485 20.10	3572 20.61	3753 21.65	3943 22.75	4142 23.90
16.0 HOURLY	3005 17.34	3080 17.77	3157 18.21	3236 18.67	3317 19.14	3400 19.61	3485 20.10	3572 20.61	3661 21.12	3847 22.19	4041 23.32	4246 24.50
16.5 HOURLY	3080 17.77	3157 18.21	3236 18.67	3317 19.14	3400 19.61	3485 20.10	3572 20.61	3661 21.12	3753 21.65	3943 22.75	4142 23.90	4352 25.11
17.0 HOURLY	3157 18.21	3236 18.67	3317 19.14	3400 19.61	3485 20.10	3572 20.61	3661 21.12	3753 21.65	3847 22.19	4041 23.32	4246 24.50	4461 25.74
17.5 HOURLY	3236 18.67	3317 19.14	3400 19.61	3485 20.10	3572 20.61	3661 21.12	3753 21.65	3847 22.19	3943 22.75	4142 23.90	4352 25.11	4572 26.38
18.0 HOURLY	3317 19.14	3400 19.61	3485 20.10	3572 20.61	3661 21.12	3753 21.65	3847 22.19	3943 22.75	4041 23.32	4246 24.50	4461 25.74	4687 27.04
18.5 HOURLY	3400 19.61	3485 20.10	3572 20.61	3661 21.12	3753 21.65	3847 22.19	3943 22.75	4041 23.32	4142 23.90	4352 25.11	4572 26.38	4804 27.71

**FOR MADERA MIGRANT/SEASONAL/CMIG, REGIONAL/EARLY/CSPP HEAD START
 FRESNO MIGRANT/SEASONAL/EARLY HEAD START AND ALL OTHER PROGRAMS
 REVISED 06/17/2024**

RANGE #	STEP A	STEP B	STEP C	STEP D	STEP E	STEP F	STEP G	STEP H	STEP I	STEP J 10 YRS,	STEP K 15 YRS.	STEP L 20 YRS.
19.0 HOURLY	3485 20.10	3572 20.61	3661 21.12	3753 21.65	3847 22.19	3943 22.75	4041 23.32	4142 23.90	4246 24.50	4461 25.74	4687 27.04	4924 28.41
19.5 HOURLY	3572 20.61	3661 21.12	3753 21.65	3847 22.19	3943 22.75	4041 23.32	4142 23.90	4246 24.50	4352 25.11	4572 26.38	4804 27.71	5047 29.12
20.0 HOURLY	3661 21.12	3753 21.65	3847 22.19	3943 22.75	4041 23.32	4142 23.90	4246 24.50	4352 25.11	4461 25.74	4687 27.04	4924 28.41	5173 29.85
20.5 HOURLY	3753 21.65	3847 22.19	3943 22.75	4041 23.32	4142 23.90	4246 24.50	4352 25.11	4461 25.74	4572 26.38	4804 27.71	5047 29.12	5303 30.59
21.0 HOURLY	3847 22.19	3943 22.75	4041 23.32	4142 23.90	4246 24.50	4352 25.11	4461 25.74	4572 26.38	4687 27.04	4924 28.41	5173 29.85	5435 31.36
21.5 HOURLY	3943 22.75	4041 23.32	4142 23.90	4246 24.50	4352 25.11	4461 25.74	4572 26.38	4687 27.04	4804 27.71	5047 29.12	5303 30.59	5571 32.14
22.0 HOURLY	4041 23.32	4142 23.90	4246 24.50	4352 25.11	4461 25.74	4572 26.38	4687 27.04	4804 27.71	4924 28.41	5173 29.85	5435 31.36	5710 32.94
22.5 HOURLY	4142 23.90	4246 24.50	4352 25.11	4461 25.74	4572 26.38	4687 27.04	4804 27.71	4924 28.41	5047 29.12	5303 30.59	5571 32.14	5853 33.77
23.0 HOURLY	4246 24.50	4352 25.11	4461 25.74	4572 26.38	4687 27.04	4804 27.71	4924 28.41	5047 29.12	5173 29.85	5435 31.36	5710 32.94	5999 34.61

**FOR MADERA MIGRANT/SEASONAL/CMIG, REGIONAL/EARLY/CSPP HEAD START
 FRESNO MIGRANT/SEASONAL/EARLY HEAD START AND ALL OTHER PROGRAMS
 REVISED 06/17/2024**

RANGE #	STEP A	STEP B	STEP C	STEP D	STEP E	STEP F	STEP G	STEP H	STEP I	STEP J 10 YRS,	STEP K 15 YRS.	STEP L 20 YRS.
23.5 HOURLY	4352 25.11	4461 25.74	4572 26.38	4687 27.04	4804 27.71	4924 28.41	5047 29.12	5173 29.85	5303 30.59	5571 32.14	5853 33.77	6149 35.48
24.0 HOURLY	4461 25.74	4572 26.38	4687 27.04	4804 27.71	4924 28.41	5047 29.12	5173 29.85	5303 30.59	5435 31.36	5710 32.94	5999 34.61	6303 36.36
24.5 HOURLY	4572 26.38	4687 27.04	4804 27.71	4924 28.41	5047 29.12	5173 29.85	5303 30.59	5435 31.36	5571 32.14	5853 33.77	6149 35.48	6461 37.27
25.0 HOURLY	4687 27.04	4804 27.71	4924 28.41	5047 29.12	5173 29.85	5303 30.59	5435 31.36	5571 32.14	5710 32.94	5999 34.61	6303 36.36	6622 38.20
25.5 HOURLY	4804 27.71	4924 28.41	5047 29.12	5173 29.85	5303 30.59	5435 31.36	5571 32.14	5710 32.94	5853 33.77	6149 35.48	6461 37.27	6788 39.16
26.0 HOURLY	4924 28.41	5047 29.12	5173 29.85	5303 30.59	5435 31.36	5571 32.14	5710 32.94	5853 33.77	5999 34.61	6303 36.36	6622 38.20	6957 40.14
26.5 HOURLY	5047 29.12	5173 29.85	5303 30.59	5435 31.36	5571 32.14	5710 32.94	5853 33.77	5999 34.61	6149 35.48	6461 37.27	6788 39.16	7131 41.14
27.0 HOURLY	5173 29.85	5303 30.59	5435 31.36	5571 32.14	5710 32.94	5853 33.77	5999 34.61	6149 35.48	6303 36.36	6622 38.20	6957 40.14	7310 42.17
27.5 HOURLY	5303 30.59	5435 31.36	5571 32.14	5710 32.94	5853 33.77	5999 34.61	6149 35.48	6303 36.36	6461 37.27	6788 39.16	7131 41.14	7492 43.23

**FOR MADERA MIGRANT/SEASONAL/CMIG, REGIONAL/EARLY/CSPP HEAD START
 FRESNO MIGRANT/SEASONAL/EARLY HEAD START AND ALL OTHER PROGRAMS
 REVISED 06/17/2024**

RANGE #	STEP A	STEP B	STEP C	STEP D	STEP E	STEP F	STEP G	STEP H	STEP I	STEP J 10 YRS,	STEP K 15 YRS.	STEP L 20 YRS.
28.0 HOURLY	5435 31.36	5571 32.14	5710 32.94	5853 33.77	5999 34.61	6149 35.48	6303 36.36	6461 37.27	6622 38.20	6957 40.14	7310 42.17	7680 44.31
28.5 HOURLY	5571 32.14	5710 32.94	5853 33.77	5999 34.61	6149 35.48	6303 36.36	6461 37.27	6622 38.20	6788 39.16	7131 41.14	7492 43.23	7872 45.41
29.0 HOURLY	5710 32.94	5853 33.77	5999 34.61	6149 35.48	6303 36.36	6461 37.27	6622 38.20	6788 39.16	6957 40.14	7310 42.17	7680 44.31	8068 46.55
29.5 HOURLY	5853 33.77	5999 34.61	6149 35.48	6303 36.36	6461 37.27	6622 38.20	6788 39.16	6957 40.14	7131 41.14	7492 43.23	7872 45.41	8270 47.71
30.0 HOURLY	5999 34.61	6149 35.48	6303 36.36	6461 37.27	6622 38.20	6788 39.16	6957 40.14	7131 41.14	7310 42.17	7680 44.31	8068 46.55	8477 48.91
30.5 HOURLY	6149 35.48	6303 36.36	6461 37.27	6622 38.20	6788 39.16	6957 40.14	7131 41.14	7310 42.17	7492 43.23	7872 45.41	8270 47.71	8689 50.13
31.0 HOURLY	6303 36.36	6461 37.27	6622 38.20	6788 39.16	6957 40.14	7131 41.14	7310 42.17	7492 43.23	7680 44.31	8068 46.55	8477 48.91	8906 51.38
31.5 HOURLY	6461 37.27	6622 38.20	6788 39.16	6957 40.14	7131 41.14	7310 42.17	7492 43.23	7680 44.31	7872 45.41	8270 47.71	8689 50.13	9129 52.67
32.0 HOURLY	6622 38.20	6788 39.16	6957 40.14	7131 41.14	7310 42.17	7492 43.23	7680 44.31	7872 45.41	8068 46.55	8477 48.91	8906 51.38	9357 53.98

**FOR MADERA MIGRANT/SEASONAL/CMIG, REGIONAL/EARLY/CSPP HEAD START
 FRESNO MIGRANT/SEASONAL/EARLY HEAD START AND ALL OTHER PROGRAMS
 REVISED 06/17/2024**

RANGE #	STEP A	STEP B	STEP C	STEP D	STEP E	STEP F	STEP G	STEP H	STEP I	STEP J 10 YRS,	STEP K 15 YRS.	STEP L 20 YRS.
32.5 HOURLY	6788 39.16	6957 40.14	7131 41.14	7310 42.17	7492 43.23	7680 44.31	7872 45.41	8068 46.55	8270 47.71	8689 50.13	9129 52.67	9591 55.33
33.0 HOURLY	6957 40.14	7131 41.14	7310 42.17	7492 43.23	7680 44.31	7872 45.41	8068 46.55	8270 47.71	8477 48.91	8906 51.38	9357 53.98	9831 56.71
33.5 HOURLY	7131 41.14	7310 42.17	7492 43.23	7680 44.31	7872 45.41	8068 46.55	8270 47.71	8477 48.91	8689 50.13	9129 52.67	9591 55.33	10076 58.13
34.0 HOURLY	7310 42.17	7492 43.23	7680 44.31	7872 45.41	8068 46.55	8270 47.71	8477 48.91	8689 50.13	8906 51.38	9357 53.98	9831 56.71	10328 59.59
34.5 HOURLY	7492 43.23	7680 44.31	7872 45.41	8068 46.55	8270 47.71	8477 48.91	8689 50.13	8906 51.38	9129 52.67	9591 55.33	10076 58.13	10586 61.08
35.0 HOURLY	7680 44.31	7872 45.41	8068 46.55	8270 47.71	8477 48.91	8689 50.13	8906 51.38	9129 52.67	9357 53.98	9831 56.71	10328 59.59	10851 62.60
35.5 HOURLY	7872 45.41	8068 46.55	8270 47.71	8477 48.91	8689 50.13	8906 51.38	9129 52.67	9357 53.98	9591 55.33	10076 58.13	10586 61.08	11122 64.17
36.0 HOURLY	8068 46.55	8270 47.71	8477 48.91	8689 50.13	8906 51.38	9129 52.67	9357 53.98	9591 55.33	9831 56.71	10328 59.59	10851 62.60	11400 65.77
36.5 HOURLY	8270 47.71	8477 48.91	8689 50.13	8906 51.38	9129 52.67	9357 53.98	9591 55.33	9831 56.71	10076 58.13	10586 61.08	11122 64.17	11685 67.42

**FOR MADERA MIGRANT/SEASONAL/CMIG, REGIONAL/EARLY/CSPP HEAD START
 FRESNO MIGRANT/SEASONAL/EARLY HEAD START AND ALL OTHER PROGRAMS
 REVISED 06/17/2024**

RANGE #	STEP A	STEP B	STEP C	STEP D	STEP E	STEP F	STEP G	STEP H	STEP I	STEP J 10 YRS,	STEP K 15 YRS.	STEP L 20 YRS.
37.0 HOURLY	8477 48.91	8689 50.13	8906 51.38	9129 52.67	9357 53.98	9591 55.33	9831 56.71	10076 58.13	10328 59.59	10851 62.60	11400 65.77	11978 69.10
37.5 HOURLY	8689 50.13	8906 51.38	9129 52.67	9357 53.98	9591 55.33	9831 56.71	10076 58.13	10328 59.59	10586 61.08	11122 64.17	11685 67.42	12277 70.83
38.0 HOURLY	8906 51.38	9129 52.67	9357 53.98	9591 55.33	9831 56.71	10076 58.13	10328 59.59	10586 61.08	10851 62.60	11400 65.77	11978 69.10	12584 72.60
38.5 HOURLY	9129 52.67	9357 53.98	9591 55.33	9831 56.71	10076 58.13	10328 59.59	10586 61.08	10851 62.60	11122 64.17	11685 67.42	12277 70.83	12899 74.41
39.0 HOURLY	9357 53.98	9591 55.33	9831 56.71	10076 58.13	10328 59.59	10586 61.08	10851 62.60	11122 64.17	11400 65.77	11978 69.10	12584 72.60	13221 76.28
39.5 HOURLY	9591 55.33	9831 56.71	10076 58.13	10328 59.59	10586 61.08	10851 62.60	11122 64.17	11400 65.77	11685 67.42	12277 70.83	12899 74.41	13552 78.18
40.0 HOURLY	9831 56.71	10076 58.13	10328 59.59	10586 61.08	10851 62.60	11122 64.17	11400 65.77	11685 67.42	11978 69.10	12584 72.60	13221 76.28	13890 80.14
40.5 HOURLY	10076 58.13	10328 59.59	10586 61.08	10851 62.60	11122 64.17	11400 65.77	11685 67.42	11978 69.10	12277 70.83	12899 74.41	13552 78.18	14238 82.14

**COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.
FISCAL EXPENDITURE REPORT
FOR THE PERIOD ENDED JUNE 30, 2024**

DEPARTMENT/ PROGRAM TITLE	AMOUNT FUNDED	FUNDS SPENT YTD	BUDGET % YTD	ACTUAL% YTD	PROGRAM DESCRIPTION
CSBG 01/01/2024 - 12/31/2024 218	318,202.00	70,387.16	58.33%	22.12%	Provide social service programs and administrative expenses
CSBG DISCRETIONARY 06/15/2024 - 12/31/2024 217	19,000.00	0.00	58.33%	0.00%	Provide social service programs and administrative expenses
HEAD START & CHILD DEVELOPMENT					
HEAD START REGIONAL 06/1/24 - 05/31/25 311/380	4,499,507.00	279,157.96	16.67%	6.20%	Provide HS services to low income preschool children and families
HEAD START T/TA 06/1/24 - 05/31/25 310	46,025.00	3,161.86	16.67%	6.87%	Provide training for staff and parents
EARLY HEAD START REGIONAL 06/1/24 - 05/31/25 312	823,578.00	111,473.16	16.67%	13.54%	Provide early HS services to 50 low income infant, toddlers and pregnant women
EARLY HEAD START T/TA 06/1/24 - 05/31/25 309	13,373.00	14,762.36	16.67%	110.39%	Provide training for staff and parents
MADERA STATE CSPP/RHS LAYERED 07/01/24 - 06/30/25 319	1,091,317.00	0.00	8.33%	0.00%	Provide child care services to HS preschool children and families
CHILD & ADULT CARE FOOD PROGRAM 10/01/23 - 09/30/24 390	589,855.00	356,773.04	83.33%	60.48%	Provide funds to serve hot meals to HS & state childcare children
MADERA MIGRANT HEAD START 03/01/24 - 02/28/25 321/362	6,158,497.00	1,972,348.98	41.67%	32.03%	Provide HS services to 479 migrant and seasonal children and families
MADERA MIGRANT HS TRAINING 03/01/24 - 02/28/25 320	31,845.00	17,804.03	41.67%	55.91%	Provide training for staff and parents
MADERA MIGRANT CHILD CARE - PART YEAR 07/01/24 - 06/30/25 322/324	970,788.00	0.00	8.33%	0.00%	Provide child care services to migrant eligible infant and toddlers
MADERA MIGRANT CHILD CARE SPECIALIZED SERVICES 07/01/23 - 06/30/24 325	137,096.00	7,634.41	8.33%	5.57%	Provide start up funding for supplies and staff to provide services to migrant eligible infant and toddlers
REGIONAL MADERA COE QUALITY COUNTS 06/01/2024 - 05/31/2025 356	150,862.00	0.00	16.67%	0.00%	Provide low-income children high quality preschool programs with focus on child development, teaching, and program/environment quality

**COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.
FISCAL EXPENDITURE REPORT
FOR THE PERIOD ENDED JUNE 30, 2024**

DEPARTMENT/ PROGRAM TITLE	AMOUNT FUNDED	FUNDS SPENT YTD	BUDGET % YTD	ACTUAL% YTD	PROGRAM DESCRIPTION
FRESNO MIGRANT HEAD START 09/01/23 - 08/31/24 331	5,789,431.00	4,856,349.11	91.67%	83.88%	Provide HS services to to 469 migrant children and families
FRESNO MIGRANT HS -TRAINING 09/01/23 - 08/31/24 330	82,690.00	49,986.47	91.67%	60.45%	Provide training for staff and parents
FRESNO MIGRANT FRESNO COE QUALITY COUNTS 09/01/2023 - 08/31/2024 351	425,811.00	0.00	91.67%	0.00%	Provide low-income children high quality preschool programs with focus on child development, teaching, and program/environment quality
DSS STRENGTHENING FAMILIES 07/01/2024 - 06/30/2025 371	277,136.00	11,458.54	8.33%	4.13%	Provides training and education to parentx to strengthen family relationships

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.
 FISCAL EXPENDITURE REPORT
 FOR THE PERIOD ENDED JUNE 30, 2024

DEPARTMENT/ PROGRAM TITLE	AMOUNT FUNDED	FUNDS SPENT YTD	BUDGET % YTD	ACTUAL% YTD	PROGRAM DESCRIPTION
RESOURCE & REFERRAL:					
CCDF-HEALTH & SAFETY 07/01/24 - 06/30/25 411	7,997.00	0.00	8.33%	0.00%	Training and supplies for child care providers
R & R GENERAL 07/01/24 - 06/30/25 401	294,215.00	14,716.69	8.33%	5.00%	Provide resources and referrals regarding child care and related issues
EMERGENCY CHILD CARE BRIDGE PROGRAM 07/01/24 - 06/30/25 407	307,121.00	3,534.09	8.33%	1.15%	Provide subsidized child care for eligible foster children
CHILD CARE INITIATIVE PROJECT 07/01/24 - 06/30/25 424	55,064.00	2,652.59	8.33%	4.82%	Recruiting and training child care providers for infants and toddlers
ALTERNATIVE PAYMENT 07/01/23 - 06/30/25 429	8,144,824.00	21,098.74	54.17%	0.26%	Provide subsidized child care for eligible families
ALTERNATIVE PAYMENT STAGE 2 07/01/24 - 06/30/25 427	1,785,876.00	10,447.43	8.33%	0.59%	Provide subsidized child care for eligible families
ALTERNATIVE PAYMENT STAGE 3 07/01/24 - 06/30/25 428	1,245,481.00	8,874.69	8.33%	0.71%	Provide subsidized child care for eligible families

**COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.
FISCAL EXPENDITURE REPORT
FOR THE PERIOD ENDED JUNE 30, 2024**

DEPARTMENT/ PROGRAM TITLE	AMOUNT FUNDED	FUNDS SPENT YTD	BUDGET % YTD	ACTUAL% YTD	PROGRAM DESCRIPTION
VICTIM SERVICES:					
RSVP/CALOES (10/01/23 - 09/30/24) 500	358,165.00	244,292.11	83.33%	68.21%	Assist victims of sexual assault
VICTIM WITNESS/CALOES (10/01/23 - 09/30/24) 501	418,989.00	268,332.52	83.33%	64.04%	Assist victims of crime
SHELTER-BASED DOMESTIC VIOLENCE (10/01/23 - 09/30/24) 533	537,587.00	442,052.58	83.33%	82.23%	Provide shelter services for domestic violence victims
DOM. VIO. MARRIAGE LICENSE (07/01/24 - 06/30/25) 502	22,000.00	0.00	8.33%	0.00%	Provides shelter and services to domestic violence victims
DOMESTIC VIOLENCE RESTITUTION (07/01/24 - 06/30/25) 504	4,000.00	0.00	8.33%	0.00%	Provides shelter and services to domestic violence victims
VSC DOMESTIC VIOLENCE GENERAL FUND (07/01/24 - 06/30/25) DONATIONS ONLY 507/525	2,000.00	0.00	8.33%	0.00%	Assist victims of domestic violence
VICTIM SERVICES CENTER FUND (07/01/24 - 06/30/25) DONATIONS ONLY 510	2,500.00	0.00	8.33%	0.00%	Assist with program operations for all Victim Services clients
UNSERVED/UNDERSERVED VICTIM ADVOCACY & OUTREACH (01/01/24 - 12/31/24) 508	163,177.00	102,346.26	58.33%	62.72%	Assist unserved/underserved, primarily Hispanic, victims of crime
TRANSITIONAL HOUSING (01/01/24 - 12/31/24) 531	126,807.00	69,254.15	58.33%	54.61%	Provide long-term shelter services for domestic violence and human trafficking victims
YOUTH AND SPECIALIZED SERVICES:					
CHILD ADVOCACY CENTER (07/01/24 - 06/30/25) 516	1,000.00	0.00	8.33%	0.00%	Provide child sexual assault interviews
CHILD ADVOCACY CENTER (KC) PROGRAM CALOES (04/01/2024 - 03/31/2025) 535	200,000.00	49,148.39	33.33%	24.57%	Provide funding to operate child advocacy center and provide child sexual assault interviews

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.
 FISCAL EXPENDITURE REPORT
 FOR THE PERIOD ENDED JUNE 30, 2024

DEPARTMENT/ PROGRAM TITLE	AMOUNT FUNDED	FUNDS SPENT YTD	BUDGET % YTD	ACTUAL% YTD	PROGRAM DESCRIPTION
COMMUNITY SERVICES - EMERGENCY & OTHER SERVICES:					
FEMA 10/01/23 - 12/31/24 205	2,000.00	998.64	66.67%	49.93%	Administration of the FEMA program
E.C.I.P./LIHEAP (11/01/23 - 06/30/25) 207	560,963.00	475,532.11	45.00%	84.77%	Assistance for low income clients for energy bills and weatherization services
MADERA MENTAL HEALTH PROPERTY MGMT (07/01/24 - 06/30/25) 216	50,000.00	329.63	8.33%	0.66%	Provides property management services for the County of Madera Behavioral Health
EMERGENCY SUPPLEMENTAL LOW INCOME HOME ENERGY ASSISTANCE PROGRAM (ESLIHEAP) (04/15/23 - 05/31/25) 282	797,174.00	212,512.82	60.00%	26.66%	Assistance for low income clients for energy bills and weatherization services

**COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.
FISCAL EXPENDITURE REPORT
FOR THE PERIOD ENDED JUNE 30, 2024**

DEPARTMENT/ PROGRAM TITLE	AMOUNT FUNDED	FUNDS SPENT YTD	BUDGET % YTD	ACTUAL% YTD	PROGRAM DESCRIPTION
COMMUNITY SERVICES - HOMELESS PROGRAMS:					
HEFFERNAN FOUNDATION (07/01/24 - 06/30/25) 221	465.34	0.00	8.33%	0.00%	Provides funding for homeless support and emergency services
SHUNAMMITE PLACE (11/01/23 - 10/31/24) 224	604,468.00	441,160.63	75.00%	72.98%	Provides permanent supportive housing for homeless people with disabilities
ONE-TIME FUNDING HOMELESSNESS (07/01/23 - 06/30/25) 226	10,423.00	5,305.15	54.17%	50.90%	Provides funding for homeless support and emergency services
CITY OF MADERA - CDBG (07/01/24 - 06/30/25) 231	20,000.00	519.89	8.33%	2.60%	Provides funding for Fresno-Madera Continuum of Care and homeless support
HOMELESS HOUSING, ASSISTANCE & PREVENTION (HHAP) BEHAVIORAL HEALTH (06/01/20 - 6/30/25) 246	411,434.26	411,434.26	81.97%	100.00%	Provides rental assistance and rapid rehousing, outreach and coordination, prevention and shelter diversion to permanent housing
HOMELESS HOUSING, ASSISTANCE & PREVENTION (HHAP IV) BEHAVIORAL HEALTH (01/01/24 - 6/30/27) 246	346,709.12	20,806.13	16.67%	6.00%	Provides rental assistance and rapid rehousing, outreach and coordination, prevention and shelter diversion to permanent housing
HOMELESS HOUSING, ASSISTANCE & PREVENTION (HHAP-III) BEHAVIORAL HEALTH (07/01/23 - 06/30/26) 278	421,308.69	352,880.65	36.11%	83.76%	Provides rental assistance and rapid rehousing, outreach and coordination, prevention and shelter diversion to permanent housing
HOUSING & HOMELESSNESS INCENTIVE PROGRAM (HHIP) (04/01/23 - 06/30/25) 281	250,000.00	177,201.53	59.26%	70.88%	Improves health outcomes and access to whole person care services by addressing housing insecurity and instability
HUD COORDINATED ENTRY SUPPORTIVE SERVICES HELP CENTER (11/01/23 - 10/31/24) 284	208,820.00	129,190.97	75.00%	61.87%	Provides coordinated entry supportive housing for homeless people within the FMCoC area

Community Action Partnership of Madera County, Inc.
Consolidated Revenue and Expense
June 30, 2024

F-4B

	<u>Year-To-Date</u> <u>Actual</u>
<u>Revenues</u>	
4110- GRANT INCOME-FEDERAL	26,601,860.00
4120- GRANT INCOME-STATE	8,687,792.57
4130- GRANT INCOME-AREA	423,280.40
4210- DONATIONS	22,425.40
4220- IN KIND CONTRIBUTIONS	2,828,709.78
4315- CHILD CRE REVENUE-STATE	6,016.15
4320- INTEREST INCOME	4,869.71
4330- SALE OF ASSETS	8,000.00
4350- RENTAL INCOME	67,031.34
4360- MEMBERSHIP	23.60
4390- MISCELLANEOUS INCOME	3,721.11
4900- INDIRECT COST REIMBURSEMENT	2,784,636.11
	<hr/>
Total Revenues	41,438,366.17
	<hr/>
<u>Expenses</u>	
5010- SALARIES & WAGES	14,219,961.22
5012- DIRECTOR'S SALARY	156,768.11
5020- ACCRUED VACATION PAY	903,376.64
5112- HEALTH INSURANCE	1,318,408.52
5114- WORKER'S COMPENSATION	410,657.81
5116- PENSION	755,447.27
5122- FICA	1,138,913.27
5124- SUI	153,747.07
5125- DIRECTOR'S FRINGE	81,874.44
5130- ACCRUED VACATION FICA	57,088.88
6110- OFFICE SUPPLIES	121,253.65
6112- DATA PROCESSING SUPPLIES	592,777.29
6121- FOOD	493,067.70
6122- KITCHEN SUPPLIES	75,434.86
6130- PROGRAM SUPPLIES	2,135,862.10
6132- MEDICAL & DENTAL SUPPLIES	42,041.71
6134- INSTRUCTIONAL SUPPLIES	70,186.08
6140- CUSTODIAL SUPPLIES	113,812.37
6142- LINEN/LAUNDRY	18.50
6143- FURNISHINGS	160,601.63
6150- UNIFORM RENTAL/PURCHASE	600.00
6160- RESALE ITEMS	427.76
6170- POSTAGE & SHIPPING	29,377.05

6180- EQUIPMENT RENTAL	171,012.18
6181- EQUIPMENT MAINTENANCE	86,120.70
6221- EQUIPMENT OVER > \$5000	559,544.86
6310- PRINTING & PUBLICATIONS	45,178.29
6312- ADVERTISING & PROMOTION	5,627.28
6320- TELEPHONE	27,937.94
6410- RENT	1,524,603.84
6420- UTILITIES/ DISPOSAL	522,046.67
6432- BUILDING REPAIRS/ MAINTENANCE	605,379.85
6433- GROUNDS MAINTENANCE	402,231.41
6436- PEST CONTROL	31,049.19
6437- BURGLAR & FIRE ALARM	31,944.86
6440- PROPERTY INSURANCE	108,755.02
6510- AUDIT	83,000.00
6520- CONSULTANTS	173,678.98
6522- CONSULTANT EXPENSES	6,144.99
6524- CONTRACTS	261,351.47
6530- LEGAL	80,916.18
6540- CUSTODIAL SERVICES	132,725.00
6555- MEDICAL SCREENING/DEAT/STAFF	15,205.00
6610- GAS & OIL	57,936.37
6620- VEHICLE INSURANCE	114,727.50
6640- VEHICLE REPAIR & MAINTENANCE	58,138.63
6712- STAFF TRAVEL-LOCAL	22,562.23
6714- STAFF TRAVEL-OUT OF AREA	96,430.19
6722- PER DIEM - STAFF	5,038.00
6730- VOLUNTEER TRAVEL	15,417.08
6742- TRAINING - STAFF	112,873.22
6744- TRAINING - VOLUNTEER	7,227.00
6750- FIELD TRIPS	630.00
6810- BANK CHARGES	6,343.14
6832- LIABILITY INSURANCE	7,082.58
6834- STUDENT ACTIVITY INSURANCE	6,393.50
6840- PROPERTY TAXES	9,517.91
6850- FEES & LICENSES	121,690.03
6851- CPR FEES	6,233.00
6852- FINGERPRINT	4,734.50
6875- EMPLOYEE HEALTH & WELFARE	36,033.22
6890- MISCELLANEOUS EXPENSE	79.80
7110- PARENT ACTIVITIES	476.63
7111- PARENT MILEAGE	575.72
7112- PARENT INVOLVEMENT	8,057.19
7114- PC ALLOWANCE	4,245.00
7116- POLICY COUNCIL FOOD ALLOWANCE	1,516.26
7210- TRANSPORTATION VOUCHERS	1,225.67
7224- CLIENT RENT	114,577.74
7226- CLIENT LODGING/SHELTER	151,021.00

7230- CLIENT FOOD	2,603.08
7240- DIRECT BENEFITS	6,995,697.81
7245- DIRECT BENEFITS - STATE	6,016.15
7250- FURNACE REPAIRS/REPLACEMENT	10,164.03
8110- IN KIND SALARIES	2,293,412.91
8120- IN KIND RENT	502,267.52
8130- IN KIND - OTHER	33,029.35
9010- INDIRECT COST ALLOCATION	<u>2,784,636.11</u>
Total Expenses	<u>41,504,767.71</u>
Excess Revenue Over (Under) Expenditures	<u><u>(66,401.54)</u></u>

**Community Action Partnership of Madera County, Inc.
Consolidated Statement of Financial Position by Object
June 30, 2024**

F-4A

	<u>This Year</u>
Assets	
1113- CASH IN WESTAMERICA PAYROLL CK	6,200.50
1116- CASH IN WESTAMERICA HEAD START MONEY MARKET	2,516.69
1117- CASH IN WESTAMERICA ACCTS PAYABLE CHECKING	70,585.22
1122- SAVINGS - WESTAMERICA	8,507,265.86
1130- PETTY CASH	710.00
1310- GRANTS RECEIVABLE	2,518,614.91
1320- ACCOUNTS RECEIVABLE	65,236.53
1322- A/R INTERSTATE ASSOC. - CHURCH OF GOD	0.00
1323- A/R IGNITE MY CITY CHURCH	348.04
1328- EMPLOYEE & TRAVEL ADVANCES	141.00
1329- ADVANCE CLEARING	8,225.29
1410- PREPAID EXPENSES	151,442.89
1420- SECURITY DEPOSITS	48,616.04
1421- WORKERS' COMP DEPOSIT	130,404.25
1450- INVENTORY	38,263.54
1512- EQUIPMENT	1,789,438.11
1513- VEHICLES	1,456,116.88
1514- BUILDINGS	4,021,500.45
1515- LAND IMPROVEMENTS	190,835.13
1516- BUILDING IMPROVEMENTS	427,857.12
1519- LAND	59,005.00
1522- ACC DEPR - EQUIPMENT	(1,261,781.01)
1523- ACC DEPR - VEHICLES	(979,676.53)
1524- ACC DEPR - BUILDINGS	(3,453,889.91)
1525- ACC DEPR - LAND IMPROVE.	(171,194.44)
1526- ACC DEPR - BUILDING IMPROVE.	(158,846.74)
1590- ROU ASSETS - OPERATING LEASES	4,265,259.00
Total Assets	<u><u>17,733,193.82</u></u>
Liabilities and Net Assets	
2101- ACCOUNTS PAYABLE	1,516,683.04
2111- ACCOUNTS PAYABLE - MANUAL	44,415.17
2112- ACCOUNTS PAY-FUNDING SOURCE	715,598.24
2115- A/P OTHERS	4,049.62
2121- ACCRUED PAYROLL	363,404.10
2122- ACCRUED VACATION	1,135,413.03
2123- ACCRUED PAYROLL - MANUAL	849.40
2211- FICA PAYABLE	74,102.75
2212- FICA-MED PAYABLE	17,330.60

2213- FIT PAYABLE	36,946.00
2215- SIT PAYABLE	17,751.27
2216- SDI PAYABLE	6,574.05
2217- SUI PAYABLE	6,270.05
2220- WORKER'S COMP PAYABLE	93,542.77
2231- RETIREMENT PAYABLE-ER CONTRIB	892,237.33
2232- W/H RETIREMENT	(50.00)
2244- KAISER MID20	(3,211.27)
2245- KAISER HIGH15	(13,015.61)
2248- KAISER LOW30	702.79
2249- KAISER DHMO40	520.55
2252- SELF INSURANCE - LIFE & ADD	820.82
2253- VISION INSURANCE PAYABLE	1,317.35
2254- SELF INSURANCE - DENTAL	56,743.30
2258- TELEMEDICINE	44.00
2260- MADERA RHS PARENT GROUPS	552.34
2262- FRESNO MHS PARENT GROUPS	2,130.16
2264- MCAC EMP FUND-UNIFICATION	64.15
2265- FRESNO - EDS - FUNDS	1,854.17
2266- R & R PROGRAM	3,486.17
2410- DEFERRED GRANT REVENUE	5,649,437.28
2415- RESERVE ACCOUNT	61,438.00
2420- OTHER DEFERRED REVENUE	(70,072.87)
2690- OPERATING LEASE LIABILITY	4,265,259.00
	<hr/>
Total Liabilities	14,883,187.75
3000- NET ASSETS W/O DONOR RESTRICTIONS	549,731.79
3050- NET ASSETS - BOARD DESIGNATED	560,000.00
3100- NET ASSETS - RESTRICTED FIXED ASSETS	1,806,675.82
Change in Net Assets	(66,401.54)
	<hr/>
Total Net Assets	2,850,006.07
	<hr/>
Total Liabilities and Net Assets	17,733,193.82
	<hr/> <hr/>

Fresno Migrant Head Start
Budget to Actual (331 Basic)
Period Ending June-24

Account Description	Current Period	Current Mth YTD	Prior Mth YTD	Current vs Budget YTD	YTD Budget	% Spent	Encumbered	YTD Actual + Encumbered	Budget Balance
REVENUES									
4110 GRANT INCOME-FEDERAL	688,662.48	4,369,903.57	3,681,241.09	302,234.07	4,067,669.50	75.48%	33,703.36	4,403,606.93	1,385,824.07
4130 GRANT INCOME-AREA	0.00			-		0.00%	0.00	0.00	0.00
4210 DONATIONS	0.00			-		0.00%	0.00	0.00	0.00
4220 IN KIND CONTRIBUTIONS	56,643.56	631,177.74	574,534.18	68,572.74	562,605.00	78.82%	0.00	631,177.74	169,566.26
4330- SALE OF ASSETS	0.00			-		0.00%	0.00	0.00	0.00
4390 MISC INCOME	0.00			-		0.00%	0.00	0.00	0.00
TOTAL REVENUES	745,306.04	5,001,081.31	4,255,775.27	370,806.81	4,630,274.50	75.89%	33,703.36	5,034,784.67	1,555,390.33
5010 SALARIES & WAGES	382,227.81	2,478,412.00	2,096,184.19	289,552.50	2,188,859.50	76.15%	0.00	2,478,412.00	776,186.00
5012- DIRECTOR'S SALARY	0.00			-		0.00%		0.00	0.00
5019- SALARIES & WAGES C19	0.00			-		0.00%		0.00	0.00
5020 ACCRUED VACATION PAY	23,758.46	157,843.95	134,085.49	20,142.95	137,701.00	76.98%	0.00	157,843.95	47,205.05
5112 HEALTH INSURANCE	26,435.56	154,529.34	128,093.78	(21,344.66)	175,874.00	63.93%	0.00	154,529.34	87,184.66
5114 WORKER'S COMPENSATION	13,562.74	88,596.36	75,033.62	30,444.36	58,152.00	102.46%	0.00	88,596.36	(2,124.36)
5115- Worker's Compensation C19	0.00			-		0.00%		0.00	0.00
5116 PENSION	27,219.28	164,894.90	137,675.62	29,292.90	135,602.00	81.14%	0.00	164,894.90	38,340.10
5117- Pension C19	0.00			-		0.00%		0.00	0.00
5121- FICA C19	0.00			-		0.00%		0.00	0.00
5122 FICA	29,755.20	205,734.17	175,978.97	67,295.17	138,439.00	99.95%	0.00	205,734.17	106.83
5124 SUI	8,799.08	36,405.24	27,606.16	9,213.24	27,192.00	87.53%	0.00	36,405.24	5,184.76
5125- DIRECTOR'S FRINGE	0.00			-		0.00%		0.00	0.00
5130 ACCRUED VACATION FRINGE	1,817.61	12,031.45	10,213.84	3,209.45	8,822.00	91.57%	0.00	12,031.45	1,107.55
6714 STAFF TRAVEL-OUT OF AREA	144.00	2,037.01	1,893.01	2,037.01	0.00	0.00%	0.00	2,037.01	(2,037.01)
6722 PER DIEM - STAFF	0.00			-		0.00%		0.00	0.00
6221 EQUIPMENT OVER > \$5000	0.00	34,407.80	34,407.80	(13,592.20)	48,000.00	71.68%	0.00	34,407.80	13,592.20
6110 OFFICE SUPPLIES	2,124.60	9,008.05	6,883.45	(2,163.95)	11,172.00	62.12%	5,308.92	14,316.97	183.03
6112 DATA PROCESSING SUPPLIES	6,311.95	93,159.26	86,847.31	35,819.26	57,340.00	133.08%	1,558.73	94,717.99	(24,717.99)
6121 FOOD	0.00	7,402.40	7,402.40	406.40	6,996.00	70.50%	0.00	7,402.40	3,097.60
6122 KITCHEN SUPPLIES	163.97	5,831.52	5,667.55	4,831.52	1,000.00	583.15%	317.70	6,149.22	(5,149.22)
6130 PROGRAM SUPPLIES	26,674.45	87,138.11	60,463.66	30,736.11	56,402.00	118.24%	6,261.94	93,400.05	(19,704.05)
6134 INSTRUCTIONAL SUPPLIES	4,309.38	4,309.38	0.00	977.38	3,332.00	86.19%	0.00	4,309.38	690.62
6140 CUSTODIAL SUPPLIES	6,665.15	14,597.92	7,932.77	4,347.92	10,250.00	97.32%	0.00	14,597.92	402.08
6142 LINEN/LAUNDRY	0.00			-	0.00	0.00%		0.00	0.00
6143 FURNISHINGS	2,051.39	2,227.19	175.80	2,227.19	0.00	0.00%	0.00	2,227.19	(2,227.19)
6170 POSTAGE & SHIPPING	26.40	533.67	507.27	(90.33)	624.00	71.16%	0.00	533.67	216.33
6132 MEDICAL & DENTAL SUPPLIES	2,080.47	6,901.54	4,821.07	2,737.54	4,164.00	55.21%	3,902.88	10,804.42	1,695.58
6150 UNIFORM RENTAL/PURCHASE	0.00	300.00	300.00	300.00	0.00	0.00%	0.00	300.00	(300.00)
6180 EQUIPMENT RENTAL	2,425.46	35,126.71	32,701.25	5,132.71	29,994.00	97.57%	0.00	35,126.71	873.29
6181 EQUIPMENT MAINTENANCE	2,999.89	25,947.36	22,947.47	5,113.36	20,834.00	103.79%	0.00	25,947.36	(947.36)
6212 EQUIPMENT PURCHASES < \$500	0.00			-		0.00%		0.00	0.00
6214 EQUIPMENT OVER > 500	0.00			-		0.00%		0.00	0.00
6216 EQUIPMENT OVER > \$1000	0.00			-		0.00%		0.00	0.00
6231 BUILDING RENOVATION	0.00			-		0.00%		0.00	0.00
6232 BUILDING IMPROVEMENTS	0.00			-		0.00%		0.00	0.00
6310 PRINTING & PUBLICATIONS	4,766.89	17,395.20	12,628.31	14,123.20	3,272.00	347.90%	0.00	17,395.20	(12,395.20)
6312 ADVERTISING & PROMOTION	0.00	161.64	161.64	161.64	0.00	0.00%	0.00	161.64	(161.64)
6320 TELEPHONE	1,442.84	(35,413.81)	(36,856.65)	(160,423.81)	125,010.00	-23.61%	0.00	(35,413.81)	185,413.81
6410 RENT	17,889.49	112,909.60	95,020.11	43,574.60	69,335.00	135.71%	0.00	112,909.60	(29,707.60)
6420 UTILITIES/ DISPOSAL	8,042.25	57,831.30	49,789.05	(4,668.70)	62,500.00	77.11%	0.00	57,831.30	17,168.70
6432 BUILDING REPAIRS/ MAINT	7,222.31	46,943.09	39,720.78	(119,736.91)	166,680.00	23.47%	0.00	46,943.09	153,056.91
6433 GROUNDS MAINTENANCE	4,872.77	29,565.08	24,692.31	(5,434.92)	35,000.00	70.39%	0.00	29,565.08	12,434.92
6436 PEST CONTROL	667.98	6,900.81	6,232.83	650.81	6,250.00	92.01%	0.00	6,900.81	599.19
6437 BURGLAR & FIRE ALARM	3,209.28	6,179.99	2,970.71	95.99	6,084.00	95.08%	0.00	6,179.99	320.01
6440 PROPERTY INSURANCE	2,180.38	20,777.62	18,597.24	9,192.62	11,585.00	150.62%	0.00	20,777.62	(6,982.62)
6520 CONSULTANTS	85.80	11,860.37	11,774.57	5,196.37	6,664.00	118.60%	10,000.00	21,860.37	(11,860.37)
6522 CONSULTANT EXPENSES	0.00	97.82	97.82	(894.18)	992.00	6.52%	0.00	97.82	1,402.18

**Fresno Migrant Head Start
Budget to Actual (331 Basic)
Period Ending June-24**

Account Description	Current	Current Mth	Prior Mth	Current vs Budget	YTD	% Spent	Encumbered	YTD Actual +	
	Period	YTD	YTD	YTD	Budget			Encumbered	Budget Balance
6524 CONTRACTS	0.00	0.00	0.00	(10,000.00)	10,000.00	0.00%	0.00	0.00	15,000.00
6530 LEGAL	2,905.50	7,561.75	4,656.25	6,061.75	1,500.00	504.12%	0.00	7,561.75	(6,061.75)
6540 CUSTODIAL SERVICES	1,905.00	6,777.00	4,872.00	2,797.00	3,980.00	141.90%	0.00	6,777.00	(2,001.00)
6555 MEDICAL SCREENING/DEAT/S	225.00	1,190.00	965.00	590.00	600.00	119.00%	0.00	1,190.00	(190.00)
6562 MEDICAL EXAM	0.00	-	-	-	-	0.00%	-	0.00	0.00
6564 MEDICAL FOLLOW-UP	0.00	-	-	-	-	0.00%	-	0.00	0.00
6566 DENTAL EXAM	0.00	-	-	-	-	0.00%	-	0.00	0.00
6568 DENTAL FOLLOW-UP	0.00	-	-	-	-	0.00%	-	0.00	0.00
6610 GAS & OIL	1,503.02	9,878.60	8,375.58	(1,921.40)	11,800.00	65.86%	0.00	9,878.60	5,121.40
6620 VEHICLE INSURANCE	2,187.82	22,556.78	20,368.96	3,806.78	18,750.00	112.78%	0.00	22,556.78	(2,556.78)
6630 VEHICLE LICENSE AND FEES	0.00	-	-	-	-	0.00%	-	0.00	2,500.00
6640 VEHICLE REPAIR & MAINTENANCE	1,360.50	10,735.78	9,375.28	(9,264.22)	20,000.00	42.94%	0.00	10,735.78	14,264.22
6712 STAFF TRAVEL-LOCAL	620.95	10,662.13	10,041.18	658.13	10,004.00	71.08%	0.00	10,662.13	4,337.87
6724 PER DIEM - PARENT	0.00	-	-	-	-	0.00%	-	0.00	0.00
6730 VOLUNTEER TRAVEL	0.00	-	-	-	-	0.00%	-	0.00	0.00
6742 TRAINING - STAFF	103.85	3,244.42	3,140.57	3,244.42	0.00	0.00%	0.00	3,244.42	(3,244.42)
6744 TRAINING - VOLUNTEER	0.00	-	-	-	-	0.00%	-	0.00	0.00
6745 TRAINING - PARTICIPANTS/CLIENTS	0.00	-	-	-	-	0.00%	-	0.00	0.00
6746 TRAINING - PARENT	0.00	-	-	-	-	0.00%	-	0.00	0.00
6748 EDUCATION REIMBURSEMENT	0.00	0.00	0.00	(5,000.00)	5,000.00	0.00%	0.00	0.00	10,000.00
6750 FIELD TRIPS	0.00	-	-	-	-	0.00%	-	0.00	0.00
6820 INTEREST EXPENSE	0.00	-	-	-	-	0.00%	-	0.00	0.00
6832 LIABILITY INSURANCE	39.28	392.80	353.52	(27.20)	420.00	77.94%	0.00	392.80	111.20
6834 STUDENT ACTIVITY INSURAN	179.25	1,031.17	851.92	315.17	716.00	96.01%	0.00	1,031.17	42.83
6840 PROPERTY TAXES	0.00	2,034.46	2,034.46	(3,765.54)	5,800.00	35.08%	0.00	2,034.46	3,765.54
6850 FEES & LICENSES	33.00	23,256.14	23,223.14	4,822.14	18,434.00	105.71%	3,542.00	26,798.14	(4,798.14)
6851 CPR FEES	0.00	-	-	-	-	0.00%	-	0.00	0.00
6852 FINGER PRINTING	75.50	226.50	151.00	(2,673.50)	2,900.00	5.96%	0.00	226.50	3,573.50
6860 DEPRECIATION EXPENSE	0.00	-	-	-	-	0.00%	-	0.00	0.00
6870 EMPLOYEE RECOGNITION	0.00	-	-	-	-	0.00%	-	0.00	0.00
6875- EMPLOYEE HEALTH & WELFARE	0.00	5,079.24	5,079.24	(1,295.76)	6,375.00	79.67%	0.00	5,079.24	1,295.76
6892 CASH SHORT/OVER	0.00	-	-	-	-	0.00%	-	0.00	0.00
7110 PARENT ACTIVITIES	149.83	314.68	164.85	(555.32)	870.00	21.70%	0.00	314.68	1,135.32
7111- PARENT MILEAGE	0.00	-	-	-	-	0.00%	-	0.00	0.00
7112 PARENT INVOLVEMENT	0.00	335.61	335.61	335.61	0.00	0.00%	0.00	335.61	(335.61)
7114 PC ALLOWANCE	0.00	420.00	420.00	(700.00)	1,120.00	25.00%	0.00	420.00	1,260.00
7116 PC FOOD	0.00	-	-	-	-	0.00%	-	0.00	0.00
8110 INKIND SALARIES	39,240.81	488,147.77	448,906.96	44,888.77	443,259.00	84.00%	0.00	488,147.77	92,974.23
8120 INKIND RENT	14,907.75	140,534.97	125,627.22	22,844.97	117,690.00	64.68%	0.00	140,534.97	76,731.03
8130 INKIND OTHER	2,495.00	2,495.00	-	839.00	1,656.00	105.90%	0.00	2,495.00	(139.00)
9010 INDIRECT EXPENSE	57,441.14	361,622.47	304,181.33	26,343.47	335,279.00	75.51%	2,811.19	364,433.66	114,457.34
TOTAL EXPENSES	745,306.04	5,001,081.31	4,255,775.27	370,806.81	4,630,274.50	75.89%	33,703.36	5,034,784.67	1,555,390.33
CHANGE IN NET ASSETS	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

	TOTAL YTD	9.1%
	INDIRECT EXP	INDIRECT EXP
Prior Mth	3,342,651.96	304,181.33
Curr Mth	3,973,873.30	361,622.47

Administrative	
YTD Expense	4,417,848.83
YTD Inkind	631,177.74
	<u>5,049,026.57</u>
YTD Admin	442,023.00
YTD %	8.75%

**Fresno Migrant Head Start
Budget to Actual (330 T&TA)
Period Ending June-24**

Account Description		Grant Budget	Current Period	Current Mth YTD	Prior Month YTD	YTD Budget	% Spent	Encumbered	YTD Actual + Encumbered	Budget Balance
REVENUES										
4110 GRANT INCOME-FEDERAL		82,690.00	848.64	47,945.26	47,096.62	0.00	57.98%	1,798.01	49,743.27	32,946.73
4130 GRANT INCOME-AREA		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
4210 DONATIONS		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
4220 IN KIND CONTRIBUTIONS		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
4390 MISC INCOME		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
TOTAL REVENUES		82,690.00	848.64	47,945.26	47,096.62	0.00	57.98%	1,798.01	49,743.27	32,946.73
5010 SALARIES & WAGES	6A	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
5020 ACCRUED VACATION PAY	6A	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
5112 HEALTH INSURANCE	6B	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
5114 WORKER'S COMPENSATION	6B	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
5116 PENSION	6B	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
5122 FICA	6B	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
5124 SUI	6B	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
5130 ACCRUED VACATION FRINGE	6B	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6714 STAFF TRAVEL-OUT OF AREA	6C	9,540.00	130.92	9,821.14	9,690.22	0.00	102.95%	0.00	9,821.14	(281.14)
6722 PER DIEM - STAFF	6C	3,492.00	(726.00)	0.00	726.00	0.00	0.00%	0.00	0.00	3,492.00
6221 EQUIPMENT OVER > \$5000	6D	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6110 OFFICE SUPPLIES	6E	4,806.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	4,806.00
6112 DATA PROCESSING SUPPLIES	6E	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6121 FOOD	6E	0.00	624.51	9,056.43	8,431.92	0.00	0.00%	0.00	9,056.43	(9,056.43)
6122 KITCHEN SUPPLIES	6E	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6130 PROGRAM SUPPLIES	6E	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6134 INSTRUCTIONAL SUPPLIES	6E	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6140 CUSTODIAL SUPPLIES	6E	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6142 LINEN/LAUNDRY	6E	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6143 FURNISHINGS	6E	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6170 POSTAGE & SHIPPING	6E	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6132 MEDICAL & DENTAL SUPPLIES	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6150 UNIFORM RENTAL/PURCHASE	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6180 EQUIPMENT RENTAL	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6181 EQUIPMENT MAINTENANCE	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6212 EQUIPMENT PURCHASES < \$500	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6214 EQUIPMENT OVER > 500	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6216 EQUIPMENT OVER > \$1000	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6231 BUILDING RENOVATION	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6232 BUILDING IMPROVEMENTS	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6310 PRINTING & PUBLICATIONS	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6312 ADVERTISING & PROMOTION	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6320 TELEPHONE	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6410 RENT	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6420 UTILITIES/ DISPOSAL	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6432 BUILDING REPAIRS/ MAINTENANCE	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6433 GROUNDS MAINTENANCE	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6436 PEST CONTROL	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6437 BURGLAR & FIRE ALARM	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6440 PROPERTY INSURANCE	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6520 CONSULTANTS	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6522 CONSULTANT EXPENSES	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6524 CONTRACTS	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6530 LEGAL	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00

Fresno Migrant Head Start
Budget to Actual (330 T&TA)
Period Ending June-24

Account Description	Grant Budget	Current Period	Current Mth YTD	Prior Month YTD	YTD Budget	% Spent	Encumbered	YTD Actual + Encumbered	Budget Balance	
6540 CUSTODIAL SERVICES	6H	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00	
6555 MEDICAL SCREENING/DEAT/S	6H	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00	
6562 MEDICAL EXAM	6H	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00	
6564 MEDICAL FOLLOW-UP	6H	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00	
6566 DENTAL EXAM	6H	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00	
6568 DENTAL FOLLOW-UP	6H	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00	
6610 GAS & OIL	6H	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00	
6620 VEHICLE INSURANCE	6H	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00	
6630 VEHICLE LICENSE AND FEES	6H	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00	
6640 VEHICLE REPAIR & MAINTENANCE	6H	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00	
6712 STAFF TRAVEL-LOCAL	6H	0.00	0.00	98.00	98.00	0.00%	0.00	98.00	(98.00)	
6724 PER DIEM - PARENT	6H	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00	
6730 VOLUNTEER TRAVEL	6H	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00	
6742 TRAINING - STAFF	6H	57,955.00	38.00	19,370.12	19,332.12	0.00	33.42%	1,648.04	21,018.16	36,936.84
6744 TRAINING - VOLUNTEER	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6745 TRAINING - PARTICIPANTS/CLIENTS	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6746 TRAINING - PARENT	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6748 EDUCATION REIMBURSEMENT	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6750 FIELD TRIPS	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6820 INTEREST EXPENSE	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6832 LIABILITY INSURANCE	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6834 STUDENT ACTIVITY INSURAN	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6840 PROPERTY TAXES	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6850 FEES & LICENSES	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6851 CPR FEES	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6852 FINGER PRINTING	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6860 DEPRECIATION EXPENSE	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6870 EMPLOYEE RECOGNITION	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
6875- EMPLOYEE HEALTH & WELFARE	6H	0.00	710.43	5,600.47	4,890.04	0.00	0.00%	0.00	5,600.47	(5,600.47)
6892 CASH SHORT/OVER	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
7110 PARENT ACTIVITIES	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
7111- PARENT MILEAGE	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
7112 PARENT INVOLVEMENT	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
7114 PC ALLOWANCE	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
7116 PC FOOD	6H	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
8110 INKIND SALARIES		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
8120 INKIND RENT		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
8130 INKIND OTHER		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	0.00
9010 INDIRECT EXPENSE	6J	6,897.00	70.78	3,999.10	3,928.32	0.00	57.98%	149.97	4,149.07	2,747.93
TOTAL EXPENSES		82,690.00	848.64	47,945.26	47,096.62	0.00	57.98%	1,798.01	49,743.27	32,946.73
CHANGE IN NET ASSETS		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Contract 60.16%

**Cross-Year Rev/ Exp by Fund/ Obj w Encumbrances/w Net Assets
June 30, 2024**

<u>224 0 HUD SHUNAMMITE PLACE</u>	<u>Grant Budget</u>	<u>Current Month Actual</u>	<u>YTD Actual June 30, 2024</u>	<u>YTD Budget June 30, 2024</u>	<u>% Spent</u>	<u>YTD Encumbrance</u>	<u>Actual Plus Encumbrance</u>	<u>Budget Balance</u>
<u>Revenues</u>								
4110- GRANT INCOME-FEDERAL	\$604,468.00	\$45,444.44	\$399,624.84	\$0.00	(0.66)	\$0.00	\$399,624.84	\$204,843.16
4220- IN KIND CONTRIBUTIONS	0.00	3,159.85	17,387.76	0.00	0.00	0.00	17,387.76	(17,387.76)
4350- RENTAL INCOME	0.00	5,992.27	44,870.67	0.00	0.00	0.00	44,870.67	(44,870.67)
Total Revenues	<u>604,468.00</u>	<u>54,596.56</u>	<u>461,883.27</u>	<u>0.00</u>	<u>(0.76)</u>	<u>0.00</u>	<u>461,883.27</u>	<u>142,584.73</u>
<u>Expenses</u>								
5010- SALARIES & WAGES	\$174,802.00	\$15,615.33	\$135,900.63	\$0.00	0.78	\$0.00	\$135,900.63	\$38,901.37
5020- ACCRUED VACATION PAY	0.00	825.09	6,681.83	0.00	0.00	0.00	6,681.83	(6,681.83)
5112- HEALTH INSURANCE	23,870.00	2,293.75	18,311.85	0.00	0.77	0.00	18,311.85	5,558.15
5114- WORKER'S COMPENSATION	6,343.00	715.18	5,456.61	0.00	0.86	0.00	5,456.61	886.39
5116- PENSION	6,992.00	622.56	6,187.97	0.00	0.89	0.00	6,187.97	804.03
5122- FICA	13,372.00	1,253.63	11,067.37	0.00	0.83	0.00	11,067.37	2,304.63
5124- SUI	1,550.00	0.00	1,814.25	0.00	1.17	0.00	1,814.25	(264.25)
5130- ACCRUED VACATION FICA	0.00	15.04	(248.55)	0.00	0.00	0.00	(248.55)	248.55
6110- OFFICE SUPPLIES	897.00	14.09	719.72	0.00	0.80	0.00	719.72	177.28
6112- DATA PROCESSING SUPPLIES	6,250.00	11.05	322.91	0.00	0.05	0.00	322.91	5,927.09
6122- KITCHEN SUPPLIES	0.00	0.00	377.18	0.00	0.00	0.00	377.18	(377.18)
6130- PROGRAM SUPPLIES	7,500.00	303.36	3,972.34	0.00	0.53	0.00	3,972.34	3,527.66
6132- MEDICAL & DENTAL SUPPLIES	450.00	0.00	0.00	0.00	0.00	0.00	0.00	450.00
6140- CUSTODIAL SUPPLIES	1,500.00	0.00	947.03	0.00	0.63	0.00	947.03	552.97
6143- FURNISHINGS	20,000.00	265.42	8,543.89	0.00	0.43	0.00	8,543.89	11,456.11
6170- POSTAGE & SHIPPING	115.00	0.00	0.00	0.00	0.00	0.00	0.00	115.00
6180- EQUIPMENT RENTAL	770.00	59.33	475.14	0.00	0.62	0.00	475.14	294.86
6181- EQUIPMENT MAINTENANCE	2,310.00	202.99	1,420.04	0.00	0.61	0.00	1,420.04	889.96
6310- PRINTING & PUBLICATIONS	165.00	0.00	0.00	0.00	0.00	0.00	0.00	165.00
6320- TELEPHONE	6,450.00	1,058.12	7,032.53	0.00	1.09	0.00	7,032.53	(582.53)
6410- RENT	235,481.00	20,675.18	165,099.58	0.00	0.70	0.00	165,099.58	70,381.42
6420- UTILITIES/ DISPOSAL	29,370.00	1,790.96	13,829.40	0.00	0.47	0.00	13,829.40	15,540.60
6432- BUILDING REPAIRS/ MAINTENANCE	7,440.00	0.00	10,439.67	0.00	1.40	0.00	10,439.67	(2,999.67)
6433- GROUNDS MAINTENANCE	2,400.00	40.00	670.00	0.00	0.28	0.00	670.00	1,730.00
6440- PROPERTY INSURANCE	2,520.00	242.96	1,947.45	0.00	0.77	0.00	1,947.45	572.55
6530- LEGAL	7,000.00	2,043.75	10,090.63	0.00	1.44	0.00	10,090.63	(3,090.63)
6540- CUSTODIAL SERVICES	5,580.00	330.00	3,079.00	0.00	0.55	0.00	3,079.00	2,501.00
6562- MEDICAL EXAM	750.00	0.00	0.00	0.00	0.00	0.00	0.00	750.00
6564- MEDICAL FOLLOW-UP	1,000.00	0.00	0.00	0.00	0.00	0.00	0.00	1,000.00

**Cross-Year Rev/ Exp by Fund/ Obj w Encumbrances/w Net Assets
June 30, 2024**

	<u>Grant</u>	<u>Current</u>	<u>YTD Actual</u>	<u>YTD</u>		<u>YTD</u>	<u>Actual Plus</u>	<u>Budget</u>
	<u>Budget</u>	<u>Month</u>	<u>June 30,</u>	<u>June 30,</u>	<u>% Spent</u>	<u>Encumbrance</u>	<u>Encumbrance</u>	<u>Balance</u>
<u>224 0 HUD SHUNAMMITE PLACE</u>		<u>Actual</u>	<u>2024</u>	<u>2024</u>				
6566- DENTAL EXAM	750.00	0.00	0.00	0.00	0.00	0.00	0.00	750.00
6568- DENTAL FOLLOW-UP	1,000.00	0.00	0.00	0.00	0.00	0.00	0.00	1,000.00
6610- GAS & OIL	1,365.00	114.55	1,825.64	0.00	1.34	0.00	1,825.64	(460.64)
6620- VEHICLE INSURANCE	1,800.00	514.91	4,119.28	0.00	2.29	0.00	4,119.28	(2,319.28)
6630- VEHICLE LICENSE & FEES	150.00	0.00	0.00	0.00	0.00	0.00	0.00	150.00
6640- VEHICLE REPAIR & MAINTENANCE	320.00	0.00	766.52	0.00	2.40	0.00	766.52	(446.52)
6712- STAFF TRAVEL-LOCAL	735.00	43.55	371.70	0.00	0.51	0.00	371.70	363.30
6742- TRAINING - STAFF	3,000.00	0.00	0.00	0.00	0.00	0.00	0.00	3,000.00
6745- TRAINING - PARTICIPANT/CLIENTS	400.00	0.00	0.00	0.00	0.00	0.00	0.00	400.00
6832- LIABILITY INSURANCE	25.00	1.40	10.92	0.00	0.44	0.00	10.92	14.08
6850- FEES & LICENSES	704.00	0.00	1,086.61	0.00	1.54	0.00	1,086.61	(382.61)
6875- EMPLOYEE HEALTH & WELFARE	100.00	0.00	0.00	0.00	0.00	0.00	0.00	100.00
7210- TRANSPORTATION VOUCHERS	500.00	0.00	0.00	0.00	0.00	0.00	0.00	500.00
7230- CLIENT FOOD	400.00	0.00	50.00	0.00	0.13	0.00	50.00	350.00
8110- IN KIND SALARIES	0.00	0.00	7,384.16	0.00	0.00	0.00	7,384.16	(7,384.16)
8130- IN KIND - OTHER	0.00	3,159.85	10,003.60	0.00	0.00	0.00	10,003.60	(10,003.60)
9010- INDIRECT COST ALLOCATION	28,342.00	2,347.00	22,126.37	0.00	0.78	0.00	22,126.37	6,215.63
Total Expenses	<u>\$604,468.00</u>	<u>\$54,559.05</u>	<u>\$461,883.27</u>	<u>\$0.00</u>	<u>0.76</u>	<u>\$0.00</u>	<u>\$461,883.27</u>	<u>\$142,584.73</u>
Excess Revenue Over (Under) Expenditures	\$0.00	\$37.51	\$0.00	\$0.00	0.00	\$0.00	\$0.00	\$0.00
Beginning Net Assets - Unrestricted	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Beginning Net Assets - Board Designated	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Ending Net Assets	<u>\$0.00</u>	<u>\$37.51</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>

**Fiscal Year July23- June24
June 30, 2024**

<u>426 0 ALT. PYMT. PROG- CAPP</u>	<u>Grant Budget</u>	<u>Current Month Actual</u>	<u>YTD Actual June 30, 2024</u>	<u>YTD Budget June 30, 2024</u>	<u>% Spent</u>	<u>YTD Encumbrance</u>	<u>Actual Plus Encumbrance</u>	<u>Budget Balance</u>
Revenues								
4110- GRANT INCOME-FEDERAL	4970513.00	258195.61	6014137.54	0.00	(1.21)	0.00	6014137.54	(1043624.54)
4120- GRANT INCOME-STATE	2839591.00	145235.03	2647199.50	0.00	(0.93)	0.00	2647199.50	192391.50
4220- IN KIND CONTRIBUTIONS	0.00	0.00	202.50	0.00	0.00	0.00	202.50	(202.50)
4315- CHILD CRE REVENUE-STATE	0.00	465.40	4512.25	0.00	0.00	0.00	4512.25	(4512.25)
4320- INTEREST INCOME	0.00	322.00	1151.00	0.00	0.00	0.00	1151.00	(1151.00)
Total Revenues	7810104.00	404218.04	8667202.79	0.00	(1.11)	0.00	8667202.79	(857098.79)
Expenses								
5010- SALARIES & WAGES	421564.00	23694.63	426817.30	0.00	1.01	0.00	426817.30	(5253.30)
5020- ACCRUED VACATION PAY	28030.00	1220.53	20514.13	0.00	0.73	0.00	20514.13	7515.87
Total Salaries	449594.00	24915.16	447331.43	0.00	0.99	0.00	447331.43	2262.57
5112- HEALTH INSURANCE	48391.00	2212.69	26605.06	0.00	0.55	0.00	26605.06	21785.94
5114- WORKER'S COMPENSATION	5629.00	114.64	1870.52	0.00	0.33	0.00	1870.52	3758.48
5116- PENSION	23939.00	929.17	22918.35	0.00	0.96	0.00	22918.35	1020.65
5122- FICA	35488.00	1912.97	34074.84	0.00	0.96	0.00	34074.84	1413.16
5124- SUI	2651.00	184.15	4912.82	0.00	1.85	0.00	4912.82	(2261.82)
5130- ACCRUED VACATION FICA	421.00	67.97	549.84	0.00	1.31	0.00	549.84	(128.84)
Total Fringe Benefits	116519.00	5421.59	90931.43	0.00	0.78	0.00	90931.43	25587.57
6110- OFFICE SUPPLIES	9680.00	0.00	4798.74	0.00	0.50	0.00	4798.74	4881.26
6112- DATA PROCESSING SUPPLIES	26000.00	273.42	58529.24	0.00	2.25	0.00	58529.24	(32529.24)
6130- PROGRAM SUPPLIES	6700.00	0.00	2681.63	0.00	0.40	0.00	2681.63	4018.37
6143- FURNISHINGS	1500.00	3384.08	9139.93	0.00	6.09	0.00	9139.93	(7639.93)
6170- POSTAGE & SHIPPING	6900.00	369.45	8502.50	0.00	1.23	0.00	8502.50	(1602.50)
Total Supplies	50780.00	4026.95	83652.04	0.00	1.65	0.00	83652.04	(32872.04)
6180- EQUIPMENT RENTAL	6610.00	344.26	7594.32	0.00	1.15	0.00	7594.32	(984.32)
6181- EQUIPMENT MAINTENANCE	4046.00	454.92	3569.94	0.00	0.88	0.00	3569.94	476.06
6310- PRINTING & PUBLICATIONS	0.00	0.00	569.36	0.00	0.00	0.00	569.36	(569.36)
6312- ADVERTISING & PROMOTION	490.00	44.25	96.90	0.00	0.20	0.00	96.90	393.10
6320- TELEPHONE	1844.00	130.93	2588.91	0.00	1.40	0.00	2588.91	(744.91)
6410- RENT	39865.00	5068.10	90303.99	0.00	2.27	0.00	90303.99	(50438.99)
6420- UTILITIES/ DISPOSAL	14534.00	1132.35	18048.82	0.00	1.24	0.00	18048.82	(3514.82)
6432- BUILDING REPAIRS/ MAINTENANCE	6050.00	0.00	3601.52	0.00	0.60	0.00	3601.52	2448.48
6436- PEST CONTROL	12.00	0.70	11.02	0.00	0.92	0.00	11.02	0.98
6437- BURGLAR & FIRE ALARM	10.00	0.50	10.28	0.00	1.03	0.00	10.28	(0.28)
6440- PROPERTY INSURANCE	1258.00	167.46	2417.71	0.00	1.92	0.00	2417.71	(1159.71)
6520- CONSULTANTS	1400.00	0.00	0.00	0.00	0.00	0.00	0.00	1400.00
6530- LEGAL	4000.00	0.00	3046.88	0.00	0.76	0.00	3046.88	953.12
6555- MEDICAL SCREENING/DEAT/STAFF	1690.00	145.00	667.75	0.00	0.40	0.00	667.75	1022.25

**Fiscal Year July23- June24
June 30, 2024**

<u>426 0 ALT. PYMT. PROG- CAPP</u>	<u>Grant</u>	<u>Current</u>	<u>YTD Actual</u>	<u>YTD Budget</u>	<u>% Spent</u>	<u>YTD</u>	<u>Actual Plus</u>	<u>Budget</u>
	<u>Budget</u>	<u>Month</u>	<u>June 30, 2024</u>	<u>June 30, 2024</u>		<u>Encumbrance</u>	<u>Encumbrance</u>	<u>Balance</u>
		<u>Actual</u>						
6610- GAS & OIL	400.00	0.00	59.44	0.00	0.15	0.00	59.44	340.56
6620- VEHICLE INSURANCE	400.00	22.61	525.70	0.00	1.31	0.00	525.70	(125.70)
6640- VEHICLE REPAIR & MAINTENANCE	400.00	5.40	342.05	0.00	0.86	0.00	342.05	57.95
6712- STAFF TRAVEL-LOCAL	800.00	0.00	12.45	0.00	0.02	0.00	12.45	787.55
6722- PER DIEM - STAFF	2000.00	0.00	73.44	0.00	0.04	0.00	73.44	1926.56
6742- TRAINING - STAFF	5000.00	210.54	4653.83	0.00	0.93	0.00	4653.83	346.17
6840- PROPERTY TAXES	500.00	0.00	19.72	0.00	0.04	0.00	19.72	480.28
6850- FEES & LICENSES	4480.00	0.00	7469.25	0.00	1.67	0.00	7469.25	(2989.25)
6852- FINGERPRINT	500.00	0.75	643.50	0.00	1.29	0.00	643.50	(143.50)
6875- EMPLOYEE HEALTH & WELFARE	947.00	115.41	1295.88	0.00	1.37	0.00	1295.88	(348.88)
Total Other & Services	97236.00	7843.18	147622.66	0.00	1.52	0.00	147622.66	(50386.66)
Equipment & Bldg Improvements	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
6714- STAFF TRAVEL-OUT OF AREA	1200.00	0.00	525.20	0.00	0.44	0.00	525.20	674.80
Travel-Out of Area	1200.00	0.00	525.20	0.00	0.44	0.00	525.20	674.80
Depreciation	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
7240- DIRECT BENEFITS	6443336.00	327405.93	7169889.61	0.00	1.11	0.00	7169889.61	(726553.61)
7245- DIRECT BENEFITS - STATE	0.00	465.40	4512.25	0.00	0.00	0.00	4512.25	(4512.25)
Total Direct Benefits	6443336.00	327871.33	7174401.86	0.00	1.11	0.00	7174401.86	(731065.86)
8130- IN KIND - OTHER	0.00	0.00	202.50	0.00	0.00	0.00	202.50	(202.50)
Total In-kind	0.00	0.00	202.50	0.00	0.00	0.00	202.50	(202.50)
9010- INDIRECT COST ALLOCATION	651439.00	33676.90	722535.67	0.00	1.11	0.00	722535.67	(71096.67)
Total Expenses	7810104.00	403755.11	8667202.79	0.00	1.11	0.00	8667202.79	(857098.79)
Excess Revenue Over (Under) Expenditures	0.00	462.93	0.00	0.00	0.00	0.00	0.00	0.00

**Fiscal Year July23-June24
June 30, 2024**

427 0 ALT. PYMT. PROG. C2AP	<u>Grant Budget</u>	<u>Current Month Actual</u>	<u>YTD Actual June 30, 2024</u>	<u>YTD Budget June 30, 2024</u>	<u>% Spent</u>	<u>YTD Encumbrance</u>	<u>Actual Plus Encumbrance</u>	<u>Budget Balance</u>
Revenues								
4110- GRANT INCOME-FEDERAL	330867.00	0.00	330867.00	0.00	(1.00)	0.00	330867.00	0.00
4120- GRANT INCOME-STATE	1040182.00	120736.96	1072921.48	0.00	(1.03)	0.00	1072921.48	(32739.48)
4315- CHILD CRE REVENUE-STATE	0.00	113.80	224.80	0.00	0.00	0.00	224.80	(224.80)
4320- INTEREST INCOME	0.00	69.00	69.00	0.00	0.00	0.00	69.00	(69.00)
Total Revenues	1371049.00	120919.76	1404082.28	0.00	(1.02)	0.00	1404082.28	(33033.28)
Expenses								
5010- SALARIES & WAGES	70950.00	5906.82	70957.69	0.00	1.00	0.00	70957.69	(7.69)
5020- ACCRUED VACATION PAY	6371.64	318.66	3782.92	0.00	0.59	0.00	3782.92	2588.72
Total Salaries	77321.64	6225.48	74740.61	0.00	0.97	0.00	74740.61	2581.03
5112- HEALTH INSURANCE	2603.00	44.10	1774.84	0.00	0.68	0.00	1774.84	828.16
5114- WORKER'S COMPENSATION	601.00	31.34	394.65	0.00	0.66	0.00	394.65	206.35
5116- PENSION	4681.00	581.10	4740.56	0.00	1.01	0.00	4740.56	(59.56)
5122- FICA	5900.00	492.76	5976.72	0.00	1.01	0.00	5976.72	(76.72)
5124- SUI	1134.00	0.00	796.18	0.00	0.70	0.00	796.18	337.82
5130- ACCRUED VACATION FICA	160.00	11.94	38.20	0.00	0.24	0.00	38.20	121.80
Total Fringe Benefits	15079.00	1161.24	13721.15	0.00	0.91	0.00	13721.15	1357.85
6110- OFFICE SUPPLIES	520.00	0.00	464.36	0.00	0.89	0.00	464.36	55.64
6112- DATA PROCESSING SUPPLIES	9400.00	130.38	9374.77	0.00	1.00	0.00	9374.77	25.23
6130- PROGRAM SUPPLIES	300.00	0.00	154.11	0.00	0.51	0.00	154.11	145.89
6143- FURNISHINGS	1100.00	0.00	1089.33	0.00	0.99	0.00	1089.33	10.67
6170- POSTAGE & SHIPPING	2780.00	344.82	2761.73	0.00	0.99	0.00	2761.73	18.27
Total Supplies	14100.00	475.20	13844.30	0.00	0.98	0.00	13844.30	255.70
6180- EQUIPMENT RENTAL	831.00	67.89	808.55	0.00	0.97	0.00	808.55	22.45
6181- EQUIPMENT MAINTENANCE	580.00	89.70	499.87	0.00	0.86	0.00	499.87	80.13
6310- PRINTING & PUBLICATIONS	117.00	0.00	115.77	0.00	0.99	0.00	115.77	1.23
6312- ADVERTISING & PROMOTION	10.00	44.25	53.76	0.00	5.38	0.00	53.76	(43.76)
6320- TELEPHONE	875.00	54.80	768.06	0.00	0.88	0.00	768.06	106.94
6410- RENT	11176.00	1022.13	11172.88	0.00	1.00	0.00	11172.88	3.12
6420- UTILITIES/ DISPOSAL	2200.00	230.18	2276.12	0.00	1.03	0.00	2276.12	(76.12)
6432- BUILDING REPAIRS/	770.00	0.00	733.09	0.00	0.95	0.00	733.09	36.91
6440- PROPERTY INSURANCE	388.00	34.15	361.13	0.00	0.93	0.00	361.13	26.87
6610- GAS & OIL	15.00	0.00	4.55	0.00	0.30	0.00	4.55	10.45
6620- VEHICLE INSURANCE	222.00	22.61	221.50	0.00	1.00	0.00	221.50	0.50
6640- VEHICLE REPAIR &	36.00	1.10	24.55	0.00	0.68	0.00	24.55	11.45

**Fiscal Year July23-June24
June 30, 2024**

<u>427 0 ALT. PYMT. PROG. C2AP</u>	<u>Grant</u>	<u>Current</u>	<u>YTD Actual</u>	<u>YTD Budget</u>	<u>% Spent</u>	<u>YTD</u>	<u>Actual Plus</u>	<u>Budget</u>
	<u>Budget</u>	<u>Month</u>	<u>June 30, 2024</u>	<u>June 30, 2024</u>		<u>Encumbrance</u>	<u>Encumbrance</u>	<u>Balance</u>
		<u>Actual</u>						
6712- STAFF TRAVEL-LOCAL	5.00	0.00	3.48	0.00	0.70	0.00	3.48	1.52
6722- PER DIEM - STAFF	15.00	0.00	14.96	0.00	1.00	0.00	14.96	0.04
6742- TRAINING - STAFF	530.00	63.79	591.73	0.00	1.12	0.00	591.73	(61.73)
6840- PROPERTY TAXES	9.00	0.00	0.00	0.00	0.00	0.00	0.00	9.00
6850- FEES & LICENSES	825.00	0.00	809.57	0.00	0.98	0.00	809.57	15.43
6875- EMPLOYEE HEALTH & WELFARE	319.00	35.55	170.33	0.00	0.53	0.00	170.33	148.67
Total Other & Services	18923.00	1666.15	18629.90	0.00	0.98	0.00	18629.90	293.10
Equipment & Blding Improvements	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
6714- STAFF TRAVEL-OUT OF AREA	150.00	0.00	102.06	0.00	0.68	0.00	102.06	47.94
Travel-Out of Area	150.00	0.00	102.06	0.00	0.68	0.00	102.06	47.94
Depreciation	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
7240- DIRECT BENEFITS	1131115.05	101108.13	1165724.11	0.00	1.03	0.00	1165724.11	(34609.06)
7245- DIRECT BENEFITS - STATE	0.00	113.80	224.80	0.00	0.00	0.00	224.80	(224.80)
Total Direct Benefits	1131115.05	101221.93	1165948.91	0.00	1.03	0.00	1165948.91	(34833.86)
Total In-kind	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
9010- INDIRECT COST ALLOCATION	114360.31	10076.39	117095.35	0.00	1.02	0.00	117095.35	(2735.04)
Total Expenses	1371049.00	120826.39	1404082.28	0.00	1.02	0.00	1404082.28	(33033.28)
Excess Revenue Over (Under)	0.00	93.37	0.00	0.00	0.00	0.00	0.00	0.00

**Rev/ Obj w Encumbrances
June 30, 2024**

<u>428 0 ALT. PYMT. PROG. C3AP</u>	<u>Grant Budget</u>	<u>Current Month Actual</u>	<u>YTD Actual June 30, 2024</u>	<u>YTD Budget June 30, 2024</u>	<u>% Spent</u>	<u>YTD Encumbrance</u>	<u>Actual Plus Encumbrance</u>	<u>Budget Balance</u>
Revenues								
4110- GRANT INCOME-FEDERAL	627232.00	37195.56	627232.00	0.00	(1.00)	0.00	627232.00	0.00
4120- GRANT INCOME-STATE	708396.00	72192.17	658972.04	0.00	(0.93)	0.00	658972.04	49423.96
4315- CHILD CRE REVENUE-STATE	0.00	110.20	1279.10	0.00	0.00	0.00	1279.10	(1279.10)
4320- INTEREST INCOME	0.00	66.00	66.00	0.00	0.00	0.00	66.00	(66.00)
Total Revenues	1335628.00	109563.93	1287549.14	0.00	(0.96)	0.00	1287549.14	48078.86
Expenses								
5010- SALARIES & WAGES								
5020- ACCRUED VACATION PAY	70749.00	6787.97	65026.19	0.00	0.92	0.00	65026.19	5722.81
Total Salaries	4700.00	423.31	3706.41	0.00	0.79	0.00	3706.41	993.59
Total Salaries	75449.00	7211.28	68732.60	0.00	0.91	0.00	68732.60	6716.40
5112- HEALTH INSURANCE								
5114- WORKER'S COMPENSATION	3685.00	437.80	2994.56	0.00	0.81	0.00	2994.56	690.44
5116- PENSION	304.00	31.24	350.90	0.00	1.15	0.00	350.90	(46.90)
5122- FICA	3967.00	469.00	4217.49	0.00	1.06	0.00	4217.49	(250.49)
5124- SUI	5852.00	500.43	5333.67	0.00	0.91	0.00	5333.67	518.33
5130- ACCRUED VACATION FICA	1305.00	0.00	515.71	0.00	0.40	0.00	515.71	789.29
Total Fringe Benefits	250.00	26.35	117.01	0.00	0.47	0.00	117.01	132.99
Total Fringe Benefits	15363.00	1464.82	13529.34	0.00	0.88	0.00	13529.34	1833.66
6110- OFFICE SUPPLIES								
6112- DATA PROCESSING SUPPLIES	690.00	0.00	464.95	0.00	0.67	0.00	464.95	225.05
6130- PROGRAM SUPPLIES	9100.00	70.05	8971.24	0.00	0.99	0.00	8971.24	128.76
6143- FURNISHINGS	300.00	0.00	166.11	0.00	0.55	0.00	166.11	133.89
6170- POSTAGE & SHIPPING	1000.00	0.00	1189.11	0.00	1.19	0.00	1189.11	(189.11)
Total Supplies	1615.00	106.72	1284.58	0.00	0.80	0.00	1284.58	330.42
Total Supplies	12705.00	176.77	12075.99	0.00	0.95	0.00	12075.99	629.01
6180- EQUIPMENT RENTAL								
6181- EQUIPMENT MAINTENANCE	900.00	72.73	866.35	0.00	0.96	0.00	866.35	33.65
6310- PRINTING & PUBLICATIONS	650.00	96.11	492.19	0.00	0.76	0.00	492.19	157.81
6312- ADVERTISING & PROMOTION	130.00	0.00	115.76	0.00	0.89	0.00	115.76	14.24
6320- TELEPHONE	20.00	44.25	55.21	0.00	2.76	0.00	55.21	(35.21)
6410- RENT	775.00	45.12	530.22	0.00	0.68	0.00	530.22	244.78
6420- UTILITIES/ DISPOSAL	11458.00	1022.13	11538.68	0.00	1.01	0.00	11538.68	(80.68)
6432- BUILDING REPAIRS/ MAINTENANCE	2300.00	230.18	2357.63	0.00	1.03	0.00	2357.63	(57.63)
6440- PROPERTY INSURANCE	805.00	0.00	733.08	0.00	0.91	0.00	733.08	71.92
6555- MEDICAL SCREENING/DEAT/STAFF	415.00	34.15	364.98	0.00	0.88	0.00	364.98	50.02
6610- GAS & OIL	42.00	0.00	0.00	0.00	0.00	0.00	0.00	42.00
6620- VEHICLE INSURANCE	13.00	0.00	4.55	0.00	0.35	0.00	4.55	8.45
6640- VEHICLE REPAIR & MAINTENANCE	105.00	0.00	19.30	0.00	0.18	0.00	19.30	85.70
6712- STAFF TRAVEL-LOCAL	42.00	1.10	24.31	0.00	0.58	0.00	24.31	17.69
6722- PER DIEM - STAFF	5.00	0.00	2.74	0.00	0.55	0.00	2.74	2.26
6742- TRAINING - STAFF	35.00	0.00	14.96	0.00	0.43	0.00	14.96	20.04
6840- PROPERTY TAXES	690.00	44.66	497.66	0.00	0.72	0.00	497.66	192.34
6850- FEES & LICENSES	11.00	0.00	0.00	0.00	0.00	0.00	0.00	11.00
6875- EMPLOYEE HEALTH & WELFARE	128.00	0.00	803.32	0.00	6.28	0.00	803.32	(675.32)
Total Other & Services	139.00	26.42	164.65	0.00	1.18	0.00	164.65	(25.65)
Total Other & Services	18663.00	1616.85	18585.59	0.00	1.00	0.00	18585.59	77.41
Equipment & Bldg Improvements								
6714- STAFF TRAVEL-OUT OF AREA	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Travel-Out of Area	150.00	0.00	80.67	0.00	0.54	0.00	80.67	69.33
Depreciation	150.00	0.00	80.67	0.00	0.54	0.00	80.67	69.33
7240- DIRECT BENEFITS								
7245- DIRECT BENEFITS - STATE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
7245- DIRECT BENEFITS - STATE	1101893.00	89760.93	1065978.43	0.00	0.97	0.00	1065978.43	35914.57
7245- DIRECT BENEFITS - STATE	0.00	110.20	1279.10	0.00	0.00	0.00	1279.10	(1279.10)

**Rev/ Obj w Encumbrances
June 30, 2024**

<u>428 0 ALT. PYMT. PROG. C3AP</u>	<u>Grant</u>	<u>Current</u>	<u>YTD Actual</u>	<u>YTD Budget</u>	<u>% Spent</u>	<u>YTD</u>	<u>Actual Plus</u>	<u>Budget</u>
	<u>Budget</u>	<u>Month</u>	<u>June 30, 2024</u>	<u>June 30, 2024</u>		<u>Encumbrance</u>	<u>Encumbrance</u>	<u>Balance</u>
Total Direct Benefits	1101893.00	89871.13	1067257.53	0.00	0.97	0.00	1067257.53	34635.47
Total In-kind	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
9010- INDIRECT COST ALLOCATION	111405.00	9129.51	107287.42	0.00	0.96	0.00	107287.42	4117.58
Total Expenses	<u>1335628.00</u>	<u>109470.36</u>	<u>1287549.14</u>	<u>0.00</u>	<u>0.96</u>	<u>0.00</u>	<u>1287549.14</u>	<u>48078.86</u>
Excess Revenue Over (Under) Expenditures	0.00	93.57	0.00	0.00	0.00	0.00	0.00	0.00

MADERA COUNTY
 HHAP Round 4
 6/01/2024-6/30/2024

Year to Date Expenses

HHAP - 246

	<u>-000-74</u> <u>Rapid</u> <u>Rehousing</u>	<u>-077-74</u> <u>Rapid Rehousing</u> <u>YSA</u>	<u>-000-75</u> <u>Operating</u> <u>Subsidies</u>	<u>-077-75</u> <u>Operating</u> <u>Subsidies YSA</u>	<u>-000-18</u> <u>Street</u> <u>Outreach</u>	<u>-077-18</u> <u>Street</u> <u>Outreach YSA</u>	<u>-000-90</u> <u>Administration</u>	<u>Total</u>
4350/4 Rental/Misc. Income								0.00
5010 Salaries & Wages	29.09			812.00				841.09
5020 Accrued Vacation Pay				39.79				39.79
5112 Health Insurance				33.04				33.04
5114 Workers' Compensation				33.05				33.05
5116 Pension				50.65				50.65
5122 FICA				66.52				66.52
5124 SUI								0.00
5130 Accrued Vacation FICA				-0.75				-0.75
6110 Office Supplies								0.00
6112 Data Processing Supplies								0.00
6130 Program Supplies								0.00
6132 Medical & Dental Supplies								0.00
6140 Custodial Supplies								0.00
6143 Furnishings								0.00
6170 Postage & Shipping								0.00
6180 Equipment Rental								0.00
6181 Equipment Maintenance								0.00
6310 Printing & Publications								0.00
6320 Telephone	316.04			23.48				339.52
6410 Rent	989.28			76.72				1,066.00
6420 Utilities	222.54			14.92				237.46
6432 Building R & M								0.00
6433 Grounds Maintenance								0.00
6440 Property Insurance	33.00			2.56				35.56
6510 Audit								0.00
6520 Consultants								0.00
6530 Legal								0.00
6562 Medical Exam								0.00
6564 Medical Follow-Up								0.00
6566 Dental Exam								0.00
6568 Dental Follow-Up								0.00
6610 Gas & Oil				4.45				4.45
6640 Vehicle Repair & Maintenance								0.00
6712 Staff Travel Local				6.03				6.03
6742 Training - Staff								0.00
6820 Interest Expense								0.00
6832 Liability Insurance								0.00
6850 Fees & Licenses	17.34							17.34
6860 Depreciation Expense								0.00
6875 Employee Health & Welfare								0.00
7210 Transportation Vouchers								0.00
7222 Motel Vouchers								0.00

MADERA COUNTY
 HHAP Round 4
 6/01/2024-6/30/2024

Year to Date Expenses

HHAP - 246

7224 Client Rent
 7226 Client Lodging/ Shelter
 7224 Client Food
 7240 Direct Benefits
 9010 Indirect

	<u>-000-74</u> <u>Rapid</u> <u>Rehousing</u>	<u>-077-74</u> <u>Rapid Rehousing</u> <u>YSA</u>	<u>-000-75</u> <u>Operating</u> <u>Subsidies</u>	<u>-077-75</u> <u>Operating</u> <u>Subsidies YSA</u>	<u>-000-18</u> <u>Street</u> <u>Outreach</u>	<u>-077-18</u> <u>Street</u> <u>Outreach YSA</u>	<u>-000-90</u> <u>Administration</u>	<u>Total</u>
	6,820.00			9,273.72				6,820.00
	180.00							9,273.72
	180.00							180.00
	0.00							0.00
	783.26	-	-	949.69	-	-	-	1,732.95
Subtotal - HUD Funding	9,390.55	0.00	0.00	11,385.87	0.00	0.00	0.00	20,776.42

	<u>-000-74</u> <u>Rapid</u> <u>Rehousing</u>	<u>-077-74</u> <u>Rapid Rehousing</u> <u>YSA</u>	<u>-000-75</u> <u>Operating</u> <u>Subsidies</u>	<u>-077-75</u> <u>Operating</u> <u>Subsidies YSA</u>	<u>-000-18</u> <u>Street</u> <u>Outreach</u>	<u>-077-18</u> <u>Street</u> <u>Outreach YSA</u>	<u>-000-90</u> <u>Administration</u>	
Budget:	74,704.26	8,505.93	82,193.17	11,418.29	130,871.14	14,746.69	24,269.64	346,709.12
Direct Budget:	68,473.20	7,796.45	75,337.46	10,465.89	119,955.22	13,516.67	22,245.32	317,790.21
Remaining balance for total funding:	65,313.71	8,505.93	82,193.17	32.42	130,871.14	14,746.69	24,269.64	325,932.70
Remaining direct cost:	59,865.91	7,796.45	75,337.46	29.71	119,955.22	13,516.67	22,245.32	298,746.74

MADERA COUNTY
HHAP Round 3
6/01/2024-6/30/2024

Year to Date Expenses

HHAP - 278

	<u>-000-74</u> <u>Rapid</u> <u>Rehousing</u>	<u>-077-74</u> <u>Rapid Rehousing</u> <u>YSA</u>	<u>-000-75</u> <u>Operating</u> <u>Subsidies</u>	<u>-077-75</u> <u>Operating</u> <u>Subsidies YSA</u>	<u>-000-18</u> <u>Street</u> <u>Outreach</u>	<u>-077-18</u> <u>Street</u> <u>Outreach YSA</u>	<u>-000-90</u> <u>Administration</u>	<u>Total</u>
4350/4 Rental/Misc. Income								0.00
5010 Salaries & Wages	43,801.43	892.05	1,783.22	1,432.82	89,375.41	273.59	16,049.52	153,608.04
5020 Accrued Vacation Pay	2,029.70	44.01	89.62	70.76	5,504.15	13.44	727.13	8,478.81
5112 Health Insurance	3,550.16	115.35	153.76	51.10	11,757.95	1.06	1,711.71	17,341.09
5114 Workers' Compensation	2,102.72	46.99	86.25	64.43	4,390.80	14.36	774.12	7,479.67
5116 Pension	1,123.61	50.74	134.41	91.68	2,498.39	24.77	1,022.78	4,946.38
5122 FICA	3,436.28	72.13	151.35	118.37	7,133.75	23.20	1,274.39	12,209.47
5124 SUI	819.78	0.41	1.72	6.69	1,509.67		161.60	2,499.87
5130 Accrued Vacation FICA	40.16	0.13	(3.46)	-2.02	36.20	-0.23	9.33	80.11
6110 Office Supplies					320.70			320.70
6112 Data Processing Supplies							552.81	552.81
6130 Program Supplies					482.95			482.95
6132 Medical & Dental Supplies								0.00
6140 Custodial Supplies								0.00
6143 Furnishings	772.88							772.88
6170 Postage & Shipping								0.00
6180 Equipment Rental								0.00
6181 Equipment Maintenance								0.00
6310 Printing & Publications					63.87			63.87
6320 Telephone	915.44	18.35	40.47	25.50	1,690.02	5.95	271.51	2,967.24
6410 Rent	2,729.44	58.91	130.38	80.78	6,458.19	18.61	941.32	10,417.63
6420 Utilities	544.78	11.48	24.78	13.92	1,338.32	3.36	178.28	2,114.92
6432 Building R & M								0.00
6433 Grounds Maintenance								0.00
6440 Property Insurance	31.30	1.85	4.36	2.79	114.36	0.58	21.77	177.01
6510 Audit								0.00
6520 Consultants								0.00
6530 Legal								0.00
6562 Medical Exam								0.00
6564 Medical Follow-Up								0.00
6566 Dental Exam								0.00
6568 Dental Follow-Up								0.00
6610 Gas & Oil	340.92	2.28	58.93	4.60	372.31			779.04
6640 Vehicle Repair & Maintenance					21.00			21.00
6712 Staff Travel Local	368.55	29.48	32.16	32.83	353.81			816.83
6742 Training - Staff								0.00
6820 Interest Expense								0.00
6832 Liability Insurance								0.00
6850 Fees & Licenses	552.55	0.01	0.96		18.71	0.01	2.71	574.95
6860 Depreciation Expense								0.00
6875 Employee Health & Welfare					7.55			7.55
7210 Transportation Vouchers								0.00
7222 Motel Vouchers								0.00

MADERA COUNTY
 HHAP Round 3
 6/01/2024-6/30/2024

Year to Date Expenses

HHAP - 278

7224 Client Rent
 7226 Client Lodging/ Shelter
 7232 Food Vouchers
 7240 Direct Benefits
 9010 Indirect

	<u>-000-74</u> <u>Rapid</u> <u>Rehousing</u>	<u>-077-74</u> <u>Rapid Rehousing</u> <u>YSA</u>	<u>-000-75</u> <u>Operating</u> <u>Subsidies</u>	<u>-077-75</u> <u>Operating</u> <u>Subsidies YSA</u>	<u>-000-18</u> <u>Street</u> <u>Outreach</u>	<u>-077-18</u> <u>Street</u> <u>Outreach YSA</u>	<u>-000-90</u> <u>Administration</u>	<u>Total</u>
	40,053.37	2,899.00	31,772.56	14,096.06				42,952.37
								45,868.62
								0.00
								0.00
	9,392.39	386.13	3,135.99	1,464.22	12,143.78	34.46	2,156.61	28,713.58
Subtotal - HUD Funding	112,605.46	4,629.30	37,597.46	17,554.53	145,591.89	413.16	25,855.59	344,247.39

	<u>-000-74</u> <u>Rapid</u> <u>Rehousing</u>	<u>-077-74</u> <u>Rapid Rehousing</u> <u>YSA</u>	<u>-000-75</u> <u>Operating</u> <u>Subsidies</u>	<u>-077-75</u> <u>Operating</u> <u>Subsidies YSA</u>	<u>-000-18</u> <u>Street</u> <u>Outreach</u>	<u>-077-18</u> <u>Street</u> <u>Outreach YSA</u>	<u>-000-90</u> <u>Administration</u>	
Budget:	112,605.46	13,165.89	124,445.47	17,554.53	200,056.83	21,943.17	36,864.51	526,635.86
Direct Budget:	103,213.07	12,067.73	114,065.51	16,090.31	183,370.15	20,112.90	33,789.65	482,709.32
Remaining balance for total funding:	-	8,536.59	86,848.01	-	54,464.94	21,530.01	11,008.92	182,388.47
Remaining direct cost:	-	7,824.56	79,604.04	-	49,922.04	19,734.20	10,090.67	167,175.51

Fresno Migrant Head Start
Budget to Actual (331 Basic)
Period Ending June-24

Account Description	Current	Current Mth	Prior Mth	Current vs Budget	YTD	% Spent	Encumbered	YTD Actual +	
	Period	YTD	YTD	YTD	Budget			Encumbered	Budget Balance
REVENUES									
4110 GRANT INCOME-FEDERAL	688,662.48	4,369,903.57	3,681,241.09	302,234.07	4,067,669.50	75.48%	33,703.36	4,403,606.93	1,385,824.07
4130 GRANT INCOME-AREA	0.00			-		0.00%	0.00	0.00	0.00
4210 DONATIONS	0.00			-		0.00%	0.00	0.00	0.00
4220 IN KIND CONTRIBUTIONS	56,643.56	631,177.74	574,534.18	68,572.74	562,605.00	78.82%	0.00	631,177.74	169,566.26
4330- SALE OF ASSETS	0.00			-		0.00%	0.00	0.00	0.00
4390 MISC INCOME	0.00			-		0.00%	0.00	0.00	0.00
TOTAL REVENUES	745,306.04	5,001,081.31	4,255,775.27	370,806.81	4,630,274.50	75.89%	33,703.36	5,034,784.67	1,555,390.33
5010 SALARIES & WAGES	382,227.81	2,478,412.00	2,096,184.19	289,552.50	2,188,859.50	76.15%	0.00	2,478,412.00	776,186.00
5012- DIRECTOR'S SALARY	0.00			-		0.00%	0.00	0.00	0.00
5019- SALARIES & WAGES C19	0.00			-		0.00%	0.00	0.00	0.00
5020 ACCRUED VACATION PAY	23,758.46	157,843.95	134,085.49	20,142.95	137,701.00	76.98%	0.00	157,843.95	47,205.05
5112 HEALTH INSURANCE	26,435.56	154,529.34	128,093.78	(21,344.66)	175,874.00	63.93%	0.00	154,529.34	87,184.66
5114 WORKER'S COMPENSATION	13,562.74	88,596.36	75,033.62	30,444.36	58,152.00	102.46%	0.00	88,596.36	(2,124.36)
5115- Worker's Compensation C19	0.00			-		0.00%	0.00	0.00	0.00
5116 PENSION	27,219.28	164,894.90	137,675.62	29,292.90	135,602.00	81.14%	0.00	164,894.90	38,340.10
5117- Pension C19	0.00			-		0.00%	0.00	0.00	0.00
5121- FICA C19	0.00			-		0.00%	0.00	0.00	0.00
5122 FICA	29,755.20	205,734.17	175,978.97	67,295.17	138,439.00	99.95%	0.00	205,734.17	106.83
5124 SUI	8,799.08	36,405.24	27,606.16	9,213.24	27,192.00	87.53%	0.00	36,405.24	5,184.76
5125- DIRECTOR'S FRINGE	0.00			-		0.00%	0.00	0.00	0.00
5130 ACCRUED VACATION FRINGE	1,817.61	12,031.45	10,213.84	3,209.45	8,822.00	91.57%	0.00	12,031.45	1,107.55
6714 STAFF TRAVEL-OUT OF AREA	144.00	2,037.01	1,893.01	2,037.01	0.00	0.00%	0.00	2,037.01	(2,037.01)
6722 PER DIEM - STAFF	0.00			-		0.00%	0.00	0.00	0.00
6221 EQUIPMENT OVER > \$5000	0.00	34,407.80	34,407.80	(13,592.20)	48,000.00	71.68%	0.00	34,407.80	13,592.20
6110 OFFICE SUPPLIES	2,124.60	9,008.05	6,883.45	(2,163.95)	11,172.00	62.12%	5,308.92	14,316.97	183.03
6112 DATA PROCESSING SUPPLIES	6,311.95	93,159.26	86,847.31	35,819.26	57,340.00	133.08%	1,558.73	94,717.99	(24,717.99)
6121 FOOD	0.00	7,402.40	7,402.40	406.40	6,996.00	70.50%	0.00	7,402.40	3,097.60
6122 KITCHEN SUPPLIES	163.97	5,831.52	5,667.55	4,831.52	1,000.00	583.15%	317.70	6,149.22	(5,149.22)
6130 PROGRAM SUPPLIES	26,674.45	87,138.11	60,463.66	30,736.11	56,402.00	118.24%	6,261.94	93,400.05	(19,704.05)
6134 INSTRUCTIONAL SUPPLIES	4,309.38	4,309.38	0.00	977.38	3,332.00	86.19%	0.00	4,309.38	690.62
6140 CUSTODIAL SUPPLIES	6,665.15	14,597.92	7,932.77	4,347.92	10,250.00	97.32%	0.00	14,597.92	402.08
6142 LINEN/LAUNDRY	0.00			-	0.00	0.00%	0.00	0.00	0.00
6143 FURNISHINGS	2,051.39	2,227.19	175.80	2,227.19	0.00	0.00%	0.00	2,227.19	(2,227.19)
6170 POSTAGE & SHIPPING	26.40	533.67	507.27	(90.33)	624.00	71.16%	0.00	533.67	216.33
6132 MEDICAL & DENTAL SUPPLIES	2,080.47	6,901.54	4,821.07	2,737.54	4,164.00	55.21%	3,902.88	10,804.42	1,695.58
6150 UNIFORM RENTAL/PURCHASE	0.00	300.00	300.00	300.00	0.00	0.00%	0.00	300.00	(300.00)
6180 EQUIPMENT RENTAL	2,425.46	35,126.71	32,701.25	5,132.71	29,994.00	97.57%	0.00	35,126.71	873.29
6181 EQUIPMENT MAINTENANCE	2,999.89	25,947.36	22,947.47	5,113.36	20,834.00	103.79%	0.00	25,947.36	(947.36)
6212 EQUIPMENT PURCHASES < \$500	0.00			-		0.00%	0.00	0.00	0.00
6214 EQUIPMENT OVER > 500	0.00			-		0.00%	0.00	0.00	0.00
6216 EQUIPMENT OVER > \$1000	0.00			-		0.00%	0.00	0.00	0.00
6231 BUILDING RENOVATION	0.00			-		0.00%	0.00	0.00	0.00
6232 BUILDING IMPROVEMENTS	0.00			-		0.00%	0.00	0.00	0.00
6310 PRINTING & PUBLICATIONS	4,766.89	17,395.20	12,628.31	14,123.20	3,272.00	347.90%	0.00	17,395.20	(12,395.20)
6312 ADVERTISING & PROMOTION	0.00	161.64	161.64	161.64	0.00	0.00%	0.00	161.64	(161.64)
6320 TELEPHONE	1,442.84	(35,413.81)	(36,856.65)	(160,423.81)	125,010.00	-23.61%	0.00	(35,413.81)	185,413.81
6410 RENT	17,889.49	112,909.60	95,020.11	43,574.60	69,335.00	135.71%	0.00	112,909.60	(29,707.60)
6420 UTILITIES/ DISPOSAL	8,042.25	57,831.30	49,789.05	(4,668.70)	62,500.00	77.11%	0.00	57,831.30	17,168.70
6432 BUILDING REPAIRS/ MAINT	7,222.31	46,943.09	39,720.78	(119,736.91)	166,680.00	23.47%	0.00	46,943.09	153,056.91
6433 GROUNDS MAINTENANCE	4,872.77	29,565.08	24,692.31	(5,434.92)	35,000.00	70.39%	0.00	29,565.08	12,434.92
6436 PEST CONTROL	667.98	6,900.81	6,232.83	650.81	6,250.00	92.01%	0.00	6,900.81	599.19
6437 BURGLAR & FIRE ALARM	3,209.28	6,179.99	2,970.71	95.99	6,084.00	95.08%	0.00	6,179.99	320.01
6440 PROPERTY INSURANCE	2,180.38	20,777.62	18,597.24	9,192.62	11,585.00	150.62%	0.00	20,777.62	(6,982.62)
6520 CONSULTANTS	85.80	11,860.37	11,774.57	5,196.37	6,664.00	118.60%	10,000.00	21,860.37	(11,860.37)
6522 CONSULTANT EXPENSES	0.00	97.82	97.82	(894.18)	992.00	6.52%	0.00	97.82	1,402.18
6524 CONTRACTS	0.00	0.00	0.00	(10,000.00)	10,000.00	0.00%	0.00	0.00	15,000.00

Fresno Migrant Head Start
 Budget to Actual (331 Basic)
 Period Ending June-24

Account Description	Current	Current Mth	Prior Mth	Current vs Budget	YTD	% Spent	Encumbered	YTD Actual +	
	Period	YTD	YTD	YTD	Budget			Encumbered	Budget Balance
6530 LEGAL	2,905.50	7,561.75	4,656.25	6,061.75	1,500.00	504.12%	0.00	7,561.75	(6,061.75)
6540 CUSTODIAL SERVICES	1,905.00	6,777.00	4,872.00	2,797.00	3,980.00	141.90%	0.00	6,777.00	(2,001.00)
6555 MEDICAL SCREENING/DEAT/S	225.00	1,190.00	965.00	590.00	600.00	119.00%	0.00	1,190.00	(190.00)
6562 MEDICAL EXAM	0.00	-	-	-	-	0.00%	-	0.00	0.00
6564 MEDICAL FOLLOW-UP	0.00	-	-	-	-	0.00%	-	0.00	0.00
6566 DENTAL EXAM	0.00	-	-	-	-	0.00%	-	0.00	0.00
6568 DENTAL FOLLOW-UP	0.00	-	-	-	-	0.00%	-	0.00	0.00
6610 GAS & OIL	1,503.02	9,878.60	8,375.58	(1,921.40)	11,800.00	65.86%	0.00	9,878.60	5,121.40
6620 VEHICLE INSURANCE	2,187.82	22,556.78	20,368.96	3,806.78	18,750.00	112.78%	0.00	22,556.78	(2,556.78)
6630 VEHICLE LICENSE AND FEES	0.00	-	-	-	-	0.00%	-	0.00	2,500.00
6640 VEHICLE REPAIR & MAINTENANCE	1,360.50	10,735.78	9,375.28	(9,264.22)	20,000.00	42.94%	0.00	10,735.78	14,264.22
6712 STAFF TRAVEL-LOCAL	620.95	10,662.13	10,041.18	658.13	10,004.00	71.08%	0.00	10,662.13	4,337.87
6724 PER DIEM - PARENT	0.00	-	-	-	-	0.00%	-	0.00	0.00
6730 VOLUNTEER TRAVEL	0.00	-	-	-	-	0.00%	-	0.00	0.00
6742 TRAINING - STAFF	103.85	3,244.42	3,140.57	3,244.42	0.00	0.00%	0.00	3,244.42	(3,244.42)
6744 TRAINING - VOLUNTEER	0.00	-	-	-	-	0.00%	-	0.00	0.00
6745 TRAINING - PARTICIPANTS/CLIENTS	0.00	-	-	-	-	0.00%	-	0.00	0.00
6746 TRAINING - PARENT	0.00	-	-	-	-	0.00%	-	0.00	0.00
6748 EDUCATION REIMBURSEMENT	0.00	0.00	0.00	(5,000.00)	5,000.00	0.00%	0.00	0.00	10,000.00
6750 FIELD TRIPS	0.00	-	-	-	-	0.00%	-	0.00	0.00
6820 INTEREST EXPENSE	0.00	-	-	-	-	0.00%	-	0.00	0.00
6832 LIABILITY INSURANCE	39.28	392.80	353.52	(27.20)	420.00	77.94%	0.00	392.80	111.20
6834 STUDENT ACTIVITY INSURAN	179.25	1,031.17	851.92	315.17	716.00	96.01%	0.00	1,031.17	42.83
6840 PROPERTY TAXES	0.00	2,034.46	2,034.46	(3,765.54)	5,800.00	35.08%	0.00	2,034.46	3,765.54
6850 FEES & LICENSES	33.00	23,256.14	23,223.14	4,822.14	18,434.00	105.71%	3,542.00	26,798.14	(4,798.14)
6851 CPR FEES	0.00	-	-	-	-	0.00%	-	0.00	0.00
6852 FINGER PRINTING	75.50	226.50	151.00	(2,673.50)	2,900.00	5.96%	0.00	226.50	3,573.50
6860 DEPRECIATION EXPENSE	0.00	-	-	-	-	0.00%	-	0.00	0.00
6870 EMPLOYEE RECOGNITION	0.00	-	-	-	-	0.00%	-	0.00	0.00
6875- EMPLOYEE HEALTH & WELFARE	0.00	5,079.24	5,079.24	(1,295.76)	6,375.00	79.67%	0.00	5,079.24	1,295.76
6892 CASH SHORT/OVER	0.00	-	-	-	-	0.00%	-	0.00	0.00
7110 PARENT ACTIVITIES	149.83	314.68	164.85	(555.32)	870.00	21.70%	0.00	314.68	1,135.32
7111- PARENT MILEAGE	0.00	-	-	-	-	0.00%	-	0.00	0.00
7112 PARENT INVOLVEMENT	0.00	335.61	335.61	335.61	0.00	0.00%	0.00	335.61	(335.61)
7114 PC ALLOWANCE	0.00	420.00	420.00	(700.00)	1,120.00	25.00%	0.00	420.00	1,260.00
7116 PC FOOD	0.00	-	-	-	-	0.00%	-	0.00	0.00
8110 INKIND SALARIES	39,240.81	488,147.77	448,906.96	44,888.77	443,259.00	84.00%	0.00	488,147.77	92,974.23
8120 INKIND RENT	14,907.75	140,534.97	125,627.22	22,844.97	117,690.00	64.68%	0.00	140,534.97	76,731.03
8130 INKIND OTHER	2,495.00	2,495.00	-	839.00	1,656.00	105.90%	0.00	2,495.00	(139.00)
9010 INDIRECT EXPENSE	57,441.14	361,622.47	304,181.33	26,343.47	335,279.00	75.51%	2,811.19	364,433.66	114,457.34
TOTAL EXPENSES	745,306.04	5,001,081.31	4,255,775.27	370,806.81	4,630,274.50	75.89%	33,703.36	5,034,784.67	1,555,390.33

CHANGE IN NET ASSETS

	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			TOTAL YTD	9.1%					
			INDIRECT EXP	INDIRECT EXP					
Prior Mth			3,342,651.96	304,181.33	0.00				
Curr Mth			3,973,873.30	361,622.47	0.00				

Administrative	
YTD Expense	4,417,848.83
YTD Inkind	631,177.74
	<u>5,049,026.57</u>
YTD Admin	442,023.00
YTD %	8.75%

State Migrant Full-Day Program - 322 CMIG Program
Budget to Actual

		For the Period Ending			6/30/2024			Start Date	7/1/2023	
		Current			Previous			Current Mnth	12	
								100.00%		
Account	Description	Budget	MTD	Actual YTD	Actual YTD	YTD Budget	% Spent	Encumbered	Actual + Encumb	Budget Balance
REVENUES										
4120	GRANT INCOME-STATE	838,279	97,893.05	838,279.00	740,385.95	838,279	100.00%	-	838,279.00	-
4220	IN KIND CONTRIBUTIONS		-					-	-	-
4315	CHILD CRE REVENUE-STATE		-					-	-	-
4350	RENTAL INCOME		-					-	-	-
	TOTAL REVENUES	838,279	97,893.05	838,279.00	740,385.95	838,279	100.00%	-	838,279.00	-
EXPENDITURES										
5010	SALARIES & WAGES	533,919	64,715.17	544,171.60	479,456.43	533,919	101.92%	-	544,171.60	(10,252.60)
5020	ACCRUED VACATION PAY	32,300	3,672.38	32,554.68	28,882.30	32,300	100.79%	-	32,554.68	(254.68)
5112	HEALTH INSURANCE	66,955	7,379.14	63,398.92	56,019.78	66,955	94.69%	-	63,398.92	3,556.08
5114	WORKER'S COMPENSATION	21,352	2,607.52	21,220.56	18,613.04	21,352	99.38%	-	21,220.56	131.44
5116	PENSION	26,730	2,645.04	25,674.12	23,029.08	26,730	96.05%	-	25,674.12	1,055.88
5122	FICA	42,316	4,877.84	42,464.96	37,587.12	42,316	100.35%	-	42,464.96	(148.96)
5124	SUI	6,251	327.30	5,896.67	5,569.37	6,251	94.33%	-	5,896.67	354.33
5130	ACCRUED VACATION FRINGE	3,000	280.91	2,499.51	2,218.60	3,000	83.32%	-	2,499.51	500.49
6110	OFFICE SUPPLIES	-	571.43	911.18	339.75	-	-	-	911.18	(911.18)
6112	DATA PROCESSING SUPPLIES	-	-	-	-	-	-	-	-	-
6121	FOOD	-	-	-	-	-	-	-	-	-
6122	KITCHEN SUPPLIES	-	465.62	836.05	370.43	-	-	-	836.05	(836.05)
6130	PROGRAM SUPPLIES	13,737	625.13	4,833.24	4,208.11	13,737	35.18%	-	4,833.24	8,903.76
6132	MEDICAL & DENTAL SUPPLIES	-	41.07	263.22	222.15	-	-	-	263.22	(263.22)
6134	INSTRUCTIONAL SUPPLIES	7,625	-	7,900.03	7,900.03	7,625	103.61%	-	7,900.03	(275.03)
6140	CUSTODIAL SUPPLIES	6,188	1,519.27	7,782.05	6,262.78	6,188	125.76%	-	7,782.05	(1,594.05)
6142	LINEN/LAUNDRY	-	-	-	-	-	-	-	-	-
6143	FURNISHINGS	-	-	-	-	-	-	-	-	-
6150	UNIFORM RENTAL/PURCHASE	-	-	-	-	-	-	-	-	-
6170	POSTAGE & SHIPPING	-	-	-	-	-	-	-	-	-
6320	TELEPHONE	-	-	-	-	-	-	-	-	-
6410	RENT	-	-	-	-	-	-	-	-	-
6420	UTILITIES/ DISPOSAL	-	-	-	-	-	-	-	-	-
6432	BUILDING REPAIRS/ MAINTENANCE	-	-	-	-	-	-	-	-	-
6433	GROUNDS MAINTENANCE	-	-	-	-	-	-	-	-	-
6540	CUSTODIAL SERVICES	7,985	-	7,951.60	7,951.60	7,985	99.58%	-	7,951.60	33.40
6610	GAS & OIL	-	-	-	-	-	-	-	-	-
6620	VEHICLE INSURANCE	-	-	-	-	-	-	-	-	-
6630	VEHICLE LICENSE & FEES	-	-	-	-	-	-	-	-	-
6640	VEHICLE REPAIR & MAINTENANCE	-	-	-	-	-	-	-	-	-
9010	INDIRECT COST ALLOCATION	69,921	8,165.23	69,920.61	61,755.38	69,921	100.00%	-	69,920.61	0.39
	Total Expenses	838,279	97,893.05	838,279.00	740,385.95	838,279	100.00%	-	838,279.00	-
									100.00%	

In Direct Calc. @ 9.1%
69,920.61
69,920.61 Total

Madera Migrant Head Start
Budget to Actual

For the Period Ending **6/30/2024**

Start Date 3/1/2024
Current Mnth 4.00
29%

Account	Description	Budget	Current PTD	Current Actual YTD	Previous Actual YTD	YTD Budget	% Spent	Encumbered	Actual + Encumb	Budget Balance
REVENUES										
4110	GRANT INCOME-	6,158,497	579,939.35	1,495,346.51	915,407.16	7,143,859	24%	25,547.26	1,520,893.77	4,637,603.23
4220	IN KIND CONTRIBUTIONS	531,106	104,831.17	132,584.17	27,753.00	616,083	25%	-	132,584.17	398,521.83
4390	MISCELLANEOUS	-	-	-	-	-	-	-	-	-
	TOTAL REVENUES	6,689,603	684,770.52	1,627,930.68	943,160.16	7,759,942	24%	25,547.26	1,653,477.94	5,036,125.06
EXPENDITURES										
5010	Salaries & Wages	3,376,929	316,706.38	779,177.27	462,470.89	3,917,238	23%	-	779,177.27	2,597,751.73
5020	Accrued Vacation Pay	211,500	19,130.65	47,410.23	28,279.58	245,340	22%	-	47,410.23	164,089.77
5112	Health Insurance	361,391	40,842.42	92,552.79	51,710.37	419,214	26%	-	92,552.79	268,838.21
5114	Worker's Compensation	102,976	10,915.82	24,028.99	13,113.17	119,452	23%	-	24,028.99	78,947.01
5116	Pension	176,786	14,295.42	37,715.20	23,419.78	205,072	21%	-	37,715.20	139,070.80
5122	FICA	270,714	23,938.96	59,544.55	35,605.59	314,028	22%	-	59,544.55	211,169.45
5124	SUI	34,693	1,186.03	1,903.90	717.87	40,244	5%	-	1,903.90	32,789.10
5130	Accrued Vacation Fringe	16,300	1,463.64	3,618.64	2,155.00	18,908	22%	-	3,618.64	12,681.36
6110	Office supplies	16,838	3,070.27	5,206.46	2,136.19	19,532	31%	2,503.19	7,709.65	9,128.35
6112	Data Processing Supplies	86,400	5,355.56	30,238.25	24,882.69	100,224	35%	716.68	30,954.93	55,445.07
6121	Food	5,500	-	-	-	6,380	0%	-	-	5,500.00
6122	Kitchen Supplies	2,751	(465.62)	155.21	620.83	3,191	6%	-	155.21	2,595.79
6130	Program Supplies	84,695	2,890.09	10,975.89	8,085.80	98,246	13%	3,153.25	14,129.14	70,565.86
6132	Medical & Dental Supplies	23,500	1,402.64	3,803.47	2,400.83	27,260	16%	6,027.74	9,831.21	13,668.79
6134	Instructional Supplies	21,992	-	190.00	190.00	25,511	1%	-	190.00	21,802.00
6140	Custodial Supplies	32,073	5,629.61	5,629.61	-	37,205	18%	-	5,629.61	26,443.39
6142	Linen / Laundry	-	-	-	-	-	-	-	-	-
6143	Furnishing	10,500	3,749.15	3,961.31	212.16	12,180	38%	1,015.51	4,976.82	5,523.18
6150	Uniform Rental / Purchases	387	-	-	-	449	0%	-	-	387.00
6170	Postage & Shipping	950	33.11	163.97	130.86	1,102	17%	-	163.97	786.03
6221	Equipment Over > \$5,000	-	-	-	-	-	-	-	-	-
6233	Land Improvements	-	-	-	-	-	-	-	-	-
6180	Equipment Rental	23,800	3,769.49	7,191.11	3,421.62	27,608	30%	-	7,191.11	16,608.89
6181	Equipment Maintenance	13,080	4,742.58	7,358.18	2,615.60	15,173	56%	-	7,358.18	5,721.82
6310	Printing & Publications	3,651	-	5,004.79	5,004.79	4,235	137%	-	5,004.79	(1,353.79)
6312	Advertising & Promotion	-	-	161.65	161.65	-	-	-	161.65	(161.65)
6320	Telephone	114,000	(2,772.79)	17,334.37	20,107.16	132,240	15%	-	17,334.37	96,665.63
6410	Rent	207,312	19,782.79	75,358.98	55,576.19	240,482	36%	-	75,358.98	131,953.02
6420	Utilities / Disposal	144,216	24,051.37	42,702.74	18,651.37	167,291	30%	-	42,702.74	101,513.26
6432	Building Repairs / Maintenanc	40,675	5,294.55	11,803.69	6,509.14	47,183	29%	-	11,803.69	28,871.31
6433	Grounds Maintenance	20,400	1,775.00	11,264.88	9,489.88	23,664	55%	-	11,264.88	9,135.12
6436	Pest Control	4,764	557.84	1,880.42	1,322.58	5,526	39%	-	1,880.42	2,883.58
6437	Burglar & Fire Alarm	7,380	2,221.25	2,477.42	256.17	8,561	34%	-	2,477.42	4,902.58
6440	Property Insurance	22,716	2,977.91	11,911.64	8,933.73	26,351	52%	-	11,911.64	10,804.36
6520	Consultants	18,511	96.85	217.10	120.25	21,473	1%	10,000.00	10,217.10	8,293.90
6522	Consultants Expense	251	-	-	-	291	0%	-	-	251.00
6524	Contracts	-	-	-	-	-	-	-	-	-
6530	Legal	3,332	1,238.25	1,332.00	93.75	3,865	40%	-	1,332.00	2,000.00
6540	Custodial Services	92,591	10,303.00	20,604.00	10,301.00	107,406	22%	-	20,604.00	71,987.00
6555	Medical Screening / DEAT / Staff	2,850	455.00	2,920.00	2,465.00	3,306	102%	-	2,920.00	(70.00)
6562	Medical Exam	-	-	-	-	-	-	-	-	-
6564	Medical Follow-up	-	-	-	-	-	-	-	-	-
6566	Dental Exam	-	-	-	-	-	-	-	-	-

Account	Description	Budget	Current PTD	Current Actual YTD	Previous Actual YTD	YTD Budget	% Spent	Encumbered	Actual + Encumb	Budget Balance
6568	Dental Follow-up	-	-	-	-	-	-	-	-	-
6610	Gas & Oil	12,200	977.85	3,961.22	2,983.37	14,152	32%	-	3,961.22	8,238.78
6620	Vehicle Insurance	29,100	2,235.83	10,215.08	7,979.25	33,756	35%	-	10,215.08	18,884.92
6630	Vehicle License & Fees	-	-	-	-	-	-	-	-	-
6640	Vehicle Repair & Maintenanc	6,000	203.53	2,261.28	2,057.75	6,960	38%	-	2,261.28	3,738.72
6712	Staff Travel-Local	983	51.12	51.12	-	1,140	5%	-	51.12	931.88
6714	Staff Travel-Out of Area	-	219.08	11,653.05	11,433.97	-	-	-	11,653.05	(11,653.05)
6722	Per Diem-Staff	-	-	-	-	-	-	-	-	-
6724	Per Diem-Parent	-	-	-	-	-	-	-	-	-
6730	Volunteer Travel	-	-	-	-	-	-	-	-	-
6742	Training - Staff	3,135	100.00	11,321.15	11,221.15	3,637	361%	-	11,321.15	(8,186.15)
6746	Training - Parent	-	-	-	-	-	-	-	-	-
6748	Education Reimbursement	-	-	-	-	-	-	-	-	-
6750	Field Trips	-	-	-	-	-	-	-	-	-
6810	Bank Charges	-	-	-	-	-	-	-	-	-
6820	Interest Expense	-	-	-	-	-	-	-	-	-
6832	Liability Insurance	775	40.58	162.65	122.07	899	21%	-	162.65	612.35
6834	Student Activity Insurance	2,508	242.84	466.41	223.57	2,909	19%	-	466.41	2,041.59
6840	Property Taxes	-	-	-	-	-	-	-	-	-
6850	Fees & Licenses	11,000	137.33	228.83	91.50	12,760	2%	-	228.83	10,771.17
6852	Finger Printing	2,600	971.75	971.75	-	3,016	37%	-	971.75	1,628.25
6860	Depreciation Expense	-	-	-	-	-	-	-	-	-
6875	Employee Health & Welfare	10,024	710.43	2,040.66	1,330.23	11,628	20%	-	2,040.66	7,983.34
7110	Parent Activities	850	-	-	-	986	0%	-	-	850.00
7111	Parent Mileage	491	89.25	106.27	17.02	570	22%	-	106.27	384.73
7112	Parent Involvement	3,750	17.39	215.39	198.00	4,350	6%	-	215.39	3,534.61
7114	PPC Allowance	2,900	630.00	780.00	150.00	3,364	27%	-	780.00	2,120.00
7116	PPC Food Allowance	2,099	302.57	386.51	83.94	2,435	18%	-	386.51	1,712.49
8110	In-Kind Salaries	420,096	95,580.17	95,580.17	-	487,311	23%	-	95,580.17	324,515.83
8120	In-Kind Rent	111,010	9,251.00	37,004.00	27,753.00	128,772	33%	-	37,004.00	74,006.00
8130	In-Kind Other	-	-	-	-	-	-	-	-	-
9010	In-Direct Cost Allocation	513,678	48,372.58	124,726.43	76,353.85	595,866	24%	2,130.89	126,857.32	386,820.68
Total Expenses		6,689,603	684,770.52	1,627,930.68	943,160.16	7,759,942	24%	25,547.26	1,653,477.94	5,036,125.06
Excess Revenue Over		-	-	-	-	-	-	-	-	-
Total Expenses		6,689,603	684,770.52	1,627,930.68						
In-Kind		(531,106)	(104,831.17)	(132,584.17)						
Total Expenses w/o In Kind		6,158,497	579,939.35	1,495,346.51	915,407.16				1,520,893.77	4,637,603.23

24.70%

ADMINISTRATION BUDGET LIMIT	\$735,103
YEAR-TO DATE ADMIN EXP.	\$196,256
PERCENT OF TOTAL EXPENSES	2.54%
ADMINIISTRATION LIMIT IS 9.5%	

ID Cost Calc. @ 9.1%	
124,726.43	
124,726.43	

CAPMC
Work Related Injuries Report - July 2024
BOARD OF DIRECTORS

Recordable Injuries

Position/Program	Injury Location	Type of Injury	DOI	TOI	Description	Loss Days	Outcomes
------------------	-----------------	----------------	-----	-----	-------------	-----------	----------

Medcor: Self Treat First Aid

Position/Program	Injury Location	Type of Injury	DOI	TOI	Description	Loss Days	Outcomes
Teacher I	Mendota	Contusion	7/30/2024	2:24 PM	The children were building a tower with blocks and when the tower fell, some blocks hit EE's right middle finger causing swelling, bruising, and pain.	0	7/30/24: Called Medcor, referred to seek treatment. EE declined and chose self-care/first aid.
Center Director II	Eastin Arcola	Fall	7/31/2024	8:12 AM	EE was walking across the planter headed to her appointment when she tripped and fell forward bracing with both hands, causing pain to chest area.	0	7/31/24: Called Medcor - self-care/first aid.

Claims

Position/Program	Injury Location	Type of Injury	DOI	TOI	Description	Loss Days	Outcomes
Teacher II	Inez C. Rodriguez	Impression	7/24/2024	11:30 AM	EE was closing the blinds in the classroom, when the blinds came falling down from the window. EE reached back and caught the blinds to prevent it from hitting the children. EE had pain in right shoulder and hand and loss some strength to the extremity.	3	7/24/24: Called Medcor - referred to seek treatment. EE went to Adventist Health and was released to regular duty. 07/26/24: EE went to Visalia Walk-In Medical Clinic and was placed on modifications. The Agency is unable to accommodate and EE was placed on w/c leave.

Up To Date Injuries: January 2024 to December 2024

(3) Hand Injuries	(1) Feet Injuries	(2) Chest Injuries		
(1) Back Injuries	() Eye Injuries	() Neck Injuries	() Bottom	
(2) Knee Injuries	(1) Leg Injuries	(1) Head Injuries	(3) Hip	
() Arm Injuries	(2) Wrist Injuries	() Ankle Injuries		
() Elbow Injuries	() Burn Injuries	(3) Respiratory Injuries		
(3) Shoulder Injuries	(2) Abdomen Injuries	(4) Face Injuries		
		DOI: DATE OF INJURY		
		TOI: TIME OF INJURY		



BOARD OF DIRECTORS 2024 ATTENDANCE

Director	Area Represented	January	February	March	April	May	June	July	August	September	October	November	December
Public Officials													
Deborah Martinez	Department of Social Services	X	P	-	X	A	A	A					
David Hernandez <i>Vice-Chairperson</i>	Madera Unified School District	P	P	-	P	P	P	P					
Leticia Gonzalez A: Robert Poythress	Madera County Board of Supervisors	P	P	-	P	P	P	X					
Steve Montes A: Anita Evans	Madera City Council	P	P	-	X	P	P	X					
Jeff Troost	Chowchilla City Council	P	X	-	X	P	P	X					
Private Sector Officials													
Debi Bray	Madera Chamber of Commerce	P	P	-	P	P	P	P					
Otilia Vasquez	Head Start Policy Council	P	P	-	X	X	P	X					
Donald Holley	Community Affairs	P	P	-	P	P	X	P					
Eric LiCalsi <i>Chairperson</i>	Attorney at Law	P	P	-	X	P	P	P					
Molly Hernandez	Early Childhood Education & Development	P	X	-	P	P	P	P					
Low-Income Target Area Officials													
Martha Garcia	Central Madera/Alpha	X	X	-	P	P	P	X					
Tyson Pogue <i>Secretary/Treasurer</i>	Eastern Madera County	P	P	-	X	P	X	P					
Richard Gutierrez	Eastside/Parksdale	P	P	-	P	P	P	P					
Diana Plamer <i>(Seated on 1/11/2024)</i>	Fairmead/Chowchilla	P	P	-	P	X	P	P					
Aurora Flores	Monroe/Washington	X	X	-	X	X	X	P					
<i>Total Directors</i>		11/14	11/15	-	8/15	12/15	12/15	10/15					

STAFFING CHANGES
June 1, 2024 - July 29, 2024
BOARD OF DIRECTORS

NON-HEAD START DEPARTMENTS					
NEW HIRES					
Identification Number	Position	Location	Effective Date	Hours	Justification
61463	Family Services Associate I	Resources and Referral / Alternative Payment Program - Gill	6/3/2024	80	Open Position
61056	Program Assistant / Clerk Typist II	Resources and Referral / Alternative Payment Program - Gill	6/14/2024	80	Open Position
61468	Receptionist	Community Services - Gill	7/17/2024	80	Open Position
61056	Family Services Associate II	Resources and Referral / Alternative Payment Program - Gill	7/22/2024	80	Open Position
SUBSTITUTES					
Identification Number	Position	Location	Effective Date	Hours	Justification
VOLUNTARY RESIGNATIONS					
Identification Number	Position	Location	Effective Date	Hours	Justification
61385	Provider Service Associate	Resources and Referral / Alternative Payment Program - Gill	6/14/2024	80	Resignation
61436	Housing Case Worker	Community Services - Gill	6/21/2024	80	Resignation
61321	Accountant / Program Manager	Fiscal - Gill	7/5/2024	80	Resignation
61446	Family Service Associate I	Resources and Referral / Alternative Payment Program - Gill	7/12/2024	80	Resignation
61450	Program Assistant / Clerk Typist II	Human Resources - Gill	7/12/2024	80	Resignation
61431	Accounting Technician	Fiscal - Gill	7/17/2024	80	Resignation
TERMINATION					
Identification Number	Position	Location	Effective Date	Hours	Justification
HEAD START DEPARTMENTS					
NEW HIRES					
Identification Number	Position	Location	Effective Date	Hours	Justification
61461	Associate Teacher	Madera Migrant Head Start - Los Ninos	6/3/2024	80	Open Position
61462	Head Start Professional Development Coach	Madera Regional Head Start - Gill	6/3/2024	80	Open Position
61464	Instructional Aide III	Madera Migrant Head Start - Sierra Vista	6/10/2024	80	Open Position
61465	Associate Teacher	Madera Migrant Head Start - Sierra Vista	6/10/2024	80	Open Position
61466	Associate Teacher	Madera Migrant Head Start - Sierra Vista	6/10/2024	80	Open Position
61457	Instructional Aide III	Fresno Migrant Head Start - Mendota	6/10/2024	80	Open Position
61467	Food Service Cook	Fresno Migrant Head Start - Selma	7/1/2024	80	Open Position
61320	Center Director / Teacher	Fresno Migrant Head Start - Selma	7/1/2024	80	Open Position
61448	Associate Teacher	Madera Migrant Head Start - Mis angelitos	7/1/2024	80	Open Position
61168	Associate Teacher	Fresno Migrant Head Start - Mendota	7/1/2024	80	Open Position
61469	Family Skills Instructor	Madera Regional Head Start - Gill	7/22/2024	80	Open Position
61093	Associate Teacher	Madera Regional Head Start - Cottonwood	7/22/2024	80	Open Position
SUBSTITUTES					
Identification Number	Position	Location	Effective Date	Hours	Justification
VOLUNTARY RESIGNATIONS					
Identification Number	Position	Location	Effective Date	Hours	Justification
61325	Program Technician	Madera Regional Head Start - Gill	6/14/2024	80	Resignation
61423	Childcare Assistant	Madera Regional Head Start - Gill	6/20/2024	80	Resignation
61447	Instructional Aide I / Janitor	Fresno Migrant Head Start - Firebaugh	7/24/2024	80	Resignation
TERMINATIONS					
Identification Number	Position	Location	Effective Date	Hours	Justification



JASON WIMBLEY
DIRECTOR

State of California-Health and Human Services Agency
DEPARTMENT OF COMMUNITY SERVICES AND DEVELOPMENT
2389 Gateway Oaks Drive, Suite 100, Sacramento, CA 95833
Telephone: (916) 576-7109 | Fax: (916) 263-1406
www.csd.ca.gov



GAVIN NEWSOM
GOVERNOR

July 26, 2024

VIA ELECTRONIC MAIL ONLY

Mattie Mendez, Executive Director
Community Action Partnership of Madera County
MMendez@maderacap.org

SUBJECT: 2024 DESK REVIEW C-24-026

Dear Ms. Mendez:

The Department of Community Services and Development (“CSD”) has conducted a Monitoring Desk Review of the following CSBG contracts:

- 2023 CSBG Annual 23F-4023
- 2023 Discretionary 23F-4023
- 2024 CSBG Annual 24F-3023
- 2024 Discretionary 24F-3023

2024 Desk Review Results:

For the 2024 program year, the results of this desk review demonstrate that your agency is in compliance with all the contractual requirements covered as well as applicable federal and state laws.

For the 2024 program year, the results of this desk review demonstrate that your agency is in compliance with all the contractual requirements covered as well as applicable federal and state laws. Please see enclosed desk review report C-24-026.

Thank you for your continued dedication and commitment to serve low-income individuals and families in your local area. If you have any questions concerning the monitoring review, please contact me at (916) 594-2763 or Patrick.Kane@csd.ca.gov.

Sincerely,

Patrick Kane
Associate Governmental Program Analyst

C: Wilmer Brown Jr., Manager
Field Operations Unit



Department of Community Services and Development
 Community Services Division
 2024 CSBG Desk Review (rev. Dec-23)

Agency Information

Agency Name	Community Action Partnership of Madera County, Inc.
Agency Abbreviation	CAP Madera
Agency Type	Private
Report #	C-24-026
CSD/Field Representative	Patrick Kane
Initial Contact with Agency	June 17, 2024
Date Report Completed	July 18, 2024

Open Contract and Expenditure Progress Review:

Contract #	Contract Term	Amount	Percent Expended to date:	Contract Type
23F-4023	1/1/23-5/31/24	\$318,202	100%	Annual CSBG
23F-4023	6/30/23-5/31/24	\$7,251	100%	CSBG Discretionary
24F-3023	1/1/24-4/30/25	\$318,202	15.71%	Annual CSBG
24F-3023	6/15/24-4/30/25	\$19,000	0%	CSBG Discretionary

Prior Monitoring

Type of Monitoring Report	Desk Review
Date of Report	9/29/2023
Report Number	C-23-026

Prior Corrective Action Status

Finding 1: Untimely EARS Report Submission

A review of the Expenditure Activity Reporting System (EARS) monthly reports indicates expenditure reports have not been submitted in a timely manner during 3 or more reporting periods since agency's last monitoring review. CPN-C-22-01 published March 7, 2022, requires all expenditure activity reports be submitted on or before the 25th calendar day following the reporting period. (*CPN-C-22-01, 1.0 CSBG Reimbursement Policies and Procedures, 1.1 Financial Reporting – EARS Invoice Due Date*).

Expenditure activity reports were submitted after the due date for the following contracts:

Contract #	Expenditure Reporting Period	Due Date	Certification Date	No. of Days Overdue
------------	------------------------------	----------	--------------------	---------------------

22F-5023	8/1/22-8/31/22	9/25/22	2/10/23	138
	9/1/22-9/30/22	10/25/22	2/10/23	108
	10/1/22-10/31/22	11/25/22	2/16/23	83
	11/1/22-11/30/22	12/25/22	2/16/23	53
	12/1/22-12/31/22	1/25/23	2/17/23	23
	1/1/23-1/31/23	2/25/23	6/12/23	107
	2/1/23-2/28/23	3/25/23	6/12/23	79
22F-5023 Disc.	8/1/22-8/31/22	9/25/22	2/8/23	136
	9/1/22-9/30/22	10/25/22	2/8/23	106
	10/1/22-10/31/22	11/25/22	2/10/23	77
	11/1/22-11/30/22	12/25/22	2/10/23	47
23F-4023	1/1/23-1/31/23	2/25/23	9/4/23	191
	2/1/23-2/28/23	3/25/23	9/4/23	163
	3/1/23-3/31/23	4/25/23	9/13/23	141
	4/1/23-4/30/23	5/25/23	9/13/23	111

Corrective Action:

To address this finding, Agency must:

1) Perform an evaluation of its internal accounting and expenditure reporting practices to determine the cause for the untimely submission of monthly expenditure reports and identify efficiencies that will allow for the timely submission of future expenditure activity reporting.

2) Submit monthly expenditures for open contracts on or before the 25th calendar day following the report period in accordance with current reporting requirements. (CPN-C-22-01, 1.0 CSBG Reimbursement Policies and Procedures, 1.1 Financial Reporting - EARS Invoice Due Date).

Response/Resolution Due Date:

This Finding will be closed upon submittal of three months of on-time EARS submittals from October 25, 2023 to December 25, 2023. This finding will be reassessed on December 31, 2023.

Current Status:

Agency has submitted three months of on-time EARS submittals, and as such this finding will be closed with this desk review, report # C-24-026.

Observation 1: Untimely Contract Execution and Deliverables Submission

As a private agency, CAPMC is required to complete contract execution and deliverable submission within 30 days of receipt (2022 CSBG Contract Agreement Article 2.1.1).

The following contract was submitted after the contractually prescribed due date:

Contract	Due Date	Execute Date
23F-4023	1/7/2023	1/11/23

Corrective Action:

To address this observation Agency must take the following actions:

- 1) Agency must update its written policies and procedures to ensure the timely, efficient, and accurate execution of future contracts and amendments and the completion of future contract deliverables. These updated policies and procedures must be submitted to CSD by December 31, 2023.
- 2) Agency must inform CSD in advance of any challenges which will impact future contract related submissions.
- 3) Agency must submit the 2024 CSBG Contract Agreement and all associated contract deliverables within the timeframe prescribed by the Annual Agreement. (2023 CSBG Contract Agreement Article 2.1.1).

Response/Resolution Due Date:

This observation will be reassessed during the 2024 CSD desk review and will be closed following the completion and submission by the agency of all items noted in the above corrective action.

Current Status:

Agency submitted their 2024 CSBG and Discretionary contracts on time, and as such this observation will be closed with this desk review.

Observation 2: Untimely Submission of Board Meeting Minutes

Agency did not submit June 8, 2023 or July 13, 2023 approved board minutes to CSD within thirty days of board approval as required by the Annual Agreement (2023 CSBG Contract Agreement Article 4.1.4).

Corrective Action:

To address this observation, the agency shall submit approved board minutes to CSD within thirty days of Board approval as required by the Annual Agreement (2023 CSBG Contract Agreement Article 4.1.4).

Response/Resolution Due Date:

This observation will be reassessed closed following the timely submission by the agency of the approved board meeting minutes for the next two board meetings currently scheduled for October 12, 2023 and November 9, 2023. Failing this, this finding will be reassessed during the agency's 2024 monitoring review.

Current Status:

Agency has submitted board meeting minutes in a timely manner, and this corrective action was closed as of December 31, 2023.

Observation 3: Untimely Submission of CSBG Annual Report

CSBG Annual Report and CARES Annual Report were not submitted in accordance with CSBG contractual requirements.

Corrective Action:

To address this observation:

- 1) Agency must assess the causes of the untimely submission of the CSBG Annual Report and CSBG CARES Annual Report including any operational and administrative capacity deficiencies.
- 2) Agency must provide CSD a written summary of this assessment which enumerates the action plan the agency will implement to address the deficiencies identified.
- 3) Agency shall submit the 2023 CSBG Annual Report by the prescribed due dates as required by the respective Annual Agreement agreements (2023 CSBG Contract Agreement Article 7.3.4 and 2020 CSBG CARES Contract Agreement Article 7.3.4).

Response/Resolution Due Date:

The assessment described above must be completed and provided to CSD no later than December 31, 2023. The action plan designed to address any deficiencies identified through this assessment must be implemented no later than February 1, 2024, to allow for the timely submission of the

2023 CSBG Annual Report. This finding will be reassessed during the 2024 CSD desk review.

Current Status:

Agency returned their 2023 Annual Report on time, and this corrective action was closed as of March 31, 2024.

Board Composition

According to the agency’s bylaws dated June 20, 2024, the Tripartite Board must be composed of fifteen (15) Members. Per agency’s bylaws the Board membership shall be composed of: one-third public sector members, one-third low-income members, and one-third private sector members.

Regarding the establishment of a quorum the bylaws state, a quorum for any meeting shall be fifty percent of the total membership of the Committee. The CSD 188 board roster dated June 20, 2024, indicates the Board is composed of fifteen (15) members, five (5) public sector members, five (5) low-income sector members, and five (5) private sector members with no board vacancies.

Board Meeting Minutes

Timely Submission of Minutes

Agency did submit approved minutes for its board meetings to CSD within thirty days of approval as required in the annual contract agreement (2024 CSBG Contract Agreement Article 4.1.4).

Board Involvement

A review of the board minutes from April 11, 2024, May 9, 2024, and June 13, 2024 indicates that a quorum was met for each meeting. The information contained within the board minutes did provide the Field Representative with sufficient information to confirm the board’s involvement in the development, planning, implementation, and evaluation of the program.

Date of Board Meeting	Date Minutes Approved by the Board	Date Minutes Submitted to CSD	Minutes submitted within 30-day requirement (Y/N)	Minutes reflect Board Involvement (Y/N)	Quorum? (Y/N)
4/11/24	5/9/24	5/6/24	Y	Y	Y
5/9/24	6/13/24	6/17/24	Y	Y	Y
6/13/24	7/11/24	7/8/24	Y	Y	Y

Expenditure Reporting

A review of the Expenditure Activity Reporting System (EARS) monthly reports from September 2023 through May 2024 indicates the expenditure reports have not been submitted in a timely manner.

Expenditure activity reports were submitted after the due date for the following contracts:

Contract #	Expenditure Reporting Period	Due Date	Certification Date	No. of Days Overdue
23F-4023 CAA	9/1/23-9/30/23	10/25/23	1/16/24	83
	10/1/23-10/31/23	11/25/23	1/16/24	52
	11/1/23-11/30/23	12/25/23	1/26/24	32
	12/1/23-12/31/23	1/25/24	1/26/24	1
23F-4023 Disc.	9/1/23-9/30/23	10/25/23	1/11/24	78
	10/1/23-10/31/23	11/25/23	1/23/24	59

Please note: CPN-C-22-01 published March 7, 2022, requires all expenditure activity reports be submitted on or before the 25th calendar day following the reporting period. (CPN-C-22-01, 1.0 CSBG Reimbursement Policies and Procedures, 1.1 Financial Reporting – EARS Invoice Due Date).

Programmatic Reporting

Annual Report

The 2023 CSBG Annual Report was due to CSD on or before February 1, 2024. Agency submitted the 2023 CSBG Annual Report to CSD on February 1, 2024.

Organizational Standards

The agency’s current 2023 Organizational Standards score is 100%, with no open TAPs.

Programmatic Performance and Alignment

The agency’s current work plan is in alignment with the most recent CAP and the projections reported in the CSD Form 641 A/B documents.

Contract Execution and Deliverables Submission

As a private agency, Community Action Partnership of Madera County, Inc. is required to complete contract execution and deliverable submission within 30 days of receipt (2024 CSBG Contract Agreement Article 2.1.1).

- Agency 2024 CSBG annual contract 24F-3023 and associated programmatic deliverables were due to CSD on or before January 3, 2024.
- A review of the contract and deliverable submission tracking for this contract indicated the contract and programmatic deliverables were submitted in a timely manner.
- Agency 2024 CSBG discretionary contract 24F-3023 and associated programmatic deliverables were due to CSD on or before July 1, 2024.
- A review of the contract and deliverable submission tracking for this contract indicated the contract and programmatic deliverables were submitted in a timely manner.

Contract Close-out Submission

A review of agency’s 2023 CSBG contract close-out report submission indicates agency did submit the applicable close-out documents on or before the applicable due dates and did fully expend the contract allocation.

Corrective Action

Corrective Action

Finding(s)

Finding(s):

N/A

Observation(s)

Observation(s):

N/A

Recommendation(s)

Recommendation(s):

N/A

Technical Training Assistance(s)

Recommendation(s):

N/A

Please note:

CSD may request additional information related to meeting/resolving Findings addressed in this report. Unresolved Findings may result in additional monitoring or a High Risk designation.

ACF Administration for Children and Families	U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES	
	1. Log No. ACF-OHS-IM-24-02	2. Issuance Date: 06/27/2024
	3. Originating Office: Office of Head Start	
	4. Key Words: Monitoring; FY 2025; CLASS®	

INFORMATION MEMORANDUM

TO: All Head Start and Early Head Start Recipients

SUBJECT: Fiscal Year 2025 Monitoring Process for Head Start and Early Head Start Recipients

INFORMATION:

[Section 641A](#) of the Improving Head Start for School Readiness Act of 2007 (the Act) requires the Office of Head Start (OHS) to implement ongoing monitoring of all programs receiving federal funds.

This Information Memorandum (IM) outlines the OHS monitoring process for fiscal year 2025 (FY25). It describes the types of monitoring reviews that recipients may experience, highlighting Focus Area 1 (FA1), Focus Area 2 (FA2), Classroom Assessment Scoring System (CLASS®), Risk Assessment Notification (RAN), and unannounced reviews.

FY25 Monitoring Review Types and Start Dates

Review Type*	FY25 Implementation Format	Start Date
FA1	FA1 reviews are conducted through a virtual format.	October 2024
FA2	FA2 reviews are conducted using a combination of virtual and on-site monitoring.	October 2024
CLASS®	CLASS reviews are conducted again this year using either self-recorded videos or onsite formats.	October 2024
Follow-up Reviews	Follow-up reviews are conducted virtually or in person.	Start dates will coincide with the end of the corrective action period.
RAN	RAN reviews are conducted through a virtual format.	As needed
Other	Special reviews may be conducted at any time, on site or virtually, without notice.	As needed

* *Monitoring reviews may be conducted with or without prior notification to the recipient. OHS reserves the right to conduct unannounced reviews at any time.*

FA1 Reviews

The FA1 review is an opportunity for recipients to describe their approach and plan for providing high-quality services to children and families. It typically occurs in the first or second year of the grant period. This focus area determines if programs are meeting the requirements of the Head Start Program Performance Standards (HSPPS), Uniform Guidance, and Head Start Act. The FA1 informs OHS' understanding of each recipient's foundation for program services — staffing structure, program design and governance, education, health and family services, and fiscal infrastructure. The FA1 review also allows OHS to assist recipients in fulfilling application commitments, provide resources to address any identified issues, and support recipients in reaching their goals.

FA2 Reviews

The FA2 review is an opportunity for recipients to demonstrate their implementation of high-quality services to children and families that meet Head Start requirements. It typically occurs in the third or fourth year of a grant period. This focus area broadens OHS' understanding of each recipient's performance and determines if programs are meeting the requirements of the HSPPS, Uniform Guidance, and Head Start Act.

CLASS® Reviews

Section 641A(c)(2)(F) of the Act requires OHS to assess the quality of teacher–child interactions using a valid and reliable observation measure. For the upcoming FY25 monitoring year, OHS will continue to use the 2008 edition of the Classroom Assessment Scoring System (CLASS®) Pre-K Teacher–Child Observation Instrument. Scores from CLASS observations will count toward Designation Renewal System (DRS) determinations using the competitive thresholds established in the [Final Rule on DRS Changes](#).

For FY25, recipients that are scheduled for a CLASS monitoring review will have the option to self-record and submit their own videos (Video Review) or request a traditional on-site review with certified CLASS observers (On-site Review).

American Indian and Alaska Native (AIAN) Head Start programs have the option to do a self-review for the CLASS. OHS will transmit a letter to AIAN grant recipients with additional information on this option.

All recipients will have the opportunity to attend information sessions specifically developed to discuss FY25 CLASS options, including a group of sessions convened specifically for American Indian and Alaska Native recipients.

RAN Reviews

OHS conducts Risk Assessment Notification reviews, as necessary, to address child health and safety incidents. They are initiated when OHS needs to gather more information about significant incidents

affecting program participants' health and safety. These reviews have a specific focus on abuse, neglect, inappropriate conduct, inadequate supervision, or unauthorized releases in Head Start programs.

RAN reviews:

- Ensure prompt and accurate reporting of serious incidents
- Investigate contributing program or management factors
- Communicate necessary corrective actions
- Provide feedback to improve program management and prevent future incidents

Other Reviews

Special reviews are conducted, as needed, to explore concerns outside of the typical FA1 or FA2 schedule. OHS reserves the right to conduct unannounced reviews at any time.

Scheduling

Each year, recipients are required to submit an accurate calendar of availability, which is used to schedule monitoring reviews. The availability calendar also gives recipients a way to inform OHS as to when their program is not operational and when children are not in session. Recipients should immediately update their calendars as changes in program availability occur. Please note that OHS has very limited capacity to accommodate requests to reschedule reviews and can only do so under exceptional circumstances.

Monitoring reviews can also be conducted with or without prior notification to the recipient that it will take place.

Communications

Recipients scheduled to receive a monitoring review in FY25 will receive a notification letter 45 calendar days before the start of the event. They can also expect a planning call with their assigned coordinator to discuss their review. During the initial call, recipients should share their program's current service delivery options. OHS Review Reports are typically issued within 60 calendar days of the monitoring review.

If you have any questions regarding the FY25 monitoring season, please contact your regional office.

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

Sincerely,

/Khari M. Garvin/

Khari M. Garvin
Director
Office of Head Start



ADMINISTRATION FOR
CHILDREN & FAMILIES

Office of Head Start | Region IX | 90 7th Street, 9th Floor, San Francisco, CA 94103 | www.eclkc.ohs.acf.hhs.gov

Refer to: 09CH011519/FY2024

Eric LiCalsi
Board Chair
Madera County Board of Supervisors/CAPMC
1225 Gill Ave.
Madera, CA 93637

Dear Mr. LiCalsi,

This letter is in response to the July 25, 2024 request for approval to hire a new Chief Financial Officer. Regional Office approval of this new hire is required by the regulation at 45 C.F.R. § 75.308(c)(1)(ii), when applicable.

Madera County Board of Supervisors/CAPMC complied with notifying the Regional Office prior to making a job offer to the candidate for Chief Financial Officer. The Regional Office was provided with the name of the person recommended to be hired, a description of the process used to recruit for this job, and an explanation of why this individual was determined to be the most qualified. The hiring of Kerry Medellin as the new Chief Financial Officer is approved.

If you have any questions or need assistance, please contact Program Specialist, Joshua Jagerman (415) 437-8316 or joshua.jagerman@acf.hhs.gov.

Sincerely,

Cynthia Yao
Regional Program Manager
Office of Head Start – Region IX

cc: Eric LiCalsi, Board Chair
Mattie Mendez, Executive Director
Otilia Vasquez, HS Policy Council Chair
Trinice Lee, EHS Policy Council Chair
Maritza Gomez-Zaragoza, Head Start Director