



CONSENT AGENDA ITEMS SEPTEMBER 2015

Purpose:

The consent agenda is intended to streamline the process for approval of regular, routine issues that comes before the Board of Directors, based on the assumption that they have been dealt with by the appropriate committee in a thorough fashion. Such reliance upon the work of the Board committees is provided for in the governance policies. There is a presumption that many committee actions will be placed on the consent agenda unless the leadership determines that the matter should be reviewed in detail by the full Board of Directors. The following items will be included as part of the consent agenda.

Note:

Any Board member may request that any of the following items be removed from this consent agenda and moved to the regular agenda. Also note that Board members are expected to thoroughly review the consent agenda items and other pre-mailing materials prior to the meeting and anticipate that no verbal report will be presented.

A. CEO September 2015 Report

- **Progress Reports**
 - ▶ HS/EHS Monthly Attendance
 - ▶ HS/EHS Enrollment Report
 - ▶ HS/EHS Statistical Report
 - ▶ Non-Federal Share (HS/EHS)
 - ▶ DCF/Child Care Facility Report
 - ▶ VPK Monitoring Forms
 - ▶ Cluster Monthly Disability
 - ▶ PIR (Early Head Start)
 - ▶ PIR (Head Start)
- **Reimbursement Reports**
 - ▶ DOH Child Care Food Reports
 - ▶ ELC Reimbursement Report
 - ▶ LIHEAP Financial Status Report
 - ▶ Florida Non-Profit Housing
 - ▶ DOE/FJEP Disbursement Report (EA)
 - ▶ 2015 HUD Counseling Quarterly Report
 - ▶ CSBG Financial Status
 - ▶ CSBG FOCUS Report
 - ▶ CSC Monthly Reimbursement
 - ▶ EHEAP
 - ▶ E-Rate Reimbursement
- **Other Reports**
 - ▶ Advisory Councils' Meeting Reports
 - ▶ HS/EHS Policy Council Report
 - ▶ Board Annual Fundraising Report
(Please check names on the following reports to identify persons, business, church, organization, etc., who contributed as a result of their solicitation)
 - ▶ Bureau of Labor Statistics Report (BLS)

B. Other Information (SEE TAB 5)

- **CORRESPONDENCE**
 - Office of Head Start NoA (\$7,284,907)
 - HUD NoA (\$13,447)
 - Wells Fargo Donation Agreement
 - 2015-2016 CSBG Contract
 - 2015-2016 CSBG Increase Spending Modification
 - 2015-2016 LIHEAP Increase Spending Modification
 - FL DOE Monitoring Report
 - Danya International Monitoring Schedule
 - Glades County BoCC/Public Designee Appointment
 - McGladrey Management Letter
 - McGladrey 2015 Audit Schedule
 - Request for Partnership w/Duke Energy
 - Head Start Performance Standards Policy Changes
 - CSBG Field Guide
 - 2015-2016 Revised Board Roster
 - 2014-2015 Regional Advisory Councils' Rosters
 - 2015 Board Retreat Accommodation Request
- **UPCOMING CONFERENCES/MEETINGS**
- **BOARD & ADMINISTRATOR NEWSLETTER (July, August, September)**
- **MARKETING AND COMMUNITY RELATIONS**
- **COMMITTEE REPORTING FORM**

**CHIEF EXECUTIVE OFFICER'S
MONTHLY REPORT**



SEPTEMBER 2015

A. During this period, overall program operations, administration and management challenges and opportunities included the following:

STRATEGIC PLAN PERFORMANCE INDICATORS
<ul style="list-style-type: none"> • Conducted Senior Management Staff Meeting • Attended the Summer Goal Conference, National Community Action Partnership Annual Conference and facilitated management staff attendance and participation. • Facilitated the completion and successful implementation of the Head Start In-Service training agenda. • Facilitated Senior Management Staff training opportunities in the areas of Team Building, Data Base Management via the CAP60 Data Management System and Computer Data Services, LLC automated answering services that would benefit ALPI's high volume service request calls. <p><i>Goal 1- Create Additional Educational Experiences and Opportunities for Staff</i></p> <ul style="list-style-type: none"> • Facilitated the completion of the Summer Newsletter and 2015 Annual Report, the Frostproof Center Health and Safety Renovation Project, the CAT Program refunding application revisions and transition plan, and new funding applications to enhance family self-sufficiency opportunities. <p><i>Goal 5 - Enhance program development for and service delivery to children and families</i></p>
BOARD/MANAGEMENT TASKS & TIMELINES
<ul style="list-style-type: none"> • Facilitated the completion of Reimbursement Reports (DEO/LIHEAP, DEO/CSBG, CSC, Child Care Food, Non-Profit Housing, ELC/VPK, EHEAP, HUD, USAC E-Rate and DEO EA). • Facilitated Board Training opportunities via the Community Action Partnership Annual Conference. • Secured documentation to complete Glades County CAA designation governance requirements and board representation plan. • Facilitated a meeting with Liability Insurance Agent to complete Renewal solicitation proposal and employee's Health Benefit Opening enrollment plan. • Facilitated the revision of the Agency's By-Laws; Board Membership Roster; and, Regional Advisory Committees Rosters and term limits tracking system.

B. Efforts continued to establish and maintain meaningful working relationships between the CEO's offices, program staff, clients, other organizations and funding sources, included the following:

STRATEGIC PLAN PERFORMANCE INDICATORS
<ul style="list-style-type: none"> • NCBW Board Meeting – Winter Haven, FL • SEACAA Board Meeting - Savannah, GA • CAP Annual Training Conference – San Francisco, CA <p><i>Goal 3 - Partner With Other Entities For More Efficient Service Delivery</i></p>

C. Other significant program accomplishments during this reporting period included the following:

PERFORMANCE INDICATOR(S)
<ul style="list-style-type: none"> • Receipt of 2016 CSBG Funding Agreement. • Receipt of 2016 CSC CAT 2016 Funding Agreement. • Florida Attorney General Chase Settlement Funding Opportunity in the amount of \$59,000. • Successful Closing and start-up of Wells Fargo House donation Project. • Successful transition of CAT program relocation.

Please review the attached Management Reports for additional program services delivery activities.

D. Concerns under review during this reporting period included the following:

- Property and Liability Insurance Renewal
- CAT program funding and relocation action plan.
- Board Governance and By-Laws amendments
- Regional Advisory Council Membership and Term limits
- ATEC Consultant Contract Renewals
- LIHEAP Outreach Service Plans and Service Delivery Request
- Frostproof Health and Safety Renovations and Marketing Plan

E. FUTURE MEETINGS/CONFERENCES

SEPTEMBER

- 17 AL Housing Development Corporation Board Meeting - Auburndale, FL
- 25 FACA Board Meeting - Orlando, FL
- 25 ALPI Executive Committee Meeting - Lake Alfred, FL
- 26 ALPI Board Meeting - Winter Haven, FL
- 30 NHSA Board Retreat - Washington, DC

OCTOBER

- 3 NHSA Board Meeting - Washington, DC
- 6-9 NCBW 17th ANNUAL BIENNIAL Conference - Long Beach, CA
- 13 Senior Management Staff Meeting - Lake Alfred, FL
- 19-23 SEACAA ANNUAL Training Conference - Myrtle Beach, SC

NOVEMBER

- 20 Senior Management Staff Meeting - Orlando, FL
- 20-21 ALPI Board Annual Planning Retreat – Orlando, FL
- 26-27 Thanksgiving Holiday

DECEMBER

- 8 Senior Management Staff Meeting - Lake Alfred, FL



THE AGRICULTURAL AND LABOR PROGRAM, INC.

MANAGEMENT REPORTS

September 2015

DEPARTMENTS ACTIVITIES SUMMARY

Outlined below is a summary from ALPI's department directors of major activities (E.g., Partnerships, Community Involvement, Advocacy, Public Relations, Funding Sources, etc.) participated in through the month of August 2015.

CHILDREN AND FAMILY SERVICES DIVISION

DIVISION ACTIVITIES SUMMARY

- **PLANNING/COMMUNICATION/INTERNAL REPORTING**
 - The Annual Program Information Report, PIR, is submitted to Region IV Head Start. This Annual Report documents program compliance through the program year.
 - Reviewed Office of Early Learning Administrative Weekly Publication. The document published Rule Revisions for Child Care Resource and Referral Agencies. The proposed changes included the following:
 - ✓ To better align stature and rule with recent Child Care Development Funds with reauthorization.
 - ✓ To place emphasis on consumer education and community resources.
 - ✓ To increase the time needed to respond to customers during emergencies from 2 business days to 4 business days.
 - ✓ Coalitions will maintain a web site that clearly display local CCR&R Contact information / telephone number
 - ✓ Change Referral to Early Learning listing
 - ✓ Staff training requirements update policies and procedures
 - Region IV update – The updates include:
 - ✓ Annual funding topics for the month by program specialist
 - ✓ Program applications review concerns and issues.
 - ✓ Review 5 year applications and instructions and discuss five year slot conversions.
 - ✓ HSES (Head Start Enterprise System) The Regional office is moving from hard copies of information being sent to the office to electronic communication through HSES correspondence Tab. Documents such as
 - Request for teacher qualifications waivers
 - Slot conversion
 - Enrollment reduction requests
 - Response to Regional Office's requests for specific information
 - Information not related to grant application
- **CHILD CARE FOOD PROGRAM**
 - The Child Care Food Program's operational year will come to a close September 30, 2015. The new program year will begin October 1, 2015 thru September 30 2016, the new contract agreement.
 - The renewal contract agreement will be submitted to the Department of Health September 15, 2015 for program year 2015 – 2016.
 - The Child Care Food Program is the focus of ALPI's single audit (OMB Circular No. A-133 Compliance Testing) this audit year by Audit Firm McGladrey. Timelines for submission of documents are established. Program Documents to be reviewed are: listing of clients/children serviced during the 2014-2015 program year and copies of eligibility guidelines.
 - The Food Service Coordinator is in the process of setting up Child Care Food Program for September 2015 thru 2016. This process will ensure quality assurance in program design and management, record keeping and effort reporting.

- **EARLY CHILDHOOD development AND EDUCATION SERVICES**
 - Education Manager prepared power point of materials to present the new four year-old classroom curriculum during pre-service. The new curriculum is called Splash into Pre-K. These curriculums will be used in all four year classrooms.
 - The Education Manager conducted training on the curriculum. All VPK teaching staff attended the training to become knowledgeable of the new curriculum. Topics discussed were lesson planning, organization of the curriculum, conscious discipline techniques, and incorporating music and movement through story time.
 - Teaching Strategies Gold training was provided to three year old teachers. This training was based on the new on-going assessment and its implementation. Training objectives were: to identify the purpose of Teaching Strategies Gold as an assessment tool and describe the role it plays in informing instruction; explaining how to use the objectives for development and learning to focus observations and respond with appropriate support for individual and group needs; and to explain how the four steps of the assessment process link curriculum and assessment to support children's development and learning.
 - The Education Manager noted classroom management concerns with contracted centers. This issue will be a topic for discussion at the next Management Team meeting. Concerns noted were lack of age appropriate lesson planning and a typical day in Early Head start based on schedule. Follow up lesson planning is scheduled for September 9th and follow up monitoring is scheduled for September 10th.
- **FAMILY AND COMMUNITY PARTNERSHIP AND FAMILY ENGAGEMENT**
 - During the week of August 3-6 – 2015, Division managers participated in Team Building Training with Russell Johnson, Training consultant. During the training, management identified roles and responsibilities as well as roles and responsibilities of other team members. The members agreed to meet regularly for planning and support. A schedule will be established at the next meeting.
 - Managers met with Program Operations Director in Polk County to provide technical assistance to a training plan to assist the contracted center's staff with developmental appropriate practices in Early Care and education. A training plan will be developed.
 - Conducted parent orientation in Polk and St. Lucie Counties.
 - Informed staff of the changes in Performance Standards as related to Family and Community Partnership and Family Engagement.
 - Monitored and tracked the monthly attendance through PROMIS and generated reports.
 - Reported enrollment data in Head Start Enterprise System.
- **HUMAN RESOURCES**

Provided support to Program Operation Directors in both Polk and St. Lucie County to review recommendations for hire and forward information to HR for approval and processing.
- **SPECIAL ACCOMPLISHMENTS**

Provided TEAM BUILDING Management Training for Child Development and Family Services staff. Russell Johnson, Consultant, conducted the three day session. Much was accomplished; the training was a success.
- **BOARD RELATED ACTIVITIES**
 - Northern Region Advisory Council met and planned its Annual meeting. Selected individual to receive Community Services Award. Continue to work on the Scholarship Award.
 - HS/EHS Executives of the Policy Council met and approved new hire staff employed for the new program year.
- **UPCOMING EVENTS**

See Program Operation Directors' reports.

HEAD START/EHS – St. Lucie

Program Design and Management, Facilities, Materials, and Equipment

- **Planning/Communication/Internal Reporting:**
 - Participated in the monthly Florida Department of Education VPK Conference Call on August 12, 2015. Discussion items included:
 - ✓ Teaching Strategies GOLD

- ✓ Trainings/Resources
- ✓ Providers Readiness Rates
- Coordinated and facilitated several informal Program Directors' Management Meetings throughout the month of August 2015. The items discussed included but were not limited to:
 - ✓ Head Start Enrollment & VPK Enrollment
 - ✓ Teaching Strategies Gold
 - ✓ Service delivery to children and families
 - ✓ Pre-Service Training 8/10-14/2015
 - ✓ 2015-2016 Planning Calendar
 - ✓ Health Fairs
 - ✓ Parent Orientations
 - ✓ Open House Activities
 - ✓ Health Fair/Service Delivery Team Meeting/Case Management
 - ✓ Parent Trainings
- Participated in the monthly Senior Staff Meeting held on August 11, 2015. This meeting was facilitated by Deloris Johnson, Chief Executive Officer. Program Operations Director's provided a program status report that included: Recruitment/Enrollment, 2015-2016 Planned Activities, VPK Enrollment, ELC Providers Retreat, etc.
- Coordinated a meeting with The Parent Academy of St. Lucie County to plan and discuss Parent Trainings for the 2015-2016 school year.
- Facilitated several informal desk audits with selected Management Staff to follow up on specific program benchmarks that included but were not limited to:
 - ✓ Children Enrollment and Attendance
 - ✓ Service Delivery Activities/Status
 - ✓ 45/90 Days health screenings and requirements
- Facilitated the Low Income Home Energy Assistance Program (LIHEAP) Energy Fair at the ALPI Administrative Office/Auditorium on July 15-16, 2015. Over 600 families received assistance.
- Coordinated the Early Head Start Orientation at the ALPI George W. Truitt Family Services Center and the ALPI Child Development and Family Services Center on July 22, 2015. Over 40 families attended the orientations facilitated by the Health Services Manager, Mental Health and Disabilities Specialist, Family Support Services Coordinators, Family and Community Partnerships Manager, Early Childhood Development and Education Services Manager and the Early Childhood Education Coordinator. Health Services, Early Childhood Education, and Family Services areas were discussed in relation to the Head Start and Early Head Start Programs.
- Coordinated the Annual Health Fair at the ALPI Queen Townsend Head Start Center II on August 4, 2015 and at the ALPI Child Development and Family Services Center on August 5, 2015. Participating families received free services to include:
 - ✓ Height and Weight Screenings
 - ✓ Hearing and Vision Screenings
 - ✓ Speech and Language Screenings
 - ✓ Dental Exams
 - ✓ Community Resources
- Coordinated the Head Start Orientation at the ALPI Administrative Office/Auditorium on August 6, 2015 and at the ALPI Child Development and Family Services Center on August 7, 2015. The orientations were facilitated by the Health Services Manager, Mental Health and Disabilities Specialist, Family Support Services Coordinators, Family and Community Partnerships Manager, Early Childhood Development and Education Services Manager and the Early Childhood Education Coordinator. Health Services, Early Childhood Education, and Family Services areas were discussed in relation to the Head Start and Early Head Start Programs.
- Coordinated and facilitated the Program's Pre-Service Trainings held on August 10-13, 2015. Over 180 staff members from St. Lucie and Polk County participated. Staff received from 6 to 22 hours of in-service training. We are in the process of entering the information in PROMIS to validate training hours. Trainers included: Llynda Fogle, HMM Instructional Coach; Alisa Thornton, Early Childhood Development and Education Services Manager; Bridgette Hyde, Early Childhood Education Coordinator, Donita Brunson, Family and Community Partnerships Manager; and Management Staff. Training topics included:
 - ✓ SPLASH into Pre-K Curriculum
 - ✓ ERSEA Final Rule

- ✓ Health and Safety-Medication Administration/Release of Children
- ✓ Teaching Strategies GOLD Part I
- ✓ The Goal Setting Process
- ✓ Health and Safety-Supervision/In Case of Emergencies
- ✓ Teaching Strategies GOLD Part II
- ✓ Record Keeping-Service Delivery
- ✓ Assessment's and Conscious Discipline Overview
- ✓ Health and Safety- Safety Inspections/OSHA
- ✓ Child Care Food Program Requirements
- ✓ Child Abuse and Neglect Federal and State Reporting Laws
- During this reporting period several center activities were conducted to include but were not limited to the following:
 - ✓ Facilities Readiness
 - ✓ Case Management of Children's files (cum files, medical information, etc.)
 - ✓ Updating Staff Files
- **Community Relations/Collaborations:**
 Program Staff participated in several Community Relations/Collaboration activities to address various topics that impact the community as a whole; these activities included:
 - ✓ St. Lucie County School Board
 - ✓ Early Learning Coalition of St. Lucie County
 - ✓ HANDS Dental Coalition
 - ✓ Communitywide Inclusion Collaborative Committee
 - ✓ Health Department of St. Lucie County
- **Human Resources:**
 Continued to work closely with the Human Resources Department to fill vacancies. Three Teachers and three Teacher Assistants were hired and the Office Supervisor facilitated the New Hires Orientation.
- **Governance:**
 Coordinated and facilitated an Executive Policy Council Committee meeting on August 26, 2015. The four members participated. The items presented for review, discussion and approval included the following:
 - ✓ Human Resources Report

GOAL 1: Create additional educational experiences and opportunities for staff – Objective 1.1-1.5.

- ❖ Continued to receive Child Development Associate Preschool Renewals from Teacher Assistants.
- ❖ Continued to receive Toddler and Pre-K CLASS Observer Renewal Certifications from the Child Development Services Managers.
- ❖ The four year old/VPK Teachers and Teacher Assistants, and the Child Development Services Managers participated in the SPLASH into Pre-K Curriculum training provided by Alisa Thornton, Early Childhood Development and Education Services Manager; Bridgette Hyde, Early Childhood Education Coordinator; Ellen Bradley, Child Development Services Manager II; and Lynda Fogle, HMM Instructional Coach on August 10, 2015. Staff received 6 training hours.
- ❖ The Family Services Workers, Administrative Assistants, and Family Support Services Coordinators participated in the ERSEA (Eligibility, Recruitment, Selection, Enrollment, and Attendance) Final Rule; The Goal Setting Process: Family Partnership Agreements/Family Engagement; and Record Keeping: Service Delivery trainings provided by Donita Brunson, Family Community and Partnerships Manager and Kevin Singletary, Family Support Services Coordinator on August 10-12, 2015. Staff received 18 training hours.
- ❖ The three year old Teachers and Teacher Assistants, Maintenance Workers, Transportation and Food Services staff participated in the Health and Safety: Medication Administration/Release of Children, and the Health and Safety: Supervision/In Case of Emergencies trainings provided by Iris Rivera, Health Services Manager; Latonya Robinson, Mental Health and Disabilities Specialist; Ana Cendejas, Facilities Specialist; and Delores Parker, Transportation Coordinator on August 10-11, 2015. Staff received 12 training hours.

- ❖ The four and three year old Teachers, and the Child Development Services Managers participated in the Teaching Strategies GOLD Part I and Part II trainings provided by Alisa Thornton, Early Childhood Development and Education Services Manager and Bridgette Hyde, Early Childhood Education Coordinator on August 11-12, 2015. Staff received 12 training hours.
- ❖ The four and three year old Teacher Assistants participated in the Assessment's and Conscious Discipline Overview training provided by Latonya Robinson, Mental Health and Disabilities Specialist on August 12, 2015. Staff received 6 training hours.
- ❖ The Maintenance Workers and Transportation Staff participated in the Health and Safety: Safety Inspections/OSHA training provided by Iris Rivera, Health Services Manager; Ana Cendejas, Facilities Specialist; and Delores Parker, Transportation Coordinator on August 12, 2015. Staff received 6 training hours.
- ❖ The Food Services staff participated in the Child Care Food Program training provided by Hilda Walker, Child Care Food Services Coordinator on August 12, 2015. Staff received 6 training hours.
- ❖ All St. Lucie and Polk County staff participated in the Human Resources and Employee Benefits meeting provided by Christine Samuel, Human Resource Director and Benefits Providers on August 13, 2015. Staff received 4 training hours.

- **Facilities:**

- The Facilities Specialist is working closely with the Maintenance Staff as well as the Child Development Services Managers in maintaining all facilities/offices clean and free of debris; in order to maintain a healthy and safe environment for the children, families and staff.
- The Facility Specialist completed the validation of the agency's Fixed Asset Inventory.
- The Facility Specialist worked closely with the Child Development Services Managers to ensure that all facilities were ready for services prior to August 17, 2015.
- Several projects generated by Work Requests have been completed such as: repairing bathrooms, replacing light bulbs, delivering cots, etc.
- The St. Lucie County Fire District conducted the required annual fire inspection at the ALPI Lincoln Park Head Start Center on August 21, 2015. The center was in 100% compliance.
- The Facilities Specialist submitted a work order to the St. Lucie County School Board in order for the Maintenance Department to repair an air conditioner, an electrical problem and two door handles at the ALPI Administrative Office/Auditorium and at the ALPI Queen Townsend Head Start Center II.
- The Facilities Specialist purchased and installed sand bags and other emergency supplies for the ALPI Francina Duval Head Start Center in preparedness for the tropical storm.

- **Health and Safety:**

- The Facilities Specialist as part of the weekly/monthly site visits/informal monitoring to all centers continues to ensure that all centers have the necessary cleaning supplies to perform daily sanitation activities as per the Daily Facility Checklist.
- The Facility Specialist distributed cleaning supplies to all the centers; supplies included: Garbage Bags, Paper Towels, Rinse Free, Bleach, Teachers Cleaning Towels, Cleaning Cloths, Toilet Paper, Disinfectant Spray, Kleenex, Gloves, Soap, Shoe Covers and other items as needed.
- The Facilities Specialist along with the Health Services Manager, Mental Health and Disabilities Specialist and Transportation Coordinator provided the Annual Pre-Service trainings held on August 10-12, 2015. The training topics included the following: Health and Safety: Medication Administration/Release of Children; Health and Safety: Supervision/In Case of Emergencies; and Health and Safety: Safety Inspections/OSHA.

- **Monitoring:**

- The Early Learning Coalition of St. Lucie County monitored the Garden Terrace and Francina Duval Head Start Centers on August 28, 2015. The centers were found in 100% compliance.
- The Florida Department of Children and Families inspected/monitored the Garden Terrace Head Start Center and Queen Townsend Head Start Center II. The centers were in 100% compliance.

- **Fiscal:**

- The program generated non-federal (In-Kind) during this reporting period from activities such as: Parents Volunteering, Professionals, and Donations from all the St. Lucie County Head Start/Early Head Start Centers.

- Processed fiscal related activities such as requisitions, purchase orders, invoices, and payroll.
- **IT Support Services:**
Continued to work closely with the agency's IT support staff in all IT related concerns and/or problems.
- **Family and Community Partnerships:**
 - The Early Head Start program year began on July 31, 2015 to include pregnant mothers at the ALPI George W. Truitt Family Services Center. The ALPI George W. Truitt Family Services Center, Loving Care Child Development Center, and Sunrise Country Preschool will serve a combined total of 56 infants, toddlers, and pregnant women. The Early Head Start program is now also serving eight families at the ALPI Child Development and Family Services Center. The Head Start program year began on August 17, 2015 and its funded enrollment is 691.
 - Family Support Services Coordinators continued to complete intake applications, verify applications, place families on the Head Start/Early Head Start waitlist and complete enrollment applications. Information was also provided to families about services provided in the local community.
 - Family Support Services Coordinators continued to provide technical assistance to the Child Development Services Managers and the Family Services Workers with the verification of Intakes and any issues or concerns with PROMIS or the enrollment process.
 - Family Support Services Coordinators conducted informal recruitment activities via telephone and walk in clients. Flyers were given to families at the Administrative Office as well.
 - Family Support Services Coordinators assisted during the Annual Health Fairs at the ALPI Queen Townsend Head Start Center II on August 4, 2015 and at the ALPI Child Development and Family Services Center on August 5, 2015. All families accepted into the program were provided with a notice listing all the services provided during the fairs. Additionally, parents were contacted and invited to participate in the Annual Health Fairs. Family Support Services Coordinators also set up an information station for perspective parents and assisted by escorting parents to their designated areas.
 - Family Support Services Coordinators participated in the Parent Orientations held at the ALPI Administrative Office/Auditorium on August 6, 2015 and at the ALPI Child Development and Family Services Center on August 7, 2015. The Family Support Services Coordinators shared information regarding the family services department and parents were issued a parent handbook. Family Support Services Coordinators also served as translators for the non-English speaking families. Assistance was provided to those parents with questions regarding transportation services and other center assignments.
 - The Family and Community Partnerships Manager and the Family Support Services Coordinators provided the Annual Pre-Service Trainings held on August 10-12, 2015. Training topics included the following: ERSEA (Eligibility, Recruitment, Selection, Enrollment, and Attendance) Final Rule; The Goal Setting Process: Family Partnership Agreements/Family Engagement; and Record Keeping: Service Delivery.
 - Open House activities were held at all of ALPI's Head Start Centers on August 14, 2015. Family Support Services Coordinators assisted by directing families to the correct classrooms and serving as translators for the non-English speaking families.
 - Kevin Singletary, Family Support Services Coordinator participated in a meeting at the St. Lucie County Jail, located in Fort Pierce on August 14, 2015. Chaplain David Thompson hosted the meeting to discuss the benefits of the Nurturing Fatherhood Program and how it may make an impact on some of the incarcerated fathers. Chaplain David Thompson felt this would be a benefit to the incarcerated fathers and he looks forward to working with ALPI's Nurturing Fatherhood Program.
 - Funded enrollment for St. Lucie County was met for the start of the new program year. The breakdown included: 691 preschool children; 56 infants/toddlers; and 8 pregnant women for a total of 755. There were 25 drops in the Head Start Program and 4 drops in the Early Head Start Program. Those slots were filled along with four transfers in the Head Start Program.
- **Early Childhood and Health Services:**
 - The Early Childhood Education Coordinator provided the Parent-Child Engagement to Promote School Readiness Folders (PCEPSR) for August 2015. An activities packet was created based on the Head Start Child Development and Early Learning Framework (3-5 year olds) and the Florida Early Learning and Developmental Standards for Four Year Olds. The activities encourage parents/guardians to work with their children for 10-15 minutes each day through hands-on learning experiences that require minimal materials. A literacy activity along with a reading log is included to promote literacy growth in the home.

Items included in the folders for August 2015 are as follows:

- ✓ Nightly Reading Record
 - ✓ Calendars
 - ✓ Various Games
 - ✓ Sight Words
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- The Health Services Manager, Mental Health and Disabilities Specialist, and the Early Childhood Education Coordinator assisted during the Annual Health Fairs at the ALPI Queen Townsend Head Start Center II on August 4, 2015 and at the ALPI Child Development and Family Services Center on August 5, 2015.
 - The Health Services Manager, Mental Health and Disabilities Specialist and the Early Childhood Education Coordinator shared information related to the Health Services and Early Childhood Education services areas in relation to Head Start and Early Head Start Programs, at the Parent Orientations held at the ALPI Administrative Office/Auditorium on August 6, 2015 and at the ALPI Child Development and Family Services Center on August 7, 2015.
 - Alisa Thornton, Early Childhood Development and Education Services Manager; Bridgette Hyde, Early Childhood Education Coordinator; Ellen Bradley, Child Development Services Manager II; and Lynda Fogle, HMM Instructional Coach facilitated the SPLASH into Pre-K Curriculum training to the 4 year old/VPK Teachers and Teacher Assistants and the Child Development Services Managers on August 10, 2015.
 - Alisa Thornton, Early Childhood Development and Education Services Manager and Bridgette Hyde, Early Childhood Education Coordinator provided the Annual Pre-Service Trainings on August 11-12, 2015. The training topics included: Teaching Strategies GOLD Part I and Teaching Strategies GOLD Part II.
 - The Early Childhood Education Coordinator participated in the Education Team Conference Call with Alisa Thornton, Early Childhood Development and Education Services Manager and Mary Yakovets, Early Childhood Education Coordinator on August 19, 2015. The primary focus of the conference call was to create an implementation plan for the new on-going observation tool Teaching Strategies GOLD and the Coaching/Mentoring Form finalization and use.
 - Bridgette Hyde, Early Childhood Education Coordinator, Mary Yakovets, Early Childhood Education Coordinator; Iris Rivera, Health Services Manager, Toni Jones, Health Services Manager, and Alisa Thornton, Early Childhood Development and Education Services Manager participated in the Health and Education Services meeting on August 19, 2015. Items discussed included but were not limited to the following:
 - ✓ Teaching Strategies Gold Training
 - ✓ Scheduled training for Speed Dial 4
 - ✓ Health Screenings & Development of Health Screening Team
 - The Early Childhood Education Coordinator facilitated the Head Start Awareness Kick off Extravaganza Planning meeting with Donna Hammond, Child Development Services Manager and Sandra Monroe, Child Development Services Manager on August 26, 2015. A plan and timeline was created and established, along with the criteria for the booths each center will be planning and implementing during the event.
 - The Health Services Manager coordinated the Annual Health Fairs at the ALPI Queen Townsend Head Start Center II on August 4, 2015 and at the ALPI Child Development and Family Services Center on August 5, 2015. The Annual Health Fairs were supported by the community and parents. The following agencies provided services to our families and children:
 - ✓ A+ Therapy-provided Speech and Language Screenings
 - ✓ FLDRS -provided Speech and Language Screenings
 - ✓ HANDS Dental Department-provided services and referrals for children that needed immediate follow-up.
 - ✓ Women, Infants, and Children-provided information and allowed parents to sign up for services.
 - ✓ Parent Academy of St. Lucie County-provided information to parents
 - ✓ St. Lucie County Fire Department-provide information to parents
 - ✓ Healthy Start-provided information to parents and give-a-ways.
 - ✓ United Health-provided information to parents, face painting and give-a-ways.
 - ✓ Molina- provided information to parents, face painting and give-a-ways.
 - The Health Services Manager, Mental Health and Disabilities Specialist, Facilities Specialist, and Transportation Coordinator provided the Annual Pre-Service Trainings on August 10-11, 2015. Training topics included: Health and Safety: Medication Administration/Release of Children and the Health and Safety: Supervision/In Case of Emergencies.

- The Health Services Manager, Facilities Specialist, and Transportation Coordinator provided the Annual Pre-Service Training on August 12, 2015. The training topic included: Health and Safety: Safety Inspections/OSHA.
- Health supplies such as: toothpaste, tooth brushes, band aids, wipes and supplies for fanny packs were distributed to all the Child Development Services Managers on August 13-14, 2015.
- Health Services Manager participated in the St. Lucie County Oral Health Coalition Meeting on August 14, 2015. Items discussed included the following:
 - ✓ New Staff and New Schools added to the coalition
 - ✓ Department of Health Dental Program
 - ✓ HANDS Clinic Pediatric Visits
 - ✓ Head Start's report from the Health Fair- dental services provided
- The Health Services Manager conducted the Health and Safety Training at the ALPI Lincoln Park Head Start Center on August 19, 2015. Items discussed included but were not limited to the following:
 - ✓ What is Universal Precautions
 - ✓ Safety Tips
- Follow ups were completed on children with special diets, food preferences, and health concerns at the ALPI Child Development and Family Services Center.
- The Mental Health and Disabilities Specialist meet with the Jane Turmail, Clinical Director and Valerie Richards, Mental Health Therapist of Suncoast Mental Health on August 2, 2015 to provide an orientation of Head Start/Early Head Start Programs. The role of the Mental Health Consultant, and the Mental Health Performance Standards and Policies and Procedures were also reviewed.
- The Mental Health and Disabilities Specialist provided the Annual Pre-Service Training on August 12, 2015. The training topic included: Assessment's and Conscious Discipline.
- The Mental Health and Disabilities Specialist participated in the Office of Head Start Health Webinar on August 19, 2015. The webinar focused on Children with Special Health Care Needs.
- The Mental Health and Disabilities Specialist conducted Speed Dial 4 Trainings to the Head Start Teachers from all of ALPI's Centers in St. Lucie County. Items discussed included but were not limited to the following:
 - ✓ Introduction to Speed Dial 4
 - ✓ Training Videos
 - ✓ Roll Playing
- The Mental Health and Disabilities Specialist submitted three (3) referrals to Early Steps and Florida Diagnostic Learning Resources System (FDLRS) for children with concerns.
- As of August 2015 the following table represents the total number of children that have been determined as children with disabilities:

FUNDED ENROLLMENT		HEAD START		691	
		EARLY HEAD START (St. Lucie 64 & Polk 76)		140	
1	Health Impairments		13	How many age 0?	
2	Emotional/Behavior Disorders		14	How many age 1?	
3	Speech/Language Impairments	37	15	How many age 2?	1
4	Mental Retardation		16	How many age 3?	6
5	Hearing Impairments/Deafness		17	How many age 4?	39
6	Orthopedic Impairments		18	How many age 5?	1
7	Visual Impairments/Blind		19	How many over income?	1
8	Learning Disabilities		20	How many pre-diagnosed?	47
9	Autism		21	How many dropped to date?	0
10	Traumatic Brain Injury		22	How many IEP's/IFSP current	47
11	Other Impairments	10	23	How many evaluated and found not eligible?	0
12	Total With Disabilities	47	24	How many suspected?	3

TRANSPORTATION:

- Transportation services were provided to 155 children to and from the centers for the month of August.
- Coordinated the completion of the Annual Vehicle Inspection Reports on Bus 1 and Bus 3. All necessary repairs and maintenance was completed as well.
- Transportation Coordinator assisted with having repairs and services completed that included but were not limited to the following: six new tires installed and mounted on Bus 6.

DEFICIENT AREA(S):

None

PROPOSED STRATEGY TO CORRECT DEFICIENCY (IES):

None

SPECIAL ACCOMPLISHMENTS:

- Entered into a partnership with the Big Brothers Big Sister organization to provide mentoring to approximately 70 children age 4 who are enrolled at the ALPI Queen Townsend Head Start Center II.

BOARD RELATED ACTIVITIES:

None

CRITICAL CONCERNS / CHALLENGES:

None

WORKSHOPS / TRAINING / CONFERENCES, ETC.:

None

UPCOMING EVENTS:

- Early Learning Coalition Board Meeting-September 2, 2015
- Senior Management Meeting-September 8, 2015
- Pregnant Mom Orientation/Training "SIDS"-September 9, 2015
- HANDS Clinic Board Meeting-September 11, 2015
- In-Service Trainings-September 14 and 23, 2015
- Director's Meeting-September 16, 2015
- Parent Training-September 17, 2015
- Board of Director's Meeting-September 26, 2015
- Program Director's Meeting-September 28, 2015
- Management Planning Meeting-September 30, 2015
- HMH/Public School Early Childhood Meeting-TBA
- Bridges Out of Poverty of St. Lucie Steering Committee Meeting-TBA

HEAD START/EHS – Polk County

Program Design and Management, Facilities, Materials, and Equipment

- **Planning/Communication/Internal Reporting/ Governance:**
 - Senior Directors Meeting was held on August 11, 2015 and facilitated by the Chief Executive Officer. Topics discussed included but not limited to:
 - Proposed Retirement Plan Changes-Mutual of America
 - Virtual Tour Follow-up
 - 2015 Audit Preparation
 - CAP Install/Timelines
 - Program Operations Staff meeting was held August 25, 2015 Topics discussed included but not limited to:
 - Teaching Strategies Gold Update
 - Health & Education Services
 - Service Delivery Team Overview
 - "Active Supervision" What is it?
 - New Health Services Manager
 - Open position "Family Services Coordinator"
- **Record Keeping & Reporting**
 - Reports were received from the Program Operations staff via monthly narratives, statistical reports, PROMIS reports, and cluster disability reports.
 - We are fully enrolled in the Early Head Start program with 67 infants, toddlers, and 8 pregnant mothers.
 - Continue to work with the Program Operations Director (St. Lucie), Finance Director, and Deputy Director on the budget to ensure compliance of budget allocations.
 - EHS PIR Report has been submitted
 - NAEYC Accreditation has been maintained & Renewal application is in process
- **Human Resources**
 - The Health Services Manager position has been filled
 - We will be looking to hire one substitute caregiver; Facility Specialist and a Family Services Coordinator necessary to comply with agency personnel policies.
 - We continue to closely monitor and update teaching, support, and administrative staff professional development and provide opportunities for their development.

- **Facilities**
 - Building five's kitchen floors, classroom walls and children's restrooms have been renovated.
 - Building four's air conditioning unit has been replaced due to system failure.
 - The Center Manager along with all staff is working towards maintaining a successful preventive approach to the health and safety of the facility and for the children and families we serve.
 - Lawn care contract has been renewed with a new provider Wilsons Environmental for 2015-2016
 - Continue to work closely with Deputy Director on future improvement plans for the center
 - Fire Extinguisher Inspections completed in July
 - Monthly fire drills are being completed
- **Fiscal**
 - Continue to process all requisitions, purchase orders, and invoices in a timely manner.
 - Completed and submitted In-kind contribution match for the Early Head Start program.
 - The Program Operations Director will continue to work with the Fiscal Department to ensure the fiscal management and compliance of the Early Head Start program.
- **IT/TA Support Services**
 - Continue to work with IT support to ensure the effective and efficient functioning of software for the program record keeping and service delivery.
 - Continue to work with IT support on PROMIS to ensure the smooth record keeping and reporting occurs
 - Teaching Strategies Gold implementation process ongoing for EHS
- **E.R.S.E.A.**
 - As of August 31 enrollment at the centers are as follows:
Early Head Start
 - ✓ Frostproof CDC – 51 infants and toddlers; 4 pregnant mothers
 - ✓ Jumpstart Development Center – 16 infants and toddlers; 4 pregnant mothers
 - Recruitment activities are ongoing until all slots have been filled. Recruitment activities are being done throughout Frostproof, Babson Park, and Lake Wales.
- **Monitoring**
 - No monitoring was done
 - Early Childhood Education Coordinator conducted monitoring for all Early Head Start classrooms.
 - Family Support Services Coordinator & FSW conducted monitoring on children files to ensure all 2014-2015 files have been closed out.
- **Early Childhood and Health Services**
 - Developed agency EHS parent activity calendars for October and November.
 - Facilitated caregiver refresher training on education files and assisted caregivers with setup.
 - Developed and facilitated staff training on "Active Supervision".
 - Developed and facilitated staff training on Head Start Early Learning Outcomes Framework.
 - Provided technical assistance for staff with CLASS and Teaching Strategies Gold online trainings and monitored staff participation in each.
 - Participated in Children with Special Health Care Needs webinar.
 - Scheduled and facilitated SDT meetings with caregivers and management staff.
 - Completed classroom observations and mentor/coaching sessions
 - NAEYC Annual Report submitted
 - 45 day screenings are in process
- **Family and Community Partnerships**
 - The Family Support Services Coordinator continues to provide support to the Family Services Workers and Child Development Services Manager in delivering services to families.
 - The Family Support Services Coordinator continues to certify and process intake applications, enrollments, and update the wait list.

- In Early Head Start we have (16) children and (4) pregnant mothers enrolled at Jumpstart.
- In Early Head Start we have (51) children and (4) pregnant mothers enrolled at Frostproof CDC. In the month of May at Frostproof CDC.
- Recruitment is ongoing

- **Nurturing Fatherhood Program**
 Fatherhood Initiative Program
 - F.I.P assisted FCDC by touching up paint around campus

- **Community Relations/Collaborations:**
 - Frostproof City Council Meeting 08/17
 - Frostproof Chamber of Commerce Meeting 8/19
 - CareerSource Polk Best Places to Work Annual Meeting 8/20

- **Workshops/Trainings/Meetings/Conferences etc., attended:**
 - Management Team Training 8/3-08/06
 - Policy Council Executive Meeting 08/26
 - Child Development Team Meeting 08/27

- **Deficient Area (s): n/a**
- **Proposed Strategy to Correct Deficiency/(ies). n/a**
- **Special Accomplishments: n/a**
- **Board Related Activities n/a**
- **Special Projects n/a**
- **Critical Concerns/Challenges: n/a**

- **UPCOMING EVENT**
 - 09/03 LIHEAP Services
 - 09/04 Fatherhood Initiative Program Meeting
 - 09/14/15 FCDC Open House

COMMUNITY & ECONOMIC DEVELOPMENT SERVICES DIVISION

ACTIVITIES SUMMARY

Deputy Director

- Periodically met with Division Department Directors and Division Support Staff re: program status updates.
- Periodically reviewed Grants.gov for grant and funding announcements. **(Goal 3 Objective: Apply for grants in a timely manner when money is available)**
- Reviewed Division-wide Financial Reports and prepared expenditure analysis.
- Revised Community Action Plan for submission to DEO.
- Conducted research on over-expenditure of DOE Funds.
- Continued working on CAP60 Installation plan and schedule. **(Goal 4 Objective: Continue to upgrade new technology)**
- Prepared and submitted monthly division-wide report.
- Prepared and finalized HUD Housing Counseling Invoice/Quarterly Report.
- Prepared draft of Grant Application for Florida's Natural Growers Foundation. **(Goal 3 Objective: Apply for grants in a timely manner when money is available)**
- Reviewed and signed off on \$524,525.04 in Voucher/Check Requests including, but not limited to:
 - **Community Services Block Grant (CSBG)**

- Program Costs = \$ 14,178.28
- Administrative Costs = \$ 16.02
- Emergency Assistance = \$ 6,533.63
- FSSP Support = \$ 20,497.54
- **HUD Housing Counseling**
 - In-service Training \$ 510.20
- **Low Income Home Energy Assistance Program (LIHEAP) – 2015-2016**
 - Program Costs = \$ 2,848.60
 - Home Energy = \$ 83,725.00
 - Crisis Energy = \$ 63,113.17
 - Administrative Costs = \$ 452.26
- **Emergency Home Energy Assistance Program (EHEAP)**
 - Emergency Assistance= \$ n/a

LIHEAP/Community Services Department Director

- Division Staff Meeting on August 4, 2015 at Corporate Office. **(Goal 1 Objective: Provide more professional development.)**
- Senior Directors Meeting on August 11, 2015 at Corporate Office. **(Goal 1 Objective: Provide more professional development.)**
- Met with staff from DOE/EA on August 12, 2015 in reference to participant goals for 2015-16. **(Goal 4 Objective: Expand programmatic thrusts.)**
- Met with FNPH (Florida Non-Profit Housing) Staff and DOE/EA on August 12, 2015 in Sebring in reference to collaborative project and Annual Training Conference. **(Goal 3 Objective: Partner on collaborative projects with other entities.)**
- ENERGY FAIR in POLK County on August 13, 2015. Served approximately (350) low-income families. **(Goal 4: Expand programmatic thrusts.)**
- EHEAP (Elderly Home Energy Assistance Program) monthly Conference Call on August 24, 2015. **(Goal 3: Objective: Partner on collaborative projects with other entities.)**
- DOE/EA Data Validation (client file review) on August 31, 2015.

CSBG/Economic Development Department Director

- Team monthly meeting, triage and training. **(Goal 1 Objective: Provide more professional development opportunities.)**
- Met with Immokalee CAA to assist them to help them better develop their FSSP. **(Goal 3 Objective: Partner on collaborative projects with other entities.)**
- Met with Hendry County Sub-Recipients to review their files and also for new FFY CSBG contract year. **(Goal 3 Objective: Partner on collaborative projects with other entities.)**
- Met with CIL's BAC council to review HSH program for the upcoming year. **(Goal 3 Objective: Partner on collaborative projects with other entities.)**
- Attended the CAP National Conference in San Francisco, CA. **(Goal 1 Objective: Provide more professional development opportunities.)**
- Participated with LIHEAP's Energy Fair in Lakeland, FL. **(Goal 3 Objective: Partner on collaborative projects with other entities.)**
- Attended HR benefit meeting on August 14, 2015 at Chain O Lakes Complex. **(Goal 1 Objective: Provide more professional development opportunities.)**
- Participated with CareerSource Polk in their CareerSource Breakfast banquet in Lakeland, FL **(Goal 3 Objective: Partner on collaborative projects with other entities.)**

COLLABORATIONS

Deputy Director

- Attended CareerSource Youth Advisory Council meeting. **(Goal 3 Objective: Partner on collaborative projects with other entities)**

LIHEAP/Community Services Department Director

- SHINE. **(Goal 3 Objective: Partner on collaborative projects with other entities)**
- DCF Refugee Services. **(Goal 3 Objective: Partner on collaborative projects with other entities)**
- DCF Office of Economic Self-Sufficiency. **(Goal 3 Objective: Partner on collaborative projects with other entities)**
- Polk County School Board Parent Information Resource Center. **(Goal 3 Objective: Partner on collaborative projects with other entities)**
- Healthy Start Coalition. **(Goal 3 Objective: Partner on collaborative projects with other entities)**
- Total Care Consultants. **(Goal 3 Objective: Partner on collaborative projects with other entities)**
- Central Florida Health Care. **(Goal 3 Objective: Partner on collaborative projects with other entities)**
- Lakeland Electric Cooperative. **(Goal 3 Objective: Partner on collaborative projects with other entities)**
- Polk County Indigent Health Care Division. **(Goal 3 Objective: Partner on collaborative projects with other entities)**
- Healthy Families. **(Goal 3 Objective: Partner on collaborative projects with other entities)**
- Simply Health Care. **(Goal 3 Objective: Partner on collaborative projects with other entities)**
- Peace River Center. **(Goal 3 Objective: Partner on collaborative projects with other entities)**
- New Beginnings High School. **(Goal 3 Objective: Partner on collaborative projects with other entities)**HUMANA. **(Goal 3 Objective: Partner on collaborative projects with other entities)**
- Bay Care. **(Goal 3 Objective: Partner on collaborative projects with other entities)**
- Florida Health Polk County. **(Goal 3 Objective: Partner on collaborative projects with other entities)**Romero Medical Plaza. **(Goal 3 Objective: Partner on collaborative projects with other entities)**
- Heartland for Children. **(Goal 3 Objective: Partner on collaborative projects with other entities)**
- Tri-County Human Services. **(Goal 3 Objective: Partner on collaborative projects with other entities)**
- ALPI (CSBG). **(Goal 3 Objective: Partner on collaborative projects with other entities)**
- ALPI (HUD). **(Goal 3 Objective: Partner on collaborative projects with other entities)**

CSBG/Economic Development Department Director

- CIL's BAC council meeting to develop new ways and ideas to serve the High School High Tech program for disabled youth. **(Goal 3 Objective: Partner on collaborative projects with other entities)**
- Participated with LIHEAP in their energy fair in Lakeland, FL on August 13, 2015. **(Goal 3 Objective: Partner on collaborative projects with other entities)**
- Met with FPP Advisory Council in regards to planning out "Make A Difference Day" event. **(Goal 3 Objective: Partner on collaborative projects with other entities)**Participated with Careersource Polk in their Careersource Breakfast banquet in Lakeland, FL. **(Goal 3 Objective: Partner on collaborative projects with other entities)**

CONCERNS/CHALLENGES AND RESPONSE**Deputy Director**

Nothing to report at this time.

LIHEAP/Community Services Department Director

Nothing to report at this time.

CSBG/Economic Development Department Director

Nothing to report at this time.

DEFICIENT AREA(S) AND STRATEGIES TO CORRECT**Deputy Director**

Nothing to report at this time.

LIHEAP/Community Services Department Director

Nothing to report at this time.

CSBG/Economic Development Department Director

Nothing to report at this time.

SPECIAL ACCOMPLISHMENTS

(Success beyond designated job duties)

Deputy Director

- Continued work on converting CM Tools and Promis to CAP60 system.

LIHEAP/Community Services Department Director

Nothing to report at this time.

CSBG/Economic Development Director

Nothing to report at this time.

BOARD RELATED ACTIVITIES

Deputy Director

Nothing to report at this time.

LIHEAP/Community Services Department Director

Nothing to report at this time.

CSBG/Economic Development Director

Nothing to report at this time.

SPECIAL PROJECTS

Deputy Director

Nothing to report at this time.

LIHEAP/Community Services Department Director

- Facilitated the MARTIN County ENERGY FAIR EVENT on September 16th and 17th. The Event will be in Stuart at the Martin County Fairgrounds.
- Approximately (12) Vendors will be participating.

CSBG/Economic Development Director

- Facilitated a ROMA training for HS management team in Fort Pierce, FL on July 23, 2015.

MEETINGS/WORKSHOPS/TRAINING/CONFERENCES, ETC. ATTENDED during reporting period (all staff)

Deputy Director

- Senior Staff Meeting – August 11, 2015.
- CareerSource Youth Advisory Council – August 3, 2015.

LIHEAP/Community Services Department Director

- Division Staff Meeting at Corporate Office on August 3, 2015.
- Senior Director's Meeting on August 11, 2015 at the Corporate Office.
- DOE/EA FNPH (Florida Non-Profit Housing) Meeting on August 12, 2015 at Corporate Office and Sebring.
- LIHEAP ENERGY FAIR on August 13, 2015 in Lakeland at First Baptist Church at the Mall. Anticipate serving (300) low income families with utility assistance.

- The Southern Region Advisory Council Meeting is scheduled for August 17, 2015 in Frostproof at the Lake View Park Community Center.
- LIHEAP/Community Services Department Staff Meeting on August 27, 2015 at the Corporate Office.
- DOE/EA client file Data Validation on August 31, 2015 at the Corporate Office.

CSBG/Economic Development Department Director

- Senior Staff Meeting – August 11, 2015 Wipfli Conference in Las Vegas.
- Community Action Partnership Annual Conference, San Francisco, CA – August 25 – 28, 2015.

WORKSHOPS/TRAINING/CONFERENCES, ETC. SCHEDULED for month following reporting period (all staff)

Deputy Director

- Senior Management Staff meeting – September 8, 2015.

LIHEAP/Community Services Department Director

- Senior Director's Meeting on September 8, 2015 at the Corporate Office.
- EHEAP (Elderly Home Energy Assistance Program) DESK REVIEW on September 11, 2015.
- Parent University Conference on September 12, 2015 at Lake Region High School.
- ENERGY FAIR EVENT for Martin County (Stuart) on September 16th and 17th, 2015.
- LIHEAP/Community Services Department Staff Meeting on September 24, 2015 at the Corporate Office.
- ALPI's Board of Directors Meeting is scheduled for September 26, 2015 in Winter Haven at the Chain O' Lakes Complex.

CSBG/Economic Development Department Director

- Senior Management Staff meeting – September 8, 2015.
- SETA Conference – September 13-17, 2015

OTHER

Deputy Director

- Nothing to report at this time.

LIHEAP/Community Services Department Director

- Nothing to report at this time.

CSBG/Economic Development Department Director

- Nothing to report at this time.

MAJOR GRANT/PERFORMANCE SUMMARIES

Low Income Home Energy Assistance Program (03/01/15 thru 03/31/16)

Total Funding = \$4,329,956

Pro-Rated Funding (thru 08/31/15) = \$1,998,441 (46.1%)

Expended (as of 08/31/15) = \$2,068,992

% of Total Funding paid as of 08/31/15 = 47.8%

Crisis Energy = \$1,284,615

Home Energy = \$724,791

Performance: Service Levels and amount committed between July 1, 2015 and August 31, 2015, are as follows:

Clients Served Funds Obligated

Summer Crisis = 1,474 \$ 527,026

Summer Home = 1,309 \$ 413,227

Performance: Expenditures and performance appear to be "on track".

Emergency Home Energy Assistance Program (04/01/15 thru 03/31/16)

Total Funding = \$127,250

Pro-Rated Funding (as of 07/31/15) = \$53,021 (41.7%)

Expended (as of 08/31/15) = \$40,580

% of Total Funding = (31.9%)

Performance:

- Grant YTD, not fiscal year, units of service = 116
- Grant YTD, not fiscal year, amount spent directly on client \$32,824.

Florida Non-Profit Housing (07/01/15 thru 06/30/16)

Total Funding = \$47,053

Pro-Rated Funding (as of 08/31/15) = \$7,842 (16.7%)

Expended (as of 08/31/15) = \$1,110

% of Total Funding = (2.3%)

Performance:

- Grant YTD, not fiscal year, units of service = 5
- Grant YTD, not fiscal year, amount spent directly on client \$1,110.

US Department of HUD - (10/01/14 thru 06/30/16)

Total Funding = \$13,447

Pro-Rated Funding (as of 07/31/15) = \$6,723 (49.9%)

Expended (as of 07/31/15) = \$3,347

% of Total Funding = 24.9%

Overall Performance:

- Grant YTD, not fiscal year, units of service = 34

This grant overlapped by six months the previous housing counseling grant, therefore many of the expenditures for the 6 month period ending March 31, 2015 were paid under the previous grant. This results in a skewing of the pro-rata share of expenditures. It is anticipated that all funds will be expended by the end of this contract.

Community Services Block Grant (10/01/14 thru 09/30/15)

Total Funding = \$1,046,948.

Pro-Rated Funding (as of 08/31/15) = \$959,702 (91.7%)

Expended (as of 08/31/15) = \$922,988

% of Total Funding = 88.2%

Performance:

- Amount paid to subcontractors YTD = \$87,564.

Expenditures appear to be "on target".

Client Demographic Information – Division Programs (07/01/15 through 08/31/15)						
Type of Demographic		LIHEAP AND EHEAP	CSBG - FSSP	CSBG - EA	Other Programs	TOTAL (undup)
Number of Families Served		2,511	78	61	5	2,655
Number of Persons Served		8,303	258	213	16	4,782
Family Type	Single Parent Households	1,232	52	34	n/a	744
	Two Parent Household	295	8	12	n/a	157
	Single Person	678	11	12	n/a	387
	Two Adults/No Children	162	4	1	n/a	74
Other Family Char.	Receiving Food Stamps	1,636	50	42	n/a	941
	Seasonal Farmworker	29	0	0	n/a	12
	Migrant Farmworker	3	0	0	n/a	2
	At Least one (1) member age 55+	736	3	11	n/a	394
	Receiving SSI	730	15	18	n/a	395
	Receiving Social Security	639	5	10	n/a	351
Sex	Male	3,412	90	88	n/a	1,950
	Female	4,891	168	125	n/a	2,816
Age	0 to 23	3,889	132	109	n/a	7,596
	24 to 44	1,949	76	55	n/a	1,158
	45 and over	1,612	20	24	n/a	859
Race	White	1,230	39	35	n/a	627
	African American	6,225	198	143	n/a	3,670
	Other or unreported	848	21	35	n/a	469
Ed. Level	Non-Graduate	1,223	17	18	n/a	674
	HS Graduate/GED	1,929	60	46	n/a	1,081
	Post HS	44	3	4	n/a	22
	College Graduate	196	12	8	n/a	120

MAJOR OUTCOMES – Division Programs Only ROMA Family Goals 1 and 6 (07/01/15 through 08/31/15)					
NPI	Description	CSBG/LIHEAP Clients		DOE/FNPH Clients TOTAL	
		Seeking	Completing	Plan	Actual
1.1	Unemployed and obtained a job	15	12	n/a	n/a
	Employed and maintained a job for at least 90 days	12	5	n/a	n/a
	Employed and obtained an increase in employment income and/or benefits	8	6	n/a	n/a
1.2	Obtained skills/competencies required for employment	19	9	n/a	n/a
	Completed ABE/GED and received certificate	1	1	n/a	n/a
	Completed post-secondary education program and obtained certificate or diploma	12	0	n/a	n/a
	Enrolled children in before or after school programs	2	2	n/a	n/a
	Obtained access to reliable transportation and/or driver's license	0	0	n/a	n/a
	Obtained safe and affordable housing	5	4	n/a	n/a
	Obtained food assistance	0	0	n/a	n/a
6.1	Independent Living for Senior Citizens (55 or older)	6	6	n/a	n/a
	Independent Living for Individuals with Disabilities	10	10	n/a	n/a
6.2	Received Home Energy Assistance other than LIHEAP	31	31	0	0
	Received rental assistance	14	14	5	5
	Received LIHEAP Crisis	5,117	4,899	n/a	n/a
	Received LIHEAP Home Energy	4,176	4,119	n/a	n/a
	Received Emergency Food Assistance	0	0	0	0
	Received Water Bill/Utilities Assistance	2	2	0	0

* = Number of unduplicated individuals receiving services, inclusive of all family members at 3.2 members per service.

* = Includes payments to Subrecipients performing direct case management services.

SERVICE DELIVERY BY COUNTY – Division Programs Units of Service, By County (07/01/15 through 08/31/15)								
County	LIHEAP/EHEAP Only*		CSBG Only*		DOE/FNPH Only		Totals	
	Units of Service	Total Expended*	Units of Service	Total Expended*	Units of Service	Total Expended	Units of Service	Total Expended
Charlotte	0	\$0	0	\$0	0	\$0	0	\$0
Collier	90	\$26,270	0	\$0	0	\$0	90	\$26,270
Dade	0	\$0	0	\$0	0	\$0	0	\$0
DeSoto	0	\$0	0	\$0	0	\$0	0	\$0
Gadsden	0	\$0	0	\$0	0	\$0	0	\$0
Glades	30	\$9,754	0	\$0	0	\$0	30	\$9,754
Hardee	0	\$0	0	\$0	0	\$0	0	\$0
Hendry	53	\$17,076	25	\$4,478	0	\$0	78	\$21,554
Highlands	160	\$54,251	70	\$17,614	0	\$0	230	\$71,865
Hillsborough	0	\$0	0	\$0	0	\$0	0	\$0
Lake	0	\$0	0	\$0	0	\$0	0	\$0
Lee	0	\$0	0	\$0	0	\$0	0	\$0
Martin	41	\$12,953	0	\$0	0	\$0	41	\$12,953
Orange	0	\$0	0	\$0	0	\$0	0	\$0
Osceola	0	\$0	0	\$0	0	\$0	0	\$0
Palm Beach	0	\$0	0	\$0	0	\$0	0	\$0
Pasco	0	\$0	0	\$0	0	\$0	0	\$0
Polk	1,539	\$520,388	196	\$36,502	5	\$1,110	1,740	\$558,000
Putnam	0	\$0	0	\$0	0	\$0	0	\$0
St. Lucie	905	\$312,757	0	\$0	0	\$0	905	\$312,757
Seminole	0	\$0	0	\$0	0	\$0	0	\$0
Sumter	0	\$0	0	\$0	0	\$0	0	\$0
Volusia	0	\$0	0	\$0	0	\$0	0	\$0
TOTAL	2,818	\$953,449	291	\$58,594	5	\$1,110	3,114	\$1,013,153

HUMAN RESOURCES

- **Goal 1 – Create Additional Training Experiences and Opportunities for Staff (Objective 1.1 – 1.5)**
 - The Human Resources Department continues to regularly interact and partner with Division Directors every day in order to identify training experiences and opportunities that will mutually benefit both our staff and the organization as a whole.
 - Training Opportunities and Potential Experiences in Action:
 - ✓ CEO, HR Director, CSBG Director, 2 Client Specialists and two Board members attended the Community Action Partnership Conference in San Francisco. They had lots of workshops that will assist us with all the new changes in Head Start and CSBG. Employees are encouraged to attend local training sections that are offered in the community.

- **Goal 2 – Devise a Plan of Upward Mobility within the Agency (objective 2.2 & 2.4)**
 - The Human Resources Department continues to support employees being temporarily promoted to acting status while a higher level position is on leave or when a position is vacant. This gives the employee an opportunity to gain on-the- job experience.

Promotion Opportunities in Action: Toni Jones was promoted to Health Service Manager in Frostproof

- **RECRUITING**

The Human Resources Department advertised the following positions by utilizing in house posting, Employ Florida, area colleges, universities, churches, phone book, newspapers, Teacher-teach site and other internal as well as external partners:

- ✓ **Grantee Administration Support Services:**
 - none
- ✓ **Child Development & Family Services Division**
 - (1) Bus Driver – St. Lucie
 - (1) Teacher –St. Lucie
 - (1) Family Service Worker – St. Lucie

The Human Resources Department advertised, scheduled interviews for and filled the following positions by utilizing in house posting, Employ Florida, area colleges, universities, newspapers and other internal as well as external partners:

- **(2) Teacher Assistant –Ft. Pierce**
- **(2) Teacher – Ft. Pierce**
- **(2) Teacher Assistant Sub. – Ft. Pierce**
- **(1) Health Service Manager**

- **DAILY ACTIVITIES:**

- Attended Community Action Partnership annual training conference in San Francisco – many valued workshops were attended. Lots of networking with other agencies during the conference
- (4) Child Development Staff Improvement plans – pasted due
- 98% of employees annual evaluations have been received
- Assisted Deputy Director Young with hiring, employee related matters and program concerns during the month
- Met with Director Burnham regarding employee related issues
- Completed Monthly and Senior Director's reports for approval
- Benefits Open Enrollment Insurance meetings were held in Ft. Pierce and Winter Haven both meetings went well. All paperwork have been processed
- Coordinated meetings with Mrs. Johnson and Bouchard representatives to review renewal of general liabilities insurance for property, auto and directors/board
- ERAC meeting was held on August 17th - The council planned its annual meeting,
- reviewed the timelines and scheduled fundraisers for the Arie Perkins Scholarships
- Visited several Centers in Ft. Pierce to deal with human resources related issues; follow-up meeting will occur during the month of October
- HR Manual will be reviewed with Directors to ensure they are up to date
- Completed monthly sick leave/leave without pay tracking form
- 6 month driving record for all employee –99 5 completed
- Attended Senior Staff meeting on August 11th and Birthday luncheon for Deloris Johnson – Board Chair – Mr. Holt attended – very nice
- Attended the Girls Inc. Executive Board & BOD meetings – Reviewed the draft Personnel Policies
- Attended NAACP executive, regular and finance committee meetings
- Employee Handbook – ongoing (answering of questions)
- Retirement Plan Booklet – ongoing review – answered questions for employees nearing retirement

- Interpret ALPI Policies and Procedures -Ongoing
- Recruitment, Selection and Retention-Ongoing
- New Staff Orientations-Ongoing
- Staff Verifications of Employment - Ongoing
- Workers Compensation Claims and Appeals – none
- EEOC Claim – (0) new close (1) pending- 2yrs old
- FMLA – processing request - Ongoing
- Unemployment Compensation Claims – none
- Grievances and employee concerns – (0)
- Liability Insurance and Loss Control – Ongoing
- Benefits Administration – Ongoing
- Retirement 403(b) Plan Request – on-going
- Monitoring and processing of bills – on going
- Review and processing of Timesheets – on- going

- **STATISTICS**

Employee Accidents	1
Child Accidents	0
Resignations	1
Involuntary Terminations	3
Lay-offs	0
New Hires	7
Transfers/Promotions	1
Temps & Substitutes	2
Unemployment	0
Unemployment Hearings	0
Family Medical Leave	4
Disability Claims	0
Worker Compensation	0
Equal Opportunity Claims	0

- **CHALLENGE**

- Employee improvement plans: 4 staff are on improvement plans: **Status: ALL Past due**
- Bi-Annual Driving Record are not always completed in a timely manner by all departments - **Status: 99% completed**
- Timely submission of paperwork– PCNs, Hiring Requisitions, Resignation/Termination notices, FMLA request - on-going – **Status: Improved**
- Ensuring all human resources issues are addressed and are in compliance based on the requirements of the grants/programs – **Status: Improved - on going**
- HR Director currently reviewing program grants to ensure compliance – **Status: Improved - ongoing**
- Supervisors/Directors addressing employee issues/concerns in a timely manner – **Status: Improved - on going**
- Directors ensuring staffing request and funding codes are correct and timely submitted – **Status: Improved – on going**
- Directors and Managers monitor their Centers and become proactive in the prevention of accidents. **Status: Improved –on-going**

- **PROPOSED STRATEGY TO PREVENT POSSIBLE DEFICIENCY (IES):**

- Consistently working with Division Directors and Organizational Partners on all fronts in order to be pro-active and not re-active with respect to all obligations HR has to ALPI and the clients we serve
- Met with CD&FS Deputy Director several times this month
- Attended Girls Inc. meetings: Executive and Board
- Attended NAACP Executive, Regular & Finance meetings
- Met with insurance representatives regarding improved services to ALPI employees

- **SPECIAL ACCOMPLISHMENTS:**

- Evaluations are being completed – 95% completed
- Benefit Open Enrollment meetings scheduled
- ERAC Energy Fairs committee assisted with fair both days July 20th & 21st
- HR management training completed – very successful
- All employees credentials are up to date
- All background screenings are current
- 95 % of driving records are current

OPERATIONS & QUALITY CONTROL

DEPARTMENT ACTIVITIES SUMMARY

- **GOVERNANCE**

- ✓ Facilitated registration & travel arrangements for Board and/or Council participation @ the following meetings/conferences: FHSA, One Goal Summer Conference, NCAP Conference, & SEACAA Conference.

Goal 3 – Partner w/other Entities for more efficient service delivery

- ✓ Facilitated and coordinated Board Meeting
 - Secured meeting venue, hotel accommodations, and meals; distributed board packets.
- ✓ Coordinated and facilitated the Central Region Advisory Council & Special Events Meetings.
- ✓ Coordinated the services for the 2015 Independent Audit.
- ✓ Coordinating correspondence for the upcoming 2015 Annual Advisory Councils' Elections.

- **CORPORATE OFFICE**

- ✓ Continued ongoing support to all divisions/departments via meetings, correspondence, purchasing, & signatures.
 - ✓ Coordinated the attendance of CEO at One Goal Summer Conference, NCAP Conference, & SEACAA Conference, Center for Business Excellence, and FACA.
- Goal 3 – Partner w/other Entities for more efficient service delivery**
- ✓ Coordinated the completion of reimbursement reports (LIHEAP, CSBG, CSC, Child Care Food, Non-Profit Housing, & DOE).
 - ✓ Coordinated repairs for inside building maintenance.
 - ✓ Coordinating the repairs for outside parking lot
 - ✓ Coordinated the distribution of information for the SEACAA 2015 Annual Awards

- **WORKSHOPS/MEETING ATTENDED**

Senior Directors' Meeting	August 11, 2015
Central Region Advisory Council Meeting	August 19, 2015
Northeast Rattlers Youth Sports Board Meeting	August 18, 2015

- **UPCOMING EVENTS:**

CRAC Special Events Committee	September 4, 2014
Senior Directors' Meeting	September 8, 2015
Northeast Rattlers Youth Sports Board Meeting	September 15, 2015
Executive Committee Meeting	September 25, 2015
Board of Directors Meeting	September 26, 2015

PROGRESS REPORTS

HS/EHS ENROLLMENT REPORT



End-Of-Month Enrollment - August 2015

Total

<i>Total Reported Enrollment</i>	<i>Total Funded Enrollment</i>	<i>Status</i>
831	831	Reported

Head Start

	<i>Operated this month</i>	<i>Last day of services provided</i>	<i>All clases/options in session</i>	<i>Reported Enrollment</i>	<i>Funded Enrollment</i>	<i>Status</i>
	Yes	Aug 31, 2015	Yes	691	691	Reported
Initially Reported:	On 09/04/2015 by Donita Brunson					
Last Updated:	On 09/04/2015 12:31:22 PM, EST by Donita Brunson					

Early Head Start

	<i>Operated this month</i>	<i>Last day of services provided</i>	<i>All clases/options in session</i>	<i>Reported Enrollment</i>	<i>Funded Enrollment</i>	<i>Status</i>
	Yes	Aug 31, 2015	Yes	140	140	Reported
Initially Reported:	On 09/04/2015 by Donita Brunson					
Last Updated:	On 09/04/2015 12:31:22 PM, EST by Donita Brunson					

HS/EHS MONTHLY ATTENDANCE

AGRICULTURAL AND LABOR PROGRAM, INC.
FAMILY & COMMUNITY PARTNERSHIPS
POLK COUNTY
2015-2016

MONTHLY ATTENDANCE REPORT

EARLY HEAD START-JULY 2015 (1 DAY)

CENTERS	FUNDED ENROLLMENT	ACTUAL ENROLLMENT	CHILDREN PRESENT	ADA FOR MONTH
FROSTPROOF	56	56	26	50%
JUMPSTART	20	20	12	75%
TOTALS	76	76	38	63%

EARLY HEAD START- AUGUST 2015 (20 DAYS)

CENTERS	FUNDED ENROLLMENT	ACTUAL ENROLLMENT	CHILDREN PRESENT	ADA FOR MONTH
FROSTPROOF	56	56	756	73%
JUMPSTART	20	20	245	77%
TOTALS	76	76	1,001	75%


Family & Community Partnerships Manager

AGRICULTURAL AND LABOR PROGRAM, INC.
FAMILY & COMMUNITY PARTNERSHIPS
ST. LUCIE COUNTY
2015-2016

MONTHLY ATTENDANCE REPORT

HEAD START-AUGUST 2015 (11 DAYS)

CENTERS	FUNDED ENROLLMENT	ACTUAL ENROLLMENT	CHILDREN PRESENT	ADA FOR MONTH
Queen Townsend II	237	237	1497	90%
ACDFSC	151	151	2251	86%
Lincoln Park	102	102	989	88%
Garden Terrace	90	90	872	88%
George W. Truitt	51	51	500	89%
Francina Duval	40	40	363	83%
Learning Tree	20	20	189	86%
TOTALS	691	691	6,661	87%

EARLY HEAD START- AUGUST 2015 (20 DAYS)

CENTERS	FUNDED ENROLLMENT	ACTUAL ENROLLMENT	CHILDREN PRESENT	ADA FOR MONTH
George W. Truitt	40	40	490	77%
ACDFSC	8	8	150	93%
Loving Care	8	8	135 (21days)	80%
Sunrise	8	8	115 (21days)	68%
TOTALS	64	64	890	80%

Family & Community Partnerships Manager



HS/EHS STATISTICAL REPORT

ALPI HEAD START/EARLY HEAD START MONTHLY STATISTICS REPORT

REPORT FOR THE MONTH OF: August 2015		DATE: 09/02/2015
CENTER: All centers combined – St. Lucie		

ERSEA	THIS MONTH	TO DATE
1. Enrollment		
a. The number of EHS and HS Children served (As of 9/1).	EHS 60 3 YEARS 283 4 YEARS 437	780
b. Of the number of HS children in A1, the number in the VPK program.	0	437
c. Of the number of EHS and HS Children in A1, the number enrolled for a second year.	21	279
2. Of the number of HS Children in B1, the number eligible for kindergarten		437
3. Dropouts		
a. Number of EHS and HS children who have dropped	4	29
b. Of the number in B1, the number who dropped prior to 45 days of attendance.	0	0
4. Attendance/ADA		

SERVICE DELIVERY	EHS	HS	THIS MONTH	TO DATE
A. Family and Community Engagement				
1. Total number of Head Start Families	56	668	724	724
a. Of these, the number of two parent families	11	175	186	186
b. Of these, the number of single parent families	45	493	538	538
c. Of these, the number of families receiving assistance under TANF Program	16	48	64	64
d. Of these, the number of families receiving Supplemental Security Income (SSI)	9	75	84	84
e. Of these, the number of families over income	0	10	10	10
2. Total number of families identified as needing services or identified an interest in the following areas:				
a. Emergency Crisis intervention/Assistance (food, clothing, shelter, etc.)	0	0	0	0
b. Housing assistance such as subsidies, utilities, repairs, etc.	0	0	0	0
c. Counseling or mental health services	0	3	3	3
d. Education/Literacy/English as a Second Language	0	6	6	6
e. Adult education such as GED program and college education	0	12	12	12
f. Job Training	0	4	4	4
g. Substance abuse prevention or treatment	0	0	0	0
h. Child Abuse and Neglect Services/Training	0	0	0	0
i. Domestic violence services	0	0	0	0
j. Child support assistance	0	0	0	0
k. Health education	7	136	143	143
l. Assistance to families of incarcerated individuals	0	0	0	0
m. Parent Education	8	139	147	147
n. Marriage education	0	0	0	0

ALPI HEAD START/EARLY HEAD START MONTHLY STATISTICS REPORT

SERVICE DELIVERY cont'd	EHS	HS	THIS MONTH	TO DATE
B. Early Childhood Development and Health Services				
1. Number of EHS and HS Children who have completed the following screenings:				
a. Height	59	696	755	755
b. Weight	59	696	755	755
c. Vision	41	579	620	620
d. Hearing	41	597	638	638
e. Speech/Language	0	191	191	191
f. Behavioral	40	270	310	310
g. Developmental	30	0	30	30
h. Blood Pressure	10	643	653	653
i. Hemoglobin	39	581	620	620
j. Lead	37	238	575	575
2. Of the number in B1, the number referred for follow up or diagnosed as needing treatment	0	0	0	0
3. Of the number referred in B2, the number who have completed follow up or received treatment	0	0	0	0
4. The number of EHS and HS children receiving or received treatment for the following:	0	0	0	0
a. Anemia	0	0	0	0
b. Asthma	0	0	0	0
c. Hearing Difficulties	0	0	0	0
d. Overweight	0	0	0	0
e. Vision Problems	0	2	2	2
5. Number of EHS and HS children enrolled in Medicaid	39	470	509	509
6. Number of EHS and HS children with private insurance	1	11	12	12
7. Number of EHS and HS children with "Medical Home"	60	696	756	756
8. Number of EHS and HS children who have completed a professional dental examination	31	600	631	631
9. Of the children in B8, the number of children diagnosed as needing treatment	0	92	92	92
10. Of the children diagnosed in B9, the number of children who received or are receiving treatment	0	0	0	0
11. Of the children examined in B8, the number of children who received preventive (care X-ray Cleaning Only)	0	0	0	0
12. Number of EHS and HS children with up-to-date immunizations	60	271	331	331
13. Number of EHS and HS children with complete immunizations	0	449	449	449
14. Number of EHS and HS children with current physicals	57	696	753	753
15. Number of EHS and HS children receiving WIC services	44	429	473	473
16. Number of EHS and HS children receiving meals via Child Care Food Program	0	0	0	0
17. Number of teacher and caregivers home visits completed (1st)	0	0	0	0
18. Number of teacher and caregivers home visits completed (2nd)	0	0	0	0
19. Number of parent/teacher/ caregivers conferences completed	0	0	0	0
20. Number of EHS/HS with baseline assessments completed	0	0	0	0
21. Number of EHS/HS with mid-year assessments completed	0	0	0	0
22. Number of EHS/HS with final assessments completed	0	0	0	0

ALPI HEAD START/EARLY HEAD START MONTHLY STATISTICS REPORT

SERVICE DELIVERY cont'd	EHS	HS	THIS MONTH	TO DATE
C. Mental Health and Disabilities				
1. Number of EHS and HS children with a diagnosed disability	1	46	47	47
2. Of the EHS and HS children in E1 with a diagnosed disability, the number with an IEP or IFSP	1	46	47	47
3. Of the EHS and HS children in E1 with a diagnosed disability, the number determined by LEA or Part C	1	46	47	47
4. Number of EHS and HS children with suspected disabilities	0	3	3	3
5. Number of referred EHS and HS children awaiting testing or staffing	0	3	3	3
6. Number of EHS and HS children referred for mental health services outside of the program	0	0	0	0
7. Number of EHS and HS children the MH Professional Consultant with staff about child's behavior/mental health	0	0	0	0
8. Of the children in E7, the number the MH Professional provided three or more consultations.	0	0	0	0
9. Number of children the MH Professional consulted with the parent about their child's behavior/mental health.	0	0	0	0
10. Number of children the MH Professional provided an individual mental health assessment	0	0	0	0
11. Number of children the MH Professional facilitated a referral for mental health services	0	0	0	0
12. Number of MDT's meetings	0	0	0	0
13. Of the number of MDT meetings, the number of children the team determined to have a disability	0	0	0	0
D. Pregnant Women Services				
1. Indicate the number of pregnant women who received the following services while enrolled in EHS				
a. Prenatal and postpartum health care			0	0
b. Mental health intervention and follow up			0	0
c. Substance abuse prevention			0	0
d. Substance abuse treatment			0	0
e. Prenatal education on fetal development			0	0
f. Information on the benefits of breastfeeding			0	0
E. Transportation				
1. Number of children receiving transportation services			155	155
2. Number of field trips taken			0	0
Comments:				

SIGNATURE:	Josandra Concepcion	JOB TITLE:	Family Support Services Coordinator	DATE:	09/08/15
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ALPI HEAD START/EARLY HEAD START MONTHLY STATISTICS REPORT

REPORT FOR THE MONTH OF: August	
CENTER: ALPI FROSTPROOF/JUMPSTART Early Head Start	DATE: 8/31/2015

ERSEA					THIS MONTH	TO DATE
1.Enrollment						
a. The number of EHS and HS Children served (As of 9/1).		EHS	3 YEARS	4 YEARS	76	97
b. Of the number of HS children in A1, the number in the VPK program.		76				
c. Of the number of EHS and HS Children in A1, the number enrolled for a second year.		38				38
2. Of the number of HS Children eligible for kindergarten						
3. Dropouts						
a. Number of EHS and HS children who have dropped					21	21
b. Of the number in B1, the number who dropped prior to 45 days of attendance.					21	21
4. Attendance/ADA						

SERVICE DELIVERY					THIS MONTH	TO DATE
A. Family and Community Engagement						
1. Total number of Head Start Families						
a. Of these, the number of two parent families		60				6
b. Of these, the number of single parent families		11				54
c. Of these, the number of families receiving assistance under TANF Program		49			1	1
d. Of these, the number of families receiving Supplemental Security Income (SSI)		1			4	4
e. Of these, the number of families over income		4			3	3
2. Total number of families identified as needing services or identified an interest in the following areas:						
a. Emergency Crisis intervention/Assistance (food, clothing, shelter, etc.)						
b. Housing assistance such as subsidies, utilities, repairs, etc.		25			25	25
c. Counseling or mental health services						
d. Education/Literacy/English as a Second Language						
e. Adult education such as GED program and college education						
f. Job Training						
g. Substance abuse prevention or treatment						
h. Child Abuse and Neglect Services/Training						
i. Domestic violence services						
j. Child support assistance						
k. Health education						

ALPI HEAD START/EARLY HEAD START MONTHLY STATISTICS REPORT

20. Number of EHS/HS with baseline assessments completed					
21. Number of EHS/HS with mid-year assessments completed					
22. Number of EHS/HS with final assessments completed					
SERVICE DELIVERY cont'd					
C. Mental Health and Disabilities					
1. Number of EHS and HS children with a diagnosed disability	4				4
2. Of the EHS and HS children in E1 with a diagnosed disability, the number with an IEP or IFSP	4				4
3. Of the EHS and HS children in E1 with a diagnosed disability, the number determined by LEA or Part C					
4. Number of EHS and HS children with suspected disabilities				25	25
5. Number of referred EHS and HS children awaiting testing or staffing				25	25
6. Number of EHS and HS children referred for mental health services outside of the program					
7. Number of EHS and HS children the MH Professional Consultant with staff about child's behavior/mental health					
8. Of the children in E7, the number the MH Professional provided three or more consultations.					
9. Number of children the MH Professional consulted with the parent about their child's behavior/mental health.					
10. Number of children the MH Professional provided an individual mental health assessment					
11. Number of children the MH Professional facilitated a referral for mental health services					
12. Number of MDT's meetings					
13. Of the number of MDT meetings, the number of children the team determined to have a disability					
D. Pregnant Women Services					
1. Indicate the number of pregnant women who received the following services while enrolled in EHS					
a. Prenatal and postpartum health care					
b. Mental health intervention and follow up					
c. Substance abuse prevention					
d. Substance abuse treatment					
e. Prenatal education on fetal development					
f. Information on the benefits of breastfeeding					
E. Transportation					
1. Number of children receiving transportation services				N/A	N/A
2. Number of field trips taken				N/A	N/A
Comments: Problems encountered, specific assistance needed (Attach additional pages if necessary)					

**NON-FEDERAL SHARE
(HS/EHS)**

MONTHLY NON-FEDERAL SHARE REPORT SUMMARY
(Due by the 7th of each month)

MONTH REPORTING: AUGUST 2015			
PROGRAM TYPE	HEAD START/EARLY HEAD START		
GRANT #	04CH4739		
FAA PERIOD	Beginning	7/1/2015	Ending 6/30/2016

FAA TYPE	REFUNDING	TOTAL
**FAA AWARD	\$ 7,284,907.00	\$ 7,284,907.00
25% MATCH	\$ 1,821,227.00	\$ 1,821,227.00

MATCH TYPE	PLAN	July	August	September	October	November	December	January	February	March	April	May	June	Y-T-D	BALANCE	%
VOLUNTEERS	\$ 482,505.00	\$ -	\$ 27,796.26											\$ 27,796.26	\$ 454,708.74	6%
SPACE COST	\$ 602,300.00	\$ 50,248.00	\$ 50,248.00											\$ 100,496.00	\$ 501,804.00	17%
OTHER	\$ 727,422.00	\$ -	\$ 53,220.90											\$ 53,220.90	\$ 674,201.10	7%
CASH	\$ -	\$ -	\$ -											\$ -	\$ -	0%
TOTAL	\$ 1,812,227.00	\$ 50,248.00	\$ 131,265.16	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 181,513.2	\$ 1,630,713.84	10%

CERTIFICATION	DATE	9/15/2015
PROGRAM OPERATIONS DIRECTORS: Myma Rodriguez	DATE	
CERTIFIED BY:	DATE	

Comments: Under "OTHER" there is a \$50,823.90 projected reimbursement for VPK for the month of August 2015.

ESTIMATED VOLUNTEER PARTICIPANTS YEAR-TO-DATE

VOLUNTEERS	PLAN	July	August	September	October	November	December	January	February	March	April	May	June	Y-T-D
Parents	831	0	561											561.00
Professionals	50	0	15											15.00
Hours			1614											1614.00

Definitions:
Parents i.e., biological parent, legal guardian (to include grandparent)
Professional i.e., Physician, Dentist, Nurse, Therapist, etc.

DCF/CHILD CARE FACILITY REPORT



Child Care Facility Information

Name: ALPI Garden Terrace Head Start ID Number: C19SL0051
 Address: 1110 North 32nd Street City: Fort Pierce State: FL Zip Code: 34947-
 Phone Number: (772) 468-0300 Capacity: 94
 Owner/Director/Staff Responsible: Sandra Monroe

Inspection Information

Type: Routine Date: 7/29/2015 Arrival/Departure Time: 11:20 AM to 11:45 AM
 Staff Present: 1 Children Present: 0

INSPECTION CHECKLIST

GENERAL REQUIREMENTS

- | | |
|--|---------------|
| 01. License Displayed/Citation Posted/Advertising ss. 402.3125, 402.318, F.S. | Compliance |
| 02. Licensed Capacity ss. 402.305(6), rule 65C-22.002(3), F.A.C. | Not Monitored |
| <u>Not Monitored Comments</u>
The program does not operate with children present in the summer. The new school year begins 8/17/15. | |
| 03. Minimum Age Requirements ss. 402.305(2), F.S. & rule 65C-22.001(3), F.A.C. | Compliance |
| 04. Ratio Sufficient ss. 402.305(4), F.S. & rule 65C-22.001(4), F.A.C. | Not Monitored |
| <u>Not Monitored Comments</u>
No children present. School resumes 8/17/15. | |
| 05. Supervision rule 65C-22.001(5), 65C-22.001(6), 65C-22.002(4) & 65C-22.007 (2), F.A.C. | Not Monitored |
| 06. Driver's License, Physician Certification & First Aid/CPR Training rule 65C-22.001(6) 65C-22.006(4), F.A.C. | Not Monitored |
| <u>Not Monitored Comments</u>
All transportation documentation is under ALPI Queen Townsend II. | |
| 07. Vehicle Insurance and Inspection ss. 402.305(10), F.S. & rule 65C-22.001(6) F.A.C. | Not Monitored |
| 08. Seat Belts/Child Restraints ss. 402.305(10), F.S. & rule 65C-22.001(6), F.A.C. | Not Monitored |
| 09. Transportation rule 65C-22.001(6), F.A.C. | Not Monitored |
| 10. Planned Activities ss. 402.305(13), F.S. & rule 65C-22.001(7), F.A.C. | Compliance |
| 11. Field Trip Permission rule 65C-22.001(7), 65C-22.001(6), F.A.C. | Compliance |
| 12. Child Discipline ss. 402.305(12), F.S. & rule 65C-22.001(8), F.A.C. | Not Monitored |
| <u>Not Monitored Comments</u>
No children present. | |



Name: ALPI Garden Terrace Head Start License #: C19SL0051
Address: 1110 North 32nd Street City: Fort Pierce State: FL Zip Code: 34947-
Type: Routine Date: 7/29/2015

13. Discipline Policy rule 65C-22.001(8), F.A.C. Compliance

PHYSICAL ENVIRONMENT

14. Facility Environment rule 65C-22.002(1), 65C-22.002(7) - (9), F.A.C. Compliance

15. Toxic Substances and Hazardous Materials rule 65C-22.002(1), F.A.C. Compliance

16. Supplies Labeled/Stored rule 65C-22.002(1), F.A.C. Compliance

17. Lighting rule 65C-22.002(2), F.A.C. Compliance

18. Temperature and Ventilation rule 65C-22.002(2), F.A.C. Compliance

19. Indoor Floor Space ss. 402.305(6)F.S., rule 65C-22.002(3), 65C-22.007(3)(a), 65C-22.008(3), F.A.C. Compliance

20. Outdoor Area/Square Footage ss. 402.305(6), F.S. & rule 65C-22.002(4), F.A.C. Compliance

21. Outdoor Play Area rule 65C-22.002(4), F.A.C. Compliance

22. Fencing rule 65C-22.002(4), F.A.C. Compliance

23. Individual Bedding rule 65C-22.002(5), 65C-22.002(5), 65C-22.002(10), 65C-22.008(3), F.A.C. Compliance

24. Bedding and Linens rule 65C-22.002(10), F.A.C. Compliance

25. Nap/Sleep Space Requirements rule 65C-22.002(5), F.A.C. Not Monitored

Not Monitored Comments

No children present.

26. Exit Area Clear rule 65C-22.002(5) and (7), F.A.C. Compliance

27. Crib Requirements rule 65C-22.002(5), F.A.C. Not Applicable

Not Applicable Comments

No infants are enrolled in this program.



Name: ALPI Garden Terrace Head Start License #: C19SL0051
Address: 1110 North 32nd Street City: Fort Pierce State: FL Zip Code: 34947-
Type: Routine Date: 7/29/2015

28. Toilets and Sinks rule 65C-22.002(6), F.A.C.	Compliance
29. Potty Chairs rule 65C-22.002(6), F.A.C.	Not Applicable
<u>Not Applicable Comments</u> No potty chairs.	
30. Bath Facilities and Supervision rule 65C-22.002(6), F.A.C.	Compliance
31. Bathroom Supplies and Equipment rule 65C-22.002(6), F.A.C.	Compliance
32. Operable Phone rule 65C-22.002(7), F.A.C.	Compliance
33. Fire Drills & Emergency Preparedness rule 65C-22.002(7) F.A.C.	Not Monitored
<u>Not Monitored Comments</u> Fire drills will resume when the new school year begins.	
34. Food Preparation Area 65C-22.002(8), F.A.C.	Compliance
35. Health and Sanitation rule 65C-22.002(10), F.A.C.	Compliance
36. Drinking Water Available rule 65C-22.002(10), F.A.C.	Compliance
37. Sanitary Diapering rule 65C-22.002(10), F.A.C.	Not Applicable
<u>Not Applicable Comments</u> No children in diapers are enrolled.	
38. Diaper Disposal rule 65C-22.002(10), F.A.C.	Not Applicable
<u>Not Applicable Comments</u> No children in diapers are enrolled.	
39. Indoor Equipment rule 65C-22.002(11), F.A.C.	Compliance
40. Outdoor Equipment rule 65C-22.002(11), F.A.C.	Compliance

TRAINING

41. Training Requirements ss. 402.305(2) - (3), F.S. & rule 65C-22.003(2) - (3), F.A.C.	Compliance
42. 10-Hour In-Service rule 65C-22.003(6), F.A.C.	Compliance
<u>Compliance Comments</u> All child care personnel have met or exceeded the in-service requirement for 2014-2015.	



Name: ALPI Garden Terrace Head Start License #: C19SL0051
Address: 1110 North 32nd Street City: Fort Pierce State: FL Zip Code: 34947-
Type: Routine Date: 7/29/2015

43. Credentialed Staff ss.402.305(3), F.S. & rule 65C-22.003(7)-(8), F.A.C. Compliance

HEALTH REQUIREMENTS

44. Communicable Disease Control rule 65C-22.004(1), F.A.C. Compliance

Compliance Comments

Influenza: Reminder: ensure parents are provided information annually, during August and September, regarding influenza.
Pamphlets are available at www.myfifamilies.com.

45. First Aid Requirements rule 65C-22.004(2), F.A.C. Compliance

46. CPR Requirements rule 65C-22.004(2), F.A.C. Compliance

47. Emergency Telephone Numbers rule 65C-22.004(2), F.A.C. Compliance

48. Accident/ Incident Notification and Documentation rule 65C-22.004(2), F.A.C. Compliance

49. Medication rule 65C-22.004(3), F.A.C. Compliance

FOOD AND NUTRITION

50. Meals and Snacks rule 65C-22.005(1), F.A.C. Not Monitored

Not Monitored Comments

A food service inspection will be done at the time of the next inspection.

51. Meal and Snack Menus rule 65C-22.005(1), F.A.C. Not Monitored

52. Food Service rule 65C-22.005(3), F.A.C. Not Monitored

53. Bottles Sanitary and Labeled rule 65C-22.005(2), F.A.C. Not Applicable

Not Applicable Comments

No infants or toddlers are enrolled in this program.

54. Catered Food and Food Provided by Parents 65C-22.005(1), F.A.C. Not Monitored

55. Single Service Items rule 65C-22.0011(8), 65C-22.002(10), F.A.C. Not Monitored

RECORD KEEPING

56. Records ss. 402.3054(2), F.S., rule 65C-22.006(3)(c)5., F.A.C. Not Monitored

Not Monitored Comments

Children are currently being enrolled for the new school year. Files will be reviewed during the next routine inspection.

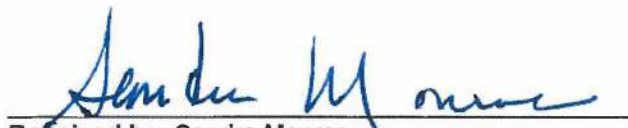



Name: ALPI Garden Terrace Head Start License #: C19SL0051
Address: 1110 North 32nd Street City: Fort Pierce State: FL Zip Code: 34947-
Type: Routine Date: 7/29/2015

57. Children's Health/Immunization and Records ss. 402.305(9), F.S. & rule 65C-22.006(2) - (3), F.A.C. Not Monitored
- Not Monitored Comments
Children are currently being enrolled for the new school year. Files will be reviewed during the next routine inspection.
58. Enrollment Information on File/Current ss. 402.3125(5), 402.305(12), F.S. & rule 65C-22.006(3) F.A.C. Not Monitored
59. Personnel Records ss. 402.3055(1), F.S., rule 65C-22.003(4), & rule 65C-22.006(4) - (5), F.A.C. Compliance
- Compliance Comments
Personnel files were reviewed with the director (16).
60. Background Screening Documents ss. 402.3054, F.S. & rule 65C-22.006(4), F.A.C. Compliance
61. Daily Attendance rule 65C-22.001(10) & rule 65C-22.006(5), F.A.C. Not Monitored
- Not Monitored Comments
No children are attending during the summer.
62. Emergency Plan/Posted rule 65C-22.002(7), F.A.C. Compliance

ENFORCEMENT

63. Access/Child Abuse or Neglect/Misrepresentation ss. 402.311, 402.319, F.S. & rule 65C-22.001(9),(11), F.A.C. Compliance


Received by: Sandra Monroe
Date: Wednesday, July 29, 2015


Inspected by: Kathleen Walters
Date: Wednesday, July 29, 2015



Name: ALPI Garden Terrace Head Start License #: C19SL0051
Address: 1110 North 32nd Street City: Fort Pierce State: FL Zip Code: 34947-
Type: Routine Date: 7/29/2015

SUPPLEMENTAL INSPECTION SHEET

Comments:

Training

Jinel Clarke is due to have completed the 40-hour required training. Ensure she has a current DCF transcript on file when she returns to verify completion.

Received by: Sandra Monroe
Date: Wednesday, July 29, 2015

Inspected by: Kathleen Walters
Date: Wednesday, July 29, 2015



CHILD CARE TRAINING TRANSCRIPT

Student: Jinel R Clarke
Student ID: 1187474 Date: 07/28/2015

<u>TRAINING/COURSE</u>	<u>Hours</u>	<u>Certificate#</u>	<u>Date</u>	<u>CEUs</u>
<u>CHILD CARE FACILITY PART 1</u>				
Health, Safety and Nutrition (HSAN)	8	4523203	04/23/2014	
Child Growth and Development (CGAD)	6	4523202	04/23/2014	
Behavioral Observation and Screening (BOAS)	6	4523201	04/23/2014	
<u>CHILD CARE FACILITY PART 2</u>				
Emergent Literacy for VPK Instructors (VPK)	5	In-Service	06/04/2014	.5
<u>ONLINE IN-SERVICE</u>				
Language and Vocabulary in the VPK Classroom (LVPK)	5	4555426	06/03/2014	.5
<u>DOE - VPK OFFICE OF EARLY LEARNING INSTRUCTOR-LED TRAINING</u>				
DOE- Standards For Four-Year-Olds	3	4561180	06/04/2014	.3
DOE- VPK Assessment Instructional Implications	2	4557765	06/05/2014	.2
DOE - Integrating the Standards: Phonological Awareness	2	4556963	06/04/2014	.2
DOE- How to Administer the Florida VPK Assessment	3	4546329	05/22/2014	.3
<u>SPECIAL CERTIFICATIONS AND CREDENTIALS</u>				
	<u>Level / Area / VPK</u>	<u>Certificate #</u>	<u>Effective Date</u>	<u>Expiration Date</u>
Staff Credential Verification	Formal Education	4522834	04/23/2014	
<u>INTRODUCTORY TRAINING REQUIREMENTS</u>				
Part I Child Care Facility 30 Hour Training Requirement has been completed. No				
Part II Child Care Facility 10 Hour Training Requirement has been completed. No				
Family Child Care Home 30 Hour Training Requirement has been completed. No				

R+R 6
CAN 4
Part II 10

Sherrita M. de Cezar
Director
Office of Child Care Regulation and Background Screening





Child Care Facility Information

Name: ALPI Queen Townsend Head Start Center II ID Number: C19SL0161
 Address: 2202 Avenue Q City: Fort Pierce State: FL Zip Code: 34950-
 Phone Number: (772) 468-0904 Capacity: 325
 Owner/Director/Staff Responsible: Ellen Bradley

Inspection Information

Type: Routine Date: 7/29/2015 Arrival/Departure Time: 09:30 AM to 11:15 AM
 Staff Present: 1 Children Present: 0

INSPECTION CHECKLIST

GENERAL REQUIREMENTS

- | | |
|---|---------------|
| 01. License Displayed/Citation Posted/Advertising ss. 402.3125, 402.318, F.S. | Compliance |
| 02. Licensed Capacity ss. 402.305(6), rule 65C-22.002(3), F.A.C. | Compliance |
| <u>Compliance Comments</u>
The program is not operating with children at this time. The new school year begins on 8/17/15. | |
| 03. Minimum Age Requirements ss. 402.305(2), F.S. & rule 65C-22.001(3), F.A.C. | Compliance |
| 04. Ratio Sufficient ss. 402.305(4), F.S. & rule 65C-22.001(4), F.A.C. | Not Monitored |
| <u>Not Monitored Comments</u>
There are no children in attendance until the new school year. | |
| 05. Supervision rule 65C-22.001(5), 65C-22.001(6), 65C-22.002(4) & 65C-22.007 (2), F.A.C. | Not Monitored |
| <u>Not Monitored Comments</u>
There are no children in attendance until the new school year. | |
| 06. Driver's License, Physician Certification & First Aid/CPR Training rule 65C-22.001(6) 65C-22.006(4), F.A.C. | Compliance |
| 07. Vehicle Insurance and Inspection ss. 402.305(10), F.S. & rule 65C-22.001(6) F.A.C. | Compliance |
| 08. Seat Belts/Child Restraints ss. 402.305(10), F.S. & rule 65C-22.001(6), F.A.C. | Not Monitored |
| <u>Not Monitored Comments</u>
The bus was not available for inspection. | |
| 09. Transportation rule 65C-22.001(6), F.A.C. | Not Monitored |
| <u>Not Monitored Comments</u>
There is no transporting in the summer. | |
| 10. Planned Activities ss. 402.305(13), F.S. & rule 65C-22.001(7), F.A.C. | Compliance |
| 11. Field Trip Permission rule 65C-22.001(7), 65C-22.001(6), F.A.C. | Compliance |
| 12. Child Discipline ss. 402.305(12), F.S. & rule 65C-22.001(8), F.A.C. | Not Monitored |
| <u>Not Monitored Comments</u>
No children present. | |



Name: ALPI Queen Townsend Head Start Center II License #: C19SL0161

Address: 2202 Avenue Q City: Fort Pierce State: FL Zip Code: 34950-

Type: Routine Date: 7/29/2015

13. Discipline Policy rule 65C-22.001(8), F.A.C.

Compliance

PHYSICAL ENVIRONMENT

14. Facility Environment rule 65C-22.002(1), 65C-22.002(7) - (9), F.A.C.

Compliance

Compliance Comments

Rooms are being prepared for the new school year. All floors have been stripped and waxed.

15. Toxic Substances and Hazardous Materials rule 65C-22.002(1), F.A.C.

Compliance

16. Supplies Labeled/Stored rule 65C-22.002(1), F.A.C.

Compliance

17. Lighting rule 65C-22.002(2), F.A.C.

Compliance

18. Temperature and Ventilation rule 65C-22.002(2), F.A.C.

Compliance

19. Indoor Floor Space ss. 402.305(6)F.S., rule 65C-22.002(3), 65C-22.007(3)(a), 65C-22.008(3), F.A.C.

Compliance

20. Outdoor Area/Square Footage ss. 402.305(6), F.S. & rule 65C-22.002(4), F.A.C.

Compliance

21. Outdoor Play Area rule 65C-22.002(4), F.A.C.

Compliance

Compliance Comments

A new playground has been added for the younger preschoolers.

22. Fencing rule 65C-22.002(4), F.A.C.

Compliance

23. Individual Bedding rule 65C-22.002(5), 65C-22.002(5), 65C-22.002(10), 65C-22.008(3), F.A.C.

Compliance

24. Bedding and Linens rule 65C-22.002(10), F.A.C.

Compliance

25. Nap/Sleep Space Requirements rule 65C-22.002(5), F.A.C.

Not Monitored

Not Monitored Comments

No children present.

26. Exit Area Clear rule 65C-22.002(5) and (7), F.A.C.

Compliance

27. Crib Requirements rule 65C-22.002(5), F.A.C.

Not Applicable

Not Applicable Comments

Infants are not enrolled.



Name: ALPI Queen Townsend Head Start Center II License #: C19SL0161
Address: 2202 Avenue Q City: Fort Pierce State: FL Zip Code: 34950-
Type: Routine Date: 7/29/2015

28. Toilets and Sinks rule 65C-22.002(6), F.A.C.	Compliance
29. Potty Chairs rule 65C-22.002(6), F.A.C.	Not Applicable
<u>Not Applicable Comments</u> No potty chairs.	
30. Bath Facilities and Supervision rule 65C-22.002(6), F.A.C.	Compliance
31. Bathroom Supplies and Equipment rule 65C-22.002(6), F.A.C.	Compliance
32. Operable Phone rule 65C-22.002(7), F.A.C.	Compliance
33. Fire Drills & Emergency Preparedness rule 65C-22.002(7) F.A.C.	Not Monitored
<u>Not Monitored Comments</u> Drills will resume when school begins.	
34. Food Preparation Area 65C-22.002(8), F.A.C.	Compliance
35. Health and Sanitation rule 65C-22.002(10), F.A.C.	Compliance
36. Drinking Water Available rule 65C-22.002(10), F.A.C.	Compliance
37. Sanitary Diapering rule 65C-22.002(10), F.A.C.	Not Applicable
<u>Not Applicable Comments</u> No children in diapers are enrolled.	
38. Diaper Disposal rule 65C-22.002(10), F.A.C.	Not Applicable
39. Indoor Equipment rule 65C-22.002(11), F.A.C.	Compliance
40. Outdoor Equipment rule 65C-22.002(11), F.A.C.	Compliance
<u>Compliance Comments</u> A beautiful, age appropriate complex unit has been installed on the new playground for the younger preschoolers.	
TRAINING	
41. Training Requirements ss. 402.305(2) - (3), F.S. & rule 65C-22.003(2) - (3), F.A.C.	Compliance
42. 10-Hour In-Service rule 65C-22.003(6), F.A.C.	Compliance
<u>Compliance Comments</u> All childcare personnel have completed the in-service requirement for 2014-2015.	



Name: ALPI Queen Townsend Head Start Center II License #: C19SL0161

Address: 2202 Avenue Q City: Fort Pierce State: FL Zip Code: 34950-

Type: Routine Date: 7/29/2015

43. Credentialed Staff ss.402.305(3), F.S. & rule 65C-22.003(7)-(8), F.A.C.

Compliance

HEALTH REQUIREMENTS

44. Communicable Disease Control rule 65C-22.004(1), F.A.C.

Compliance

Compliance Comments

Influenza: Reminder: ensure parents are provided information annually, during August and September, regarding influenza. Pamphlets are available at www.myflfamilies.com.

45. First Aid Requirements rule 65C-22.004(2), F.A.C.

Compliance

46. CPR Requirements rule 65C-22.004(2), F.A.C.

Compliance

47. Emergency Telephone Numbers rule 65C-22.004(2), F.A.C.

Compliance

48. Accident/ Incident Notification and Documentation rule 65C-22.004(2), F.A.C.

Compliance

49. Medication rule 65C-22.004(3), F.A.C.

Compliance

FOOD AND NUTRITION

50. Meals and Snacks rule 65C-22.005(1), F.A.C.

Not Monitored

Not Monitored Comments

This standard will be monitored when school resumes for the new school year.

51. Meal and Snack Menus rule 65C-22.005(1), F.A.C.

Not Monitored

Not Monitored Comments

This standard will be monitored when school resumes for the new school year.

52. Food Service rule 65C-22.005(3), F.A.C.

Not Monitored

53. Bottles Sanitary and Labeled rule 65C-22.005(2), F.A.C.

Not Applicable

Not Applicable Comments

No infants/toddlers are enrolled.

54. Catered Food and Food Provided by Parents 65C-22.005(1), F.A.C.

Not Monitored

55. Single Service Items rule 65C-22.0011(8), 65C-22.002(10), F.A.C.

Not Monitored

RECORD KEEPING

56. Records ss. 402.3054(2), F.S., rule 65C-22.006(3)(c)5., F.A.C.

Not Monitored



Name: ALPI Queen Townsend Head Start Center II License #: C19SL0161
Address: 2202 Avenue Q City: Fort Pierce State: FL Zip Code: 34950-
Type: Routine Date: 7/29/2015

57. Children's Health/Immunization and Records ss. 402.305(9), F.S. & rule 65C-22.006(2) - (3), F.A.C. Not Monitored
- Not Monitored Comments
The program is in the process of enrolling children for the new school year. Files will be reviewed during the next inspection.
58. Enrollment Information on File/Current ss. 402.3125(5), 402.305(12), F.S. & rule 65C-22.006(3) F.A.C. Not Monitored
59. Personnel Records ss. 402.3055(1), F.S., rule 65C-22.003(4), & rule 65C-22.006(4) - (5), F.A.C. Compliance
- Compliance Comments
All personnel files were reviewed (40).
60. Background Screening Documents ss. 402.3054, F.S. & rule 65C-22.006(4), F.A.C. Compliance
61. Daily Attendance rule 65C-22.001(10) & rule 65C-22.006(5), F.A.C. Not Monitored
62. Emergency Plan/Posted rule 65C-22.002(7), F.A.C. Compliance

ENFORCEMENT

63. Access/Child Abuse or Neglect/Misrepresentation ss. 402.311, 402.319, F.S. & rule 65C-22.001(9),(11), F.A.C. Compliance

Received by: Ellen Bradley
Date: Wednesday, July 29, 2015

Inspected by: Kathleen Walters
Date: Wednesday, July 29, 2015

VPK MONITORING FORMS

☐ SR ☒ VPK

Date: 8-28-15



Early Learning Coalition Visitation Form for Child Care Sites

Site Name: ALPI - Francina Dural Director: Temika Johnson

Time In/Out: 9:55-10:20 Resource Specialist: Lina Lloyd

Reason For Visit:

- | | |
|--|--|
| <input type="checkbox"/> Deliver/Collect Information/Forms | <input type="checkbox"/> New Provider Checklist/Walk-through |
| <input type="checkbox"/> Technical Assistance | <input type="checkbox"/> Child Assessment |
| <input checked="" type="checkbox"/> ASQ Online monitoring | <input type="checkbox"/> Child Observation |
| <input type="checkbox"/> SR/VPK Monitoring | <input type="checkbox"/> Classroom Observation |
| <input type="checkbox"/> SR/VPK Monitoring Follow-up | <input type="checkbox"/> Program Evaluation |
| <input type="checkbox"/> SPCR Monitoring | <input type="checkbox"/> CLASS |

Requested Forms: ☐ ASQ-3 ☐ ASQ: SE ☐ Transfer/Withdrawal Forms ☐ Other

Delivered Forms: ☐ ASQ-3 ☐ ASQ: SE ☐ Transfer/Withdrawal Forms ☐ Other

Comments:

Conducted VPK monitoring

Technical Assistance:

Reminders:

Temika Johnson 10:20
Site Representative Signature

Lina Lloyd
ELC Resource Specialist Signature



VPK - Monitoring Form

Site Name ALPI - Francine Duval Classroom: A Date: 8-28-15

Observation/Documentation Time: 10 min

Instructional Hours: ☒ 540 hours ☐ 300 hours

- | | N/A | Comp | Non-Comp |
|--|-------------------------------------|-------------------------------------|--------------------------|
| *1) License Expiration <u>9/6/16</u> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| *2) Accrediting Agency/Expiration | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| *3) Credentialed Director: <u>Tennika Johnson</u> | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| *4) Teacher: <u>Bernadine Marshall</u> | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| *5) Teacher Asst: <u>Sakashia Jordan</u> | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| *6) Class Ratio: <u>2</u> teacher(s) to <u>16</u> children | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Class Ratio: 1:11 or 2:20 | | | |
| *7) Curriculum Compliance: A - J | Curriculum: <u>SPLASH</u> | | |

- | | Yes | No | | Yes | No |
|---|-------------------------------------|--------------------------|---|-------------------------------------|--------------------------|
| A. Lesson plans available and written to reflect daily schedule | <input checked="" type="checkbox"/> | <input type="checkbox"/> | F. Teachers responsive and involved with children | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| B. Lesson plan indicates FL Performance standards | <input checked="" type="checkbox"/> | <input type="checkbox"/> | G. Peer interaction occurs | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| C. Written schedule is posted and relates to what occurs | <input checked="" type="checkbox"/> | <input type="checkbox"/> | H. Character Education Program implemented | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| D. Teaching strategies are developmentally appropriate | <input checked="" type="checkbox"/> | <input type="checkbox"/> | I. Adequate materials accessible for children | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| E. Positive methods of discipline used effectively | <input checked="" type="checkbox"/> | <input type="checkbox"/> | J. Materials in good repair | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

- *8) Random sampling of three (3) Attendance Verification Forms

Child's Name	Current Yes	No
<u>not available yet</u>		

9) Observation:

The children are in centers. The centers open include manipulatives, puzzles, play dough, letter puzzles and chunky puzzles. Miss Bernadine and Miss Sakashia are talking to the children, helping them scaffold their play.

- 10) Technical Assistance ☐ Requested ☐ Given ☒ NA For: _____

☒ Compliant ☐ Non-Compliant For: _____

For Non-Compliance: The provider has 14 calendar days to comply. Failure to do so may result in loss of funds and/or termination of the VPK agreement (page 5 and 6, #42 of VPK Agreement).

n/a
Resource Specialist Date of Return

Tennika Johnson
Site Representative Signature

Lina Lloyd
ELC Resource Specialist Signature

* Denotes Compliance Issue



VPK - Monitoring Form

Site Name ALPI - Francine Dunsal Classroom: B Date: 2-28-15

Observation/Documentation Time: 10 min Instructional Hours: ☒ 540 hours ☐ 300 hours

- | | N/A | Comp | Non-Comp |
|--|-------------------------------------|-------------------------------------|--------------------------|
| *1) License Expiration <u>9-6-16</u> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| *2) Accrediting Agency/Expiration _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| *3) Credentialed Director: <u>Tamika Johnson</u> | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| *4) Teacher: <u>Roshae Adams</u> | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| *5) Teacher Asst: <u>Julia Hagens</u> | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| *6) Class Ratio: <u>2</u> teacher(s) to <u>18</u> children | | | |
| Class Ratio: 1:11 or 2:20 | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

- *7) Curriculum Compliance: A - J Curriculum: SPLASH
- | | Yes | No | | Yes | No |
|---|-------------------------------------|--------------------------|---|-------------------------------------|--------------------------|
| A. Lesson plans available and written to reflect daily schedule | <input checked="" type="checkbox"/> | <input type="checkbox"/> | F. Teachers responsive and involved with children | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| B. Lesson plan indicates FL Performance standards | <input checked="" type="checkbox"/> | <input type="checkbox"/> | G. Peer interaction occurs | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| C. Written schedule is posted and relates to what occurs | <input checked="" type="checkbox"/> | <input type="checkbox"/> | H. Character Education Program implemented | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| D. Teaching strategies are developmentally appropriate | <input checked="" type="checkbox"/> | <input type="checkbox"/> | I. Adequate materials accessible for children | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| E. Positive methods of discipline used effectively | <input checked="" type="checkbox"/> | <input type="checkbox"/> | J. Materials in good repair | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

- *8) Random sampling of three (3) Attendance Verification Forms
- | Child's Name | Current Yes | No |
|-------------------|-------------|----|
| not available yet | | |
| | | |
| | | |

9) Observation:

The children are in activity centers. There are several children in the soft blocks area, several working with flat blocks, a small group doing card matching (letters), and the last group is cutting out pictures. The teachers talk to the children to enhance their experience.

- 10) Technical Assistance ☐ Requested ☐ Given ☒ NA For: _____

☒ Compliant ☐ Non-Compliant For: _____

For Non-Compliance: The provider has 14 calendar days to comply. Failure to do so may result in loss of funds and/or termination of the VPK agreement (page 5 and 6, #42 of VPK Agreement).

n/a
Resource Specialist Date of Return

Tamika Johnson
Site Representative Signature

Lina Floyd
ELC Resource Specialist Signature

* Denotes Compliance Issue



RECEIVED SEP 01 2015

VPK - Monitoring Form

Site Name ALPI Garden Terrace Classroom: A Date: 8-28-15Observation/Documentation Time: 10 min Instructional Hours: ☒ 540 hours ☐ 300 hours

- | | N/A | Comp | Non-Comp |
|--|-------------------------------------|-------------------------------------|--------------------------|
| *1) License Expiration <u>1/11/16</u> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| *2) Accrediting Agency/Expiration | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| *3) Credentialed Director: <u>Sandra Monroe</u> | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| *4) Teacher: <u>Eleanor Vergile</u> | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| *5) Teacher Asst: <u>Titresha Mond</u> | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| *6) Class Ratio: <u>2</u> teacher(s) to <u>18</u> children | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Class Ratio: <u>1:11 or 2:20</u> | | | |

*7) Curriculum Compliance: A - J

Curriculum: SPLASH

- | | Yes | No | | Yes | No |
|---|-------------------------------------|--------------------------|---|-------------------------------------|--------------------------|
| A. Lesson plans available and written to reflect daily schedule | <input checked="" type="checkbox"/> | <input type="checkbox"/> | F. Teachers responsive and involved with children | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| B. Lesson plan indicates FL Performance standards | <input checked="" type="checkbox"/> | <input type="checkbox"/> | G. Peer interaction occurs | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| C. Written schedule is posted and relates to what occurs | <input checked="" type="checkbox"/> | <input type="checkbox"/> | H. Character Education Program implemented | <input type="checkbox"/> | <input type="checkbox"/> |
| D. Teaching strategies are developmentally appropriate | <input checked="" type="checkbox"/> | <input type="checkbox"/> | I. Adequate materials accessible for children | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| E. Positive methods of discipline used effectively | <input checked="" type="checkbox"/> | <input type="checkbox"/> | J. Materials in good repair | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

*8) Random sampling of three (3) Attendance Verification Forms

Current

Child's Name

Yes No

not available yet		
-------------------	--	--

9) Observation:

The children are sitting at the table. Mrs. Eleanor gives them a piece of construction paper. They are tracing their hands (as part of a body parts activity). The teachers help them to complete the task.

10) Technical Assistance ☐ Requested ☐ Given ☒ N/A For: _____☒ Compliant ☐ Non-Compliant For: _____

For Non-Compliance: The provider has 14 calendar days to comply. Failure to do so may result in loss of funds and/or termination of the VPK agreement (page 5 and 6, #42 of VPK Agreement).

Resource Specialist Date of Return

Site Representative Signature

ELC Resource Specialist Signature

* Denotes Compliance Issue



VPK - Monitoring Form

Site Name ALPI - Garden Terrace Classroom: B Date: 8-28-15

Observation/Documentation Time: 10 min

Instructional Hours: ☒ 540 hours ☐ 300 hours

- | | N/A | Comp | Non-Comp |
|--|-------------------------------------|-------------------------------------|--------------------------|
| *1) License Expiration <u>1/11/16</u> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| *2) Accrediting Agency/Expiration | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| *3) Credentialed Director: <u>Sandra Monroe</u> | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| *4) Teacher: <u>Cindy Vandegruit</u> | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| *5) Teacher Asst: <u>Jennifer Quiñones</u> | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| *6) Class Ratio: <u>2</u> teacher(s) to <u>17</u> children | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Class Ratio: <u>1:11 or 2:20</u> | | | |
| *7) Curriculum Compliance: A - J | Curriculum: <u>SPLASH</u> | | |

- | | Yes | No | | Yes | No |
|---|-------------------------------------|--------------------------|---|-------------------------------------|--------------------------|
| A. Lesson plans available and written to reflect daily schedule | <input checked="" type="checkbox"/> | <input type="checkbox"/> | F. Teachers responsive and involved with children | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| B. Lesson plan indicates FL Performance standards | <input checked="" type="checkbox"/> | <input type="checkbox"/> | G. Peer interaction occurs | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| C. Written schedule is posted and relates to what occurs | <input checked="" type="checkbox"/> | <input type="checkbox"/> | H. Character Education Program implemented | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| D. Teaching strategies are developmentally appropriate | <input checked="" type="checkbox"/> | <input type="checkbox"/> | I. Adequate materials accessible for children | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| E. Positive methods of discipline used effectively | <input checked="" type="checkbox"/> | <input type="checkbox"/> | J. Materials in good repair | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

*8) Random sampling of three (3) Attendance Verification Forms

Child's Name	Current	
	Yes	No
<u>not available yet</u>		

9) Observation:

The children are in circle. They are doing a counting activity together. Miss Cindy asks a child to get a book from the library area. The book is "Broccoli Brad". Before reading, Miss Cindy talks about good for you foods.

10) Technical Assistance ☐ Requested ☐ Given ☒ NA For: _____

☒ Compliant ☐ Non-Compliant For: _____

For Non-Compliance: The provider has 14 calendar days to comply. Failure to do so may result in loss of funds and/or termination of the VPK agreement (page 5 and 6, #42 of VPK Agreement).

Resource Specialist Date of Return

Site Representative Signature

ELC Resource Specialist Signature

* Denotes Compliance Issue



VPK - Monitoring Form

Site Name ALPI Garden Terrace Classroom: C Date: 8-28-15

Observation/Documentation Time: 10 min

Instructional Hours: ☒ 540 hours ☐ 300 hours

- | | N/A | Comp | Non-Comp |
|--|-------------------------------------|-------------------------------------|--------------------------|
| *1) License Expiration <u>1/11/16</u> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| *2) Accrediting Agency/Expiration | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| *3) Credentialed Director: <u>Sandra Monroe</u> | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| *4) Teacher: <u>LaTonya Pollock</u> | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| *5) Teacher Asst: <u>Tracie Harrell</u> | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| *6) Class Ratio: <u>2</u> teacher(s) to <u>16</u> children | | <input type="checkbox"/> | <input type="checkbox"/> |
| Class Ratio: 1:11 or 2:20 | | | |
| *7) Curriculum Compliance: A - J | | | |
| Curriculum: <u>SPLASH</u> | | | |

- | | Yes | No | | Yes | No |
|---|-------------------------------------|--------------------------|---|-------------------------------------|--------------------------|
| A. Lesson plans available and written to reflect daily schedule | <input checked="" type="checkbox"/> | <input type="checkbox"/> | F. Teachers responsive and involved with children | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| B. Lesson plan indicates FL Performance standards | <input checked="" type="checkbox"/> | <input type="checkbox"/> | G. Peer interaction occurs | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| C. Written schedule is posted and relates to what occurs | <input checked="" type="checkbox"/> | <input type="checkbox"/> | H. Character Education Program implemented | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| D. Teaching strategies are developmentally appropriate | <input checked="" type="checkbox"/> | <input type="checkbox"/> | I. Adequate materials accessible for children | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| E. Positive methods of discipline used effectively | <input checked="" type="checkbox"/> | <input type="checkbox"/> | J. Materials in good repair | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

***8) Random sampling of three (3) Attendance Verification Forms**

Child's Name	Current Yes	No
<u>not available yet</u>		

9) Observation:

The children are outside. After a few minutes the children go indoors and wash hands and get a drink. They sit on the carpet. Miss LaTonya talks to the children about the importance of personal care routines as well as the classroom rules.

10) Technical Assistance ☐ Requested ☐ Given ☒ N/A For: _____

☒ Compliant ☐ Non-Compliant For: _____

For Non-Compliance: The provider has 14 calendar days to comply. Failure to do so may result in loss of funds and/or termination of the VPK agreement (page 5 and 6, #42 of VPK Agreement).

Resource Specialist Date of Return

Site Representative Signature

* Denotes Compliance Issue

ELC Resource Specialist Signature

☐ SR ☒ VPK

Date: 8-28-15



Early Learning Coalition Visitation Form for Child Care Sites

Site Name: ALPI-Garden Terrace Director: Sandra Monroe

Time In/Out: 10:30-11:20 Resource Specialist: Lina Lloyd

Reason For Visit:

- ☐ Deliver/Collect Information/Forms
- ☐ Technical Assistance
- ☐ ASQ Online monitoring
- ☐ SR/VPK Monitoring
- ☐ SR/VPK Monitoring Follow-up
- ☐ SPCR Monitoring

- ☐ New Provider Checklist/Walk-through
- ☐ Child Assessment
- ☐ Child Observation
- ☐ Classroom Observation
- ☐ Program Evaluation
- ☐ CLASS

Requested Forms: ASQ-3 ASQ: SE Transfer/Withdrawal Forms Other

Delivered Forms: ASQ-3 ASQ: SE Transfer/Withdrawal Forms Other

Comments:

Conducted VPK monitoring

Technical Assistance:

Reminders:

[Signature] 11:20
Site Representative Signature

Lina Lloyd
ELC Resource Specialist Signature

CLUSTER MONTHLY DISABILITY

CLUSTER MONTHLY DISABILITY REPORT
Local Program Information
2015

CLUSTER CODE:

Agency Name: ALPI FROSTPROOF

Date Form Completed: 8/31/2015

TONI JONES

Person Completing This Form

☐ JAN ☐ FEB ☐ MAR ☐ APR ☐ MAY ☐ JUNE
☐ JULY ☒ AUG ☐ SEPT ☐ OCT ☐ NOV ☐ DEC

Information from all Delegates included ☐ YES ☐ NO ☒ N/A

SECTION A: DISABILITY CHILD INFORMATION									
		HS	EHS	DELEGATE			HS	EHS	DELEGATE
	Funded Enrollment		76						
	Actual Enrollment		76						
CHILDREN WITH DISABILITIES					TOTAL NUMBER WITH DISABILITIES				
1	Health Impairments		0	13	How many age 0?		7		
2	Emotional/Behavior Disorders		0	14	How many age 1?		3		
3	Speech/Language Impairments		0	15	How many age 2?		1		
4	Mental Retardation		0	16	How many age 3?		0		
5	Hearing Impairments/Deafness		0	17	How many age 4?		0		
6	Orthopedic Impairments		0	18	How many age 5?		0		
7	Visual Impairments/Blind		0	19	How many over income?		0		
8	Learning Disabilities		0	20	How many pre-diagnosed?		0		
9	Autism		0	21	How many dropped to date?		2		
10	Traumatic Brain Injury		0	22	How many IEP's/FSP current		4		
11	Other Impairments		0	23	How many evaluated and Found not eligible?		0		
12	Total With Disabilities		0	24	How many suspected?		25		

SECTION B: QUESTIONNAIRE	
1. Any specific request for training and technical assistance?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
If yes, please explain.	
2. Any specific problems with coordination of disability services?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
3. Other Comments: Brice and DeAnna Wells transferred to Our Children 8-24-2015.	

PIR (HEAD START)



2014-2015 HEAD START PROGRAM INFORMATION REPORT

04CH4739-000 Agricultural and Labor Program, Inc.

A. PROGRAM INFORMATION

GENERAL INFORMATION

Grant Number	04CH4739
Program Number	000
Program Type	Head Start
Program Name	Agricultural and Labor Program, Inc.
Program Address	300 Lynchburg Road Lake Alfred FL 33850-2576
Program Phone Number	(863) 956 3491 -
Program Fax Number	(863) 956 3357
DUNS Number	040210163
Program Email Address	eyoung@alpi.org
Head Start Director Name	Mrs. Elizabeth Young
Head Start Director Email	eyoung@alpi.org
Agency Web Site Address	http://www.alpi.org
Agency Type	Community Action Agency (CAA)
Agency Description	Grantee that directly operates program(s) and has no delegates
Agency Affiliation	A secular or non-religious agency

ENROLLMENT YEAR

Enrollment dates

A.1 Enrollment Year	<i>Date</i>
a. Start Date	08/18/2014
b. End Date	06/03/2015

FUNDED ENROLLMENT

Funded enrollment by funding source

A.2 Funded Head Start Enrollment	<i># of children/ pregnant women</i>
a. Head Start Funded Enrollment, as identified on NOA	691
b. Funded Enrollment from non-federal sources, i.e. state, local, private	0

Funded enrollment by program option - children

A.3 Center-based program - 5 days per week:	<i># of children</i>
a. Full-day enrollment	691
1. Of these, the number available as full-working-day enrollment	0
a. Of these, the number available for the full-calendar-year	0
b. Part-day enrollment	0
1. Of these, the number in double sessions	0
A.4 Center-based program - 4 days per week:	<i># of children</i>

a. Full-day enrollment	0
b. Part-day enrollment	0
1. Of these, the number in double sessions	0
A.5 Home-based program	0
A.6 Combination option program	0
A.7 Family child care option	0
a. Of these, the number available as full-working-day enrollment	0
1. Of these, the number available for the full-calendar-year	0
A.8 Locally designed option	0

Funded enrollment at child care partner

	# of children
A.10 Funded enrollment at child care partners in the center-based program option	20
A.11 Total funded enrollment at child care partners (A.10, center-based partner and A.7, family child care program option)	20

CLASSES

Classes

	# of classes
A.12 Total number of classes operated	39
a. Of these, the number of double session classes	0

CUMULATIVE ENROLLMENT

Children by age

A.13 Children by age:	# of children at enrollment
a. Under 1 year	0
b. 1 year old	0
c. 2 years old	0
d. 3 years old	284
e. 4 years old	479
f. 5 years and older	0

Total cumulative enrollment

	# of children / pregnant women
A.15 Total cumulative enrollment	763

Type of eligibility

A.16 Report each enrollee only once by primary type of eligibility:	# of children
a. Income below 100% of federal poverty line	613
b. Receipt of public assistance such as TANF, SSI	125
c. Status as a foster child - # children only	1
d. Status as homeless	9
e. Over income	15

	# of children
f. Enrollees exceeding the allowed over income enrollment (as noted below) with family incomes between 100% and 130% of the federal poverty line	0
A.17 If the program serves enrollees under A.16.f, specify how the program has demonstrated that all income-eligible children in their area are being served.	
Specify:	

Prior enrollment

A.18 Enrolled in Head Start or Early Head Start for:	# of children
a. The second year	227
b. Three or more years	21

Transition and Turnover

	# of children
A.19 Total number of preschool children who left the program any time after classes or home visits began and did not re-enroll	73
a. Of the preschool children who left the program during the program year, the number of preschool children who were enrolled less than 45 days	25
A.19.b. Of the number of preschool children enrolled in Head Start at the end of the current enrollment year, the number projected to be entering kindergarten in the following school year	479

Child care subsidy

	# of children at end of enrollment year
A.24. The number of enrolled children for whom the program received a child care subsidy	420

Ethnicity

A.25 Ethnicity:	# of children
a. Hispanic or Latino origin	104
b. Non-Hispanic or Non-Latino origin	659

Race

A.26 Race:	# of children
a. American Indian or Alaska Native	1
b. Asian	0
c. Black or African American	564
d. Native Hawaiian or other Pacific Islander	1
e. White	58
f. Biracial/Multi-racial	17
g. Other	104
1. Explain: Hispanic	
h. Unspecified	18
1. Explain: Parents declined to identify their race	

Primary language of family at home

A.27 Primary language of family at home:	# of children
a. English	555
b. Spanish	101

c. Native Central American, South American, and Mexican Languages	0
d. Caribbean Languages	103
e. Middle Eastern & South Asian Languages	3
f. East Asian Languages	1
g. Native North American/Alaska Native Languages	0
h. Pacific Island Languages	0
i. European & Slavic Languages	0
j. African Languages	0
k. Other	0
l. Unspecified	0

TRANSPORTATION

Transportation services

A.28 Does the program provide transportation to some or all of the enrolled children either directly or through a formal contractual agreement with a transportation provider?	Yes
--	-----

	<i># of children</i>
a. Number of children for whom transportation is provided	186

Buses

	<i># of buses owned</i>
A.29 Total number of buses owned by the program that were purchased with ACF grant funds and are currently used to support program operations, regardless of year purchased	4
a. Of these, the number of buses purchased since last year's PIR was reported	0

A.30 Are any of the buses used by the program leased by the program itself?	Yes
---	-----

	<i># of buses leased</i>
a. Number of buses leased	1

RECORD KEEPING

Management Information Systems

A.31 Does your program use a management information system to track enrollees, program services, characteristics of families, and information on program staff?		Yes
<i>Name/title</i>	<i>Locally designed</i>	<i>Web Based</i>
PROMIS (Program Resources and Outcomes Management Information System, Cleverex)	No	Yes

B. PROGRAM STAFF & QUALIFICATIONS

TOTAL STAFF

Staff by Type

	(1) # of Head Start or Early Head Start staff	(2) # of contracted staff
B.1 Total number of staff members, regardless of the funding source for their salary or number of hours worked	145	2
a. Of these, the number who are current or former Head Start or Early Head Start parents	4	0
b. Of these, the number who left since last year's PIR was reported	26	0
1. Of these, the number who were replaced	26	0

TOTAL VOLUNTEERS

Volunteers by Type

	# of volunteers
B.2 Number of persons providing any volunteer services to your program since last year's PIR was reported	685
a. Of these, the number who are current or former Head Start or Early Head Start parents	15

MANAGEMENT STAFF

Coordination of services

B.4 On average, the number of hours per week services managers spend coordinating services:	Average # of hours per week
a. Child Development & Education Manager	15
b. Health Services Manager	15
c. Family & Community Partnerships Manager	15
d. Disability Services Manager	15

CHILD DEVELOPMENT STAFF

Preschool Child Development Staff Qualifications - Classroom and Assistant Teachers

	(1) # of Classroom Teachers	(2) # of Assistant Teachers
B.5 Total number of preschool child development staff by position	39	43
Of the number of preschool child development staff by position, the number with the following degrees or credentials:		
a. An advanced degree in:		
1. Early childhood education	0	0
2. Any field and coursework equivalent to a major relating to early childhood education, with experience teaching preschool-age children	3	0

	(1) # of Classroom Teachers	(2) # of Assistant Teachers
Of the number of preschool child development staff by position, the number with the following degrees or credentials:		
b. A baccalaureate degree in:		
1. Early childhood education	2	0
2. Any field and coursework equivalent to a major relating to early childhood education with experience teaching preschool-age children	16	1
3. Any field and has been admitted into and is supported by the Teach for America program and passed a rigorous early childhood content exam	0	0
Of the preschool child development staff with a baccalaureate degree in B.5.b.1 through B.5.b.3 above, the number enrolled in:		
4. Advanced degree in early childhood education or in any field and coursework equivalent to a major relating to early childhood education	0	0

	(1) # of Classroom Teachers	(2) # of Assistant Teachers
Of the number of preschool child development staff by position, the number with the following degrees or credentials:		
c. An associate degree in:		
1. Early childhood education	18	2
2. A field related to early childhood education and coursework equivalent to a major relating to early childhood education with experience teaching preschool-age children	0	0
Of the preschool child development staff with an associate degree in B.5.c.1 and B.5.c.2 above, the number enrolled in:		
3. A baccalaureate degree program in early childhood education or in any field and coursework equivalent to a major relating to early childhood education	2	0

	(1) # of Classroom Teachers	(2) # of Assistant Teachers
Of the number of preschool child development staff by position, the number with the following credentials:		
d. A Child Development Associate (CDA) credential or state-awarded preschool, infant/toddler, family child care or home-based certification, credential, or licensure that meets or exceeds CDA requirements	0	40
1. Of these, a Child Development Associate (CDA) credential or state-awarded preschool, infant/toddler, family child care or home-based certification, credential, or licensure that meets or exceeds CDA requirements and that is appropriate to the option in which they are working	0	0
Of the preschool child development staff with the credentials in B.5.d above, the number enrolled in:		
2. A baccalaureate degree program in early childhood education or in any field and coursework equivalent to a major relating to early childhood education	0	1
3. An associate degree program in early childhood education or in a related field and coursework equivalent to a major relating to early childhood education	0	3

	(1) # of Classroom Teachers	(2) # of Assistant Teachers
Of the number of preschool child development staff by position:		
e. The number who do not have the qualifications listed in B.5.a through B.5.d	0	0
Of the preschool child development staff in B.5.e above, the number enrolled in:		
1. A baccalaureate degree program in early childhood education or in any field and coursework equivalent to a major relating to early childhood education	0	0
2. An associate degree program in early childhood education or in a related field and coursework equivalent to a major relating to early childhood education	0	0
3. Any type of Child Development Associate (CDA) credential or state-awarded preschool, infant/toddler, family child care or home-based certification, credential, or licensure that meets or exceeds CDA requirements and that is appropriate to the option in which they are working	0	0

	# of classes
B.6 Total number of center-based option classes serving preschool-aged children	0
B.7 Number of center-based option classes serving preschool-aged children in which at least one teacher (excluding assistant teachers) has one of the following: - An advanced or baccalaureate degree in early childhood education or in any field and coursework equivalent to a major relating to early childhood education with experience teaching pre-school age children, or - A baccalaureate degree and has been admitted into and is supported by the Teach for America program and passed a rigorous early childhood content exam - An associate degree in early childhood education or in a related field and coursework equivalent to a major relating to early childhood education with experience teaching preschool-age children	0

Child development staff qualifications - home-based and FCC

	(1) # of Home- Based Visitors	(2) # of Home- Based Visitor Supervisors	(3) # of Family Child Care Providers	(4) # of Family Child Care Specialists
B.9 Total number of child development staff by position	0	0	0	0

	(1) # of Home- Based Visitors	(2) # of Home- Based Visitor Supervisors	(3) # of Family Child Care Providers	(4) # of Family Child Care Specialists
Of the number of child development staff by position, the number with the following degrees or credentials:				
a. An advanced degree in/licensed as:				
1. 1. Social work/ Licensed clinical social worker (LCSW)/ Licensed master social worker (LCMW)	0	0	0	0
2. Marriage and family therapy/ Licensed marriage and family therapist (LMFT)	0	0	0	0
3. Psychology	0	0	0	0
4. Sociology	0	0	0	0
5. Human services (include related areas such as child and family services or social services)	0	0	0	0
6. Nursing plus Nurse Practitioner (NP) license	0	0	0	0
7. Early childhood education	0	0	0	0
8. Other	0	0	0	0
Home-Based Visitors:				
Home-Based Visitor Supervisors:				
Family Child Care Providers:				
Family Child Care Specialists:				

	(1) # of Home- Based Visitors	(2) # of Home- Based Visitor Supervisors	(3) # of Family Child Care Providers	(4) # of Family Child Care Specialists
Of the number of child development staff by position, the number with the following degrees and licenses:				
b. A baccalaureate degree in:				
1. Social work	0	0	0	0
2. Psychology	0	0	0	0
3. Sociology	0	0	0	0
4. Human services (include related areas such as child and family services or social services)	0	0	0	0
5. Nursing plus Registered Nurse (RN) license	0	0	0	0
6. Early childhood education	0	0	0	0
7. Other	0	0	0	0
Home-Based Visitors:				
Home-Based Visitor Supervisors:				
Family Child Care Providers:				
Family Child Care Specialists:				

	(1) # of Home- Based Visitors	(2) # of Home- Based Visitor Supervisors	(3) # of Family Child Care Providers	(4) # of Family Child Care Specialists
Of the number of child development staff by position, the number with the following degrees and licenses:				
c. An associate degree in:				
1. Social work	0	0	0	0
2. Psychology	0	0	0	0
3. Sociology	0	0	0	0
4. Human services (include related areas such as child and family services or social services)	0	0	0	0
5. Nursing plus Registered Nurse (RN) license	0	0	0	0
6. Early childhood education	0	0	0	0
7. Other	0	0	0	0
Home-Based Visitors:				
Home-Based Visitor Supervisors:				
Family Child Care Providers:				
Family Child Care Specialists:				

	(1) # of Home- Based Visitors	(2) # of Home- Based Visitor Supervisors	(3) # of Family Child Care Providers	(4) # of Family Child Care Specialists
Of the number of child development staff by position, the number with the following credentials:				
d. License, certification, or credential held:				
1. Nursing, non-RN, i.e. LPN, CNA, etc.	0	0	0	0
2. Family development credential (FDC)	0	0	0	0
3. Child development associate credential (CDA)	0	0	0	0
4. State-awarded certification, credential, or license appropriate to the option in which they are working, i.e. home-based option or family child care option	0	0	0	0
5. Other	0	0	0	0
Home-Based Visitors:				
Home-Based Visitor Supervisors:				
Family Child Care Providers:				
Family Child Care Specialists:				

	(1) # of Home- Based Visitors	(2) # of Home- Based Visitor Supervisors	(3) # of Family Child Care Providers	(4) # of Family Child Care Specialists
Of the number of child development staff by position:				
e. The number who do not have the qualifications listed in B.9.a through B.9.d	0	0	0	0
Of the child development staff in B.9.e above, the number enrolled in:				
1. An advanced degree or license	0	0	0	0
2. A baccalaureate degree	0	0	0	0
3. An associate degree	0	0	0	0
4. Studies leading to a non-degree license, certificate, or credential	0	0	0	0

NON-SUPERVISORY CHILD DEVELOPMENT STAFF**Child development staff - ethnicity**

B.12 Ethnicity:	# of non-supervisory child development staff
a. Hispanic or Latino origin	16
b. Non-Hispanic or Non-Latino origin	66

Child development staff - race

B.13 Race:	# of non-supervisory child development staff
a. American Indian or Alaska Native	0
b. Asian	0
c. Black or African American	55
d. Native Hawaiian or other Pacific Islander	0
e. White	11
f. Biracial/Multi-racial	0
g. Other	16
1. Explain: Hispanic	
h. Unspecified	0

Child development staff - language

	# of non-supervisory child development staff
B.14 The number who are proficient in a language(s) other than English	16
a. Of these, the number who are proficient in more than one language other than English	0
B.15 Language groups in which staff are proficient	# of non-supervisory child development staff
a. Spanish	16
b. Native Central American, South American, and Mexican Languages	0
c. Caribbean Languages	2
d. Middle Eastern & South Asian Languages	0
e. East Asian Languages	0
f. Native North American/Alaska Native Languages	0
g. Pacific Island Languages	0
h. European & Slavic Languages	1
i. African Languages	0
j. Other	0
k. Unspecified	0

Child development staff - classroom teacher turnover

	# of classroom teachers
B.16 The number of classroom teachers who left your program during the year.	5
B.17 Of these, the number who left for the following reasons:	# of classroom teachers
a. Higher compensation/benefits package in the same field	2
b. Change in job field	1
c. Other	2
1. Comments: Resignations	
B.18 Number of classroom teacher vacancies in your program that remained unfilled for a period of 3 months or longer	0
B.19 Number of classroom teachers hired during the year due to turnover	0

Child development staff - home-based visitor turnover

	# of home-based visitors
B.20 The number of home-based visitors who left the program during the year	0
B.21 Of these, the number who left for the following reasons:	
a. Higher compensation/benefits package in the same field	0
b. Change in job field	0
c. Other	0
1. Comments: null	
B.22 Number of home-based visitor vacancies in the program that remained unfilled for a period of 3 months or longer	0
B.23 Number of home-based visitors hired during the year due to turnover	0

FAMILY & COMMUNITY PARTNERSHIPS STAFF

Family & community partnerships staff - qualifications

	(1) # of family workers	(2) # of FCP supervisors
B.24 Total number of family & community partnerships staff	14	4
a. Of the FCP supervisors, the number who work directly with families, i.e. staff with a family caseload		0
B.25 Of the family & community partnerships staff, the number with the following education	(1) # of family workers	(2) # of FCP supervisors
a. A related advanced degree	1	0
b. A related baccalaureate degree	2	1
c. A related associate degree	5	1
d. GED or high school diploma	6	2
B.26 Of the family & community partnerships staff who do not have a degree, the number in training leading to a related degree or credential	2	2
B.27 Comments on staff shared by Head Start and Early Head Start programs:		

	# of ECD managers/ coordinators
B.28 Total number of education & child development managers/coordinators	2
	# of ECD managers/ coordinators
Of the education & child development managers/coordinators, the number with the following degrees or credentials:	
a. An advanced degree in early childhood education, or an advanced degree in any field and coursework equivalent to a major relating to early childhood education with experience teaching preschool-age children	1
b. A baccalaureate degree in early childhood education, or a baccalaureate degree in any field and coursework equivalent to a major relating to early childhood education with experience teaching preschool-age children	1
	# of ECD managers/ coordinators
Of the education & child development managers/coordinators, the number with the following degrees or credentials:	
c. An associate degree in early childhood education, or an associate degree in any field and coursework equivalent to a major relating to early childhood education with experience teaching preschool-age children	0
Of the education & child development managers/coordinators preschool child development staff in B.28.c above, the number enrolled in:	
1. A baccalaureate degree in early childhood education, or a baccalaureate degree in any field and coursework equivalent to a major relating to early childhood education	0
	# of ECD managers/ coordinators
Of the education & child development managers/coordinators, the number with the following degrees or credentials:	
d. A Child Development Associate (CDA) credential or state-awarded preschool, infant/toddler, family child care or home-based certification, credential, or licensure that meets or exceeds CDA requirements	0
Of the education & child development managers/coordinators preschool child development staff in B.28.d above, the number enrolled in:	
1. A baccalaureate degree in early childhood education, or a baccalaureate degree in any field and coursework equivalent to a major relating to early childhood education	0
	# of ECD managers/ coordinators
Of the education & child development managers/coordinators, the number with the following degrees or credentials:	
e. None of the qualifications listed in B.28.a through B.28.d	0
Of the education & child development managers/coordinators preschool child development staff in B.28.e above, the number enrolled in:	
1. A baccalaureate degree in early childhood education, or a baccalaureate degree in any field and coursework equivalent to a major relating to early childhood education	0
B.29 Comments on education & child development managers/coordinators shared by Head Start and Early Head Start programs:	

C. CHILD & FAMILY SERVICES

HEALTH SERVICES

Health insurance - children

	(1) # of children at enrollment	(2) # of children at end of enrollment year
C.1 Number of all children with health insurance	738	759
a. Number enrolled in Medicaid and/or CHIP	691	712
b. Number enrolled in state-only funded insurance (for example, medically indigent insurance)	15	15
c. Number with private health insurance (for example, parent's insurance)	22	22
d. Number with health insurance other than those listed above, for example, Military Health (Tri-Care or CHAMPUS)	10	10
1. Specify	Children are enrolled in a provider KidCare	
C.2. Number of children with no health insurance	25	4

Medical

Medical home - children

	(1) # of children at enrollment	(2) # of children at end of enrollment year
C.5 Number of children with an ongoing source of continuous, accessible health care	763	763
C.6 Number of children receiving medical services through the Indian Health Service	0	0
C.7 Number of children receiving medical services through a migrant community health center	0	0

Medical services - children

	(1) # of children at enrollment	(2) # of children at end of enrollment year
C.8 Number of all children who are up-to-date on a schedule of age-appropriate preventive and primary health care, according to the relevant state's EPSDT schedule for well child care	763	763
		# of children at end of enrollment year
a. Of these, the number diagnosed by a health care professional with a chronic condition needing medical treatment since last year's PIR was reported		115
1. Of these, the number who have received or are receiving medical treatment		115
b. Specify the primary reason that children who needed medical treatment, for any chronic condition diagnosed by a health care professional since last year's PIR was reported, did not receive it:		

C.9 Number of all children who received medical treatment for the following chronic conditions since last year's PIR was reported, regardless of when the condition was first diagnosed by a health care professional:	# of children
a. Anemia	82
b. Asthma	142
c. Hearing Difficulties	0
d. Vision Problems	3
e. High Lead Levels	0
f. Diabetes	0

Body Mass Index (BMI) - children (HS and Migrant programs)

C.10 Number of all children who are in the following weight categories according to the 2000 CDC BMI-for-age growth charts	# of children at enrollment
a. Underweight (BMI less than 5th percentile for child's age and sex)	13
b. Healthy weight (at or above 5th percentile and below 85th percentile for child's age and sex)	669
c. Overweight (BMI at or above 85th percentile and below 95th percentile for child's age and sex)	32
d. Obese (BMI at or above 95th percentile for child's age and sex)	49

Immunization services - children

	(1) # of children at enrollment	(2) # of children at end of enrollment year
C.11 Number of children who have been determined by a health care professional to be up-to-date on all immunizations appropriate for their age	759	759
C.12 Number of children who have been determined by a health care professional to have received all immunizations possible at this time, but who have not received all immunizations appropriate for their age	4	4
C.13 Number of children who meet their state's guidelines for an exemption from immunizations	0	0

Dental

Dental home - children

	(1) # of children at enrollment	(2) # of children at end of enrollment year
C.17 Number of children with continuous, accessible dental care provided by a dentist	511	748

Preschool dental services (HS and Migrant programs))

	# of children
C.18 Number of children who received preventive care since last year's PIR was reported	165
C.19 Number of all children, including those enrolled in Medicaid or CHIP, who have completed a professional dental examination since last year's PIR was reported	748
a. Of these, the number of children diagnosed as needing treatment since last year's PIR was reported.	185
1. Of these, the number of children who have received or are receiving treatment	176
b. Specify the primary reason that children who needed dental treatment did not receive it:	Children left the program before their appointment date

MENTAL HEALTH SERVICES

Mental health professional

	# of hours
C.22 Average total hours per operating month a mental health professional(s) spends on-site	18

Mental health services

	# of children at end of enrollment year
C.23 Indicate the number of enrolled children who were served by the mental health (MH) professional(s) since last year's PIR was reported.	
a. Number of children for whom the MH professional consulted with program staff about the child's behavior / mental health	15
1. Of these, the number for whom the MH professional provided three or more consultations with program staff since last year's PIR was reported	0
b. Number of children for whom the MH professional consulted with the parent(s) / guardian(s) about their child's behavior/mental health	34
1. Of these, the number for whom the MH professional provided three or more consultations with the parent(s) / guardian(s) since last year's PIR was reported	0
c. Number of children for whom the MH professional provided an individual mental health assessment	14
d. Number of children for whom the MH professional facilitated a referral for mental health services	3

Mental health referrals

	# of children at end of enrollment year
C.24 Number of children who were referred by the program for mental health services outside of Head Start since last year's PIR was reported	3
a. Of these, the number who received mental health services since last year's PIR was reported	3

DISABILITIES SERVICES

Preschool disabilities services (HS and Migrant programs)

	# of children
C.25 Number of children enrolled in the program who have an Individualized Education Program (IEP) indicating they have been determined eligible by the LEA to receive special education and related services	90
a. Of these, the number who were determined eligible to receive special education and related services:	# of children
1. Prior to enrollment into the program for this enrollment year	47
2. During this enrollment year	43
b. Of these, the number who have not received special education and related services	0

Preschool primary disabilities (HS and Migrant programs)

	(1) # of children determined to have this disability	(2) # of children receiving special services
C.27 Diagnosed primary disability		
a. Health impairment(i.e. meeting IDEA definition of 'other health impairments')	0	0
b. Emotional disturbance	0	0
c. Speech or language impairments	80	80
d. Intellectual disabilities	0	0
e. Hearing impairment, including deafness	0	0
f. Orthopedic impairment	0	0
g. Visual impairment, including blindness	0	0
h. Specific learning disability	0	0
i. Autism	0	0
j. Traumatic brain injury	0	0
k. Non-categorical/developmental delay	10	10
l. Multiple disabilities (excluding deaf-blind)	0	0
m. Deaf-blind	0	0

EDUCATION AND DEVELOPMENT TOOLS/APPROACHES

Screening

	# of children
C.28 Number of all newly enrolled children since last year's PIR was reported	526
C.29 Number of all newly enrolled children who completed required screenings within 45 days for developmental, sensory, and behavioral concerns since last year's PIR was reported	526
a. Of these, the number identified as needing follow-up assessment or formal evaluation to determine if the child has a disability	63
C.30 The instrument(s) used by the program for developmental screening:	
Acuscreen	
Other (Please Specify) - DECA Devereue Early Childhood Assessment	
Other (Please Specify) - PLS 4 Preschool Language Scale 4th Edition	

Assessment

C.31 Approach or tool(s) used by the program to support ongoing child assessment:

<i>Name/title</i>	<i>Locally designed</i>
Galileo Assessment Scales Online	No

Curriculum

C.32 What curriculum does your program use:

a. For center-based services:

<i>Name/title</i>	<i>Locally designed</i>
Creative Curriculum (PreSchool)	No

b. For family child care services:

c. For home-based services:

STAFF-CHILD INTERACTION OBSERVATION TOOLS

		<i># of families at enrollment</i>
C.33 Does the program routinely use staff-child interaction observation tools to assess quality?		Yes
C.34 If yes, interaction observation tool(s) used by the program:		
	<i>(1) Name/title</i>	<i>(2) Locally designed</i>
a. Center-based settings	CLASS	No
b. Home-based settings		
c. Family child care settings		

FAMILY AND COMMUNITY PARTNERSHIPS

Number of families

	<i># of families at enrollment</i>
C.35 Total number of families:	725
a. Of these, the number of two-parent families	181
b. Of these, the number of single-parent families	544

Employment

C.36 Of the number of two-parent families, the number of families in which:	# of families at enrollment
a. Both parents/guardians are employed	29
b. One parent/guardian is employed	108
c. Both parents/guardians are not working (i.e. unemployed, retired, or disabled)	44

C.37 Of the number of single-parent families, the number of families in which:	# of families at enrollment
a. The parent/guardian is employed	217
b. The parent/guardian is not working (i.e. unemployed, retired, or disabled)	327

	# of families at enrollment
C.38 The number of all families in which at least one parent/guardian is a member of the United States military on active duty	1

Federal or other assistance

	# of families
C.39 Total number of families receiving any cash benefits or other services under the Federal Temporary Assistance for Needy Families (TANF) Program	64
C.40 Total number of families receiving Supplemental Security Income (SSI)	102
C.41 Total number of families receiving services under the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)	450
C.42 Total number of families receiving services under the Supplemental Nutrition Assistance Program (SNAP), formerly referred to as Food Stamps	494

Job training/school

C.43 Of the number of two-parent families, the number of families in which:	# of families at enrollment
a. Both parents/guardians are in job training or school	6
b. One parent/guardian is in job training or school	65
c. Neither parent/guardian is in job training or school	110

C.44 Of the number of single-parent families, the number of families in which:	# of families at enrollment
a. The parent/guardian is in job training or school	89
b. The parent/guardian is not in job training or school	455

Parent/guardian education

C.45 Of the total number of families, the highest level of education obtained by the child's parent(s) / guardian(s)	# of families at enrollment
a. An advanced degree or baccalaureate degree	181
b. An associate degree, vocational school, or some college	404
c. A high school graduate or GED	112
d. Less than high school graduate	28

Family services

C.46 Report the number of families who received the following services since last year's PIR was reported	# of families
a. Emergency/crisis intervention such as meeting immediate needs for food, clothing, or shelter	150
b. Housing assistance such as subsidies, utilities, repairs, etc.	61
c. Mental health services	59
d. English as a Second Language (ESL) training	164
e. Adult education such as GED programs and college selection	200
f. Job training	187
g. Substance abuse prevention	11
h. Substance abuse treatment	11
i. Child abuse and neglect services	725
j. Domestic violence services	8
k. Child support assistance	8
l. Health education	725
m. Assistance to families of incarcerated individuals	30
n. Parenting education	725
o. Relationship/marriage education	2
C.47 Of these, the number that received at least one of the services listed above	725

Father involvement

C.48 Does the program have organized and regularly scheduled activities designed to involve fathers / father figures?	Yes
	# of children at end of enrollment
a. Number of enrolled children whose fathers / father figures participated in these activities	143

Homelessness services

	# of families
C.49 Total number of families experiencing homelessness that were served during the enrollment year	9
	# of children
C.50 Total number of children experiencing homelessness that were served during the enrollment year	9
	# of families
C.51 Total number of families experiencing homelessness that acquired housing during the enrollment year	9

Foster care and child welfare

	# of children
C.52 Total number of enrolled children who were in foster care at any point during the program year	1
C.53 Total number of enrolled children who were referred to Head Start/Early Head Start services by a child welfare agency	1

Collaboration Agreements and Community Engagement

Child care partners

	# of formal agreements
C.54 Total number of formal agreements with Child Care Partners during program year	1
a. Of the Child Care Partners, the number of formal contractual agreements made void or broken during the program year	0

Local education agency (LEA)

	# of LEAs
C.55 Number of LEAs in the service area	1
C.56 Number of formal agreements the program has with LEAs:	# of formal agreements
a. To coordinate services for children with disabilities	1
b. To coordinate transition services	1

Public school pre-kindergarten programs

C.57 Does the program have formal collaboration and resource sharing agreements with public school pre-kindergarten programs?	Yes
	# of formal agreements
a. If yes, the number of formal agreements in which the program is currently participating	1

Part C agencies

	# of Part C Agencies
C.58 Number of Part C agencies in the program's service area	1
	# of formal agreements
a. Number of formal agreements the program has with Part C agencies to coordinate services for children with disabilities	1

Child welfare agencies

C.59 Does the program have formal collaboration agreements with child welfare agencies?	No
	# of formal agreements
a. If yes, the number of formal agreements in which the program is currently participating	0

REPORTING INFORMATION

PIR Report Status	Started
Last Update Date	08/28/2015

PIR (EARLY HEAD START)



2014-2015 EARLY HEAD START PROGRAM INFORMATION REPORT

04CH4739-200 Agricultural and Labor Program, Inc.

A. PROGRAM INFORMATION

GENERAL INFORMATION

Grant Number	04CH4739
Program Number	200
Program Type	Early Head Start
Program Name	Agricultural and Labor Program, Inc.
Program Address	300 Lynchburg Road Lake Alfred FL 33850-2576
Program Phone Number	(863) 956 3491 -
Program Fax Number	(863) 956 3357
DUNS Number	040210163
Program Email Address	admin@alpi.org
Head Start Director Name	Mrs. Elizabeth Young
Head Start Director Email	eyoung@alpi.org
Agency Web Site Address	http://www.alpi.org
Agency Type	Community Action Agency (CAA)
Agency Description	Grantee that directly operates program(s) and has no delegates
Agency Affiliation	A secular or non-religious agency

ENROLLMENT YEAR

Enrollment dates

A.1 Enrollment Year	<i>Date</i>
a. Start Date	08/01/2014
b. End Date	06/30/2015

FUNDED ENROLLMENT

Funded enrollment by funding source

A.2 Funded Early Head Start Enrollment	<i># of children/ pregnant women</i>
a. Early Head Start Funded Enrollment, as identified on NOA	140
b. Funded Enrollment from non-federal sources, i.e. state, local, private	0
c. Funded Enrollment from the MIECHV Grant Program, for Early Head Start services	0

Funded enrollment by program option - children

A.3 Center-based program - 5 days per week:	<i># of children</i>
a. Full-day enrollment	124
1. Of these, the number available as full-working-day enrollment	0
a. Of these, the number available for the full-calendar-year	0
b. Part-day enrollment	0
1. Of these, the number in double sessions	0

A.4 Center-based program - 4 days per week:	<i># of children</i>
a. Full-day enrollment	0
b. Part-day enrollment	0
1. Of these, the number in double sessions	0
A.5 Home-based program	0
A.6 Combination option program	0
A.7 Family child care option	0
a. Of these, the number available as full-working-day enrollment	0
1. Of these, the number available for the full-calendar-year	0
A.8 Locally designed option	0

Funded enrollment of pregnant women (EHS programs)

	<i># of pregnant women</i>
A.9 Total number of pregnant women positions in funded enrollment	16

Funded enrollment at child care partner

	<i># of children</i>
A.10 Funded enrollment at child care partners in the center-based program option	32
A.11 Total funded enrollment at child care partners (A.10, center-based partner and A.7, family child care program option)	32

CLASSES

Classes

	<i># of classes</i>
A.12 Total number of classes operated	18
a. Of these, the number of double session classes	0

CUMULATIVE ENROLLMENT

Children by age

A.13 Children by age:	<i># of children at enrollment</i>
a. Under 1 year	39
b. 1 year old	40
c. 2 years old	102
d. 3 years old	0

Pregnant women (EHS programs)

	<i># of pregnant women</i>
A.14 Total enrollment of pregnant women	20

Total cumulative enrollment

	<i># of children / pregnant women</i>
A.15 Total cumulative enrollment	201

Type of eligibility

A.16 Report each enrollee only once by primary type of eligibility:	# of children/ pregnant women
a. Income below 100% of federal poverty line	170
b. Receipt of public assistance such as TANF, SSI	26
c. Status as a foster child - # children only	0
d. Status as homeless	0
e. Over income	5
	# of children
f. Enrollees exceeding the allowed over income enrollment (as noted below) with family incomes between 100% and 130% of the federal poverty line	0
A.17 If the program serves enrollees under A.16.f, specify how the program has demonstrated that all income-eligible children in their area are being served.	
Specify:	

Prior enrollment

A.18 Enrolled in Early Head Start for:	# of children
a. The second year	46
b. Three or more years	30

Transition and Turnover

	# of children
A.20 Total number of infants and toddlers who left the program any time after classes or home visits began and did not re-enroll	53
a. Of the infants and toddlers who left the program above, the number of infants and toddlers who were enrolled less than 45 days	17
b. Of the infants and toddlers who left the program during the program year, the number who aged out of Early Head Start	0
1. Of the infants and toddlers who aged out of Early Head Start, the number who entered a Head Start program	0
2. Of the infants and toddlers who aged out of Early Head Start, the number who entered another early childhood program	0
3. Of the infants and toddlers who aged out of Early Head Start, the number who did NOT enter another early childhood program	0
	# of pregnant women/children
A.21 Total number of pregnant women who left the program after receiving Early Head Start services but before the birth of their infant, and did not re-enroll	4
A.22 Number of pregnant women receiving Early Head Start services at the time their infant was born	16
a. Of the pregnant women enrolled when their infant was born, the number whose infant was subsequently enrolled in Early Head Start	10
b. Of the pregnant women enrolled when their infant was born, the number whose infant was NOT subsequently enrolled in Early Head Start	6

Child care subsidy

	# of children at end of enrollment year
A.24. The number of enrolled children for whom the program received a child care subsidy	3

Ethnicity

A.25 Ethnicity:	# of children pregnant women
a. Hispanic or Latino origin	23
b. Non-Hispanic or Non-Latino origin	178

Race

A.26 Race:	# of children pregnant women
a. American Indian or Alaska Native	0
b. Asian	0
c. Black or African American	136
d. Native Hawaiian or other Pacific Islander	0
e. White	33
f. Biracial/Multi-racial	7
g. Other	24
1. Explain: Hispanic/Creole	
h. Unspecified	1
1. Explain: Parent declined to identify	

Primary language of family at home

A.27 Primary language of family at home:	# of children pregnant women
a. English	175
b. Spanish	21
c. Native Central American, South American, and Mexican Languages	0
d. Caribbean Languages	5
e. Middle Eastern & South Asian Languages	0
f. East Asian Languages	0
g. Native North American/Alaska Native Languages	0
h. Pacific Island Languages	0
i. European & Slavic Languages	0
j. African Languages	0
k. Other	0
l. Unspecified	0

TRANSPORTATION

Transportation services

A.28 Does the program provide transportation to some or all of the enrolled children either directly or through a formal contractual agreement with a transportation provider?	No
--	----

Buses

A.29 Total number of buses owned by the program that were purchased with ACF grant funds and are currently used to support program operations, regardless of year purchased	# of buses owned
a. Of these, the number of buses purchased since last year's PIR was reported	0

A.30 Are any of the buses used by the program leased by the program itself?	No
---	----

RECORD KEEPING

Management Information Systems

A.31 Does your program use a management information system to track enrollees, program services, characteristics of families, and information on program staff?		Yes
<i>Name/title</i>	<i>Locally designed</i>	<i>Web Based</i>
PROMIS (Program Resources and Outcomes Management Information System, Cleverex)	No	Yes

B. PROGRAM STAFF & QUALIFICATIONS

TOTAL STAFF

Staff by Type

	(1) # of Head Start or Early Head Start staff	(2) # of contracted staff
B.1 Total number of staff members, regardless of the funding source for their salary or number of hours worked	45	19
a. Of these, the number who are current or former Head Start or Early Head Start parents	3	2
b. Of these, the number who left since last year's PIR was reported	3	3
1. Of these, the number who were replaced	3	3

TOTAL VOLUNTEERS

Volunteers by Type

	# of volunteers
B.2 Number of persons providing any volunteer services to your program since last year's PIR was reported	236
a. Of these, the number who are current or former Head Start or Early Head Start parents	175

MANAGEMENT STAFF

Coordination of services

B.4 On average, the number of hours per week services managers spend coordinating services:	Average # of hours per week
a. Child Development & Education Manager	10
b. Health Services Manager	10
c. Family & Community Partnerships Manager	10
d. Disability Services Manager	10

CHILD DEVELOPMENT STAFF

Infant and Toddler Child Development Staff Qualifications - Classroom and Assistant Teachers

	(1) # of Classroom Teachers	(2) # of Assistant Teachers
B.8 Total number of infant and toddler child development staff by position	35	0

	(1) # of Classroom Teachers	(2) # of Assistant Teachers
Of the number of infant and toddler child development staff by position, the number with the following degrees or credentials:		
a. An advanced degree in:		
1. Early childhood education with a focus on infant and toddler development	0	0
2. Any field and coursework equivalent to a major relating to early childhood education, with experience teaching infants and/or toddlers	0	0

	(1) # of Classroom Teachers	(2) # of Assistant Teachers
Of the number of infant and toddler child development staff by position, the number with the following degrees or credentials:		
b. A baccalaureate degree in:		
1. Early childhood education with a focus on infant and toddler development	2	0
2. Any field and coursework equivalent to a major relating to early childhood education with experience teaching infants and/or toddlers	3	0
Of the infant and toddler child development staff with a baccalaureate degree in B.8.b.1 through B.8.b.2 above, the number enrolled in:		
3. Advanced degree in early childhood education or in any field and coursework equivalent to a major relating to early childhood education with a focus on infant and toddler development	0	0

	(1) # of Classroom Teachers	(2) # of Assistant Teachers
Of the number of infant and toddler child development staff by position, the number with the following degrees or credentials:		
c. An associate degree in:		
1. Early childhood education with a focus on infant and toddler development	12	0
2. A field related to early childhood education and coursework equivalent to a major relating to early childhood education with experience teaching infants and toddlers	0	0
Of the infant and toddler child development staff with an associate degree in B.8.c.1 and B.8.c.2 above, the number enrolled in:		
3. A baccalaureate degree program in early childhood education or in any field and coursework equivalent to a major relating to early childhood education with a focus on infant and toddler development	2	0

	(1) # of Classroom Teachers	(2) # of Assistant Teachers
Of the number of infant and toddler child development staff by position, the number with the following credentials:		
d. A Child Development Associate (CDA) credential or state-awarded preschool, infant/toddler, family child care or home-based certification, credential, or licensure that meets or exceeds CDA requirements	18	0
1. Of these, a Child Development Associate (CDA) credential or state-awarded preschool, infant/toddler, family child care or home-based certification, credential, or licensure that meets or exceeds CDA requirements and that is appropriate to the option in which they are working	0	0
Of the infant and toddler child development staff with the credentials in B.6.d above, the number enrolled in:		
2. A baccalaureate degree program in early childhood education or in any field and coursework equivalent to a major relating to early childhood education with a focus on infant and toddler development	0	0
3. An associate degree program in early childhood education or in a related field and coursework equivalent to a major relating to early childhood education with a focus on infant and toddler development	6	0

	(1) # of Classroom Teachers	(2) # of Assistant Teachers
Of the number of infant and toddler child development staff by position:		
e. The number who do not have the qualifications listed in B.8.a through B.8.d	0	0
Of the infant and toddler child development staff in B.8.e above, the number enrolled in:		
1. A baccalaureate degree program in early childhood education or in any field and coursework equivalent to a major relating to early childhood education with a focus on infant and toddler development	0	0
2. An associate degree program in early childhood education or in a related field and coursework equivalent to a major relating to early childhood education with a focus on infant and toddler development	0	0
3. Any type of Child Development Associate (CDA) credential or state-awarded preschool, infant/toddler, family child care or home-based certification, credential, or licensure that meets or exceeds CDA requirements and that is appropriate to the option in which they are working	0	0

Child development staff qualifications - home-based and FCC

	(1) # of Home- Based Visitors	(2) # of Home- Based Visitor Supervisors	(3) # of Family Child Care Providers	(4) # of Family Child Care Specialists
B.9 Total number of child development staff by position	0	0	0	0

	(1) # of Home- Based Visitors	(2) # of Home- Based Visitor Supervisors	(3) # of Family Child Care Providers	(4) # of Family Child Care Specialists
Of the number of child development staff by position, the number with the following degrees or credentials:				
a. An advanced degree in/licensed as:				
1. 1. Social work/ Licensed clinical social worker (LCSW)/ Licensed master social worker (LCMW)	0	0	0	0
2. Marriage and family therapy/ Licensed marriage and family therapist (LMFT)	0	0	0	0
3. Psychology	0	0	0	0
4. Sociology	0	0	0	0
5. Human services (include related areas such as child and family services or social services)	0	0	0	0
6. Nursing plus Nurse Practitioner (NP) license	0	0	0	0
7. Early childhood education	0	0	0	0
8. Other	0	0	0	0
Home-Based Visitors:				
Home-Based Visitor Supervisors:				
Family Child Care Providers:				
Family Child Care Specialists:				

	(1) # of Home- Based Visitors	(2) # of Home- Based Visitor Supervisors	(3) # of Family Child Care Providers	(4) # of Family Child Care Specialists
Of the number of child development staff by position, the number with the following degrees and licenses:				
b. A baccalaureate degree in:				
1. Social work	0	0	0	0
2. Psychology	0	0	0	0
3. Sociology	0	0	0	0
4. Human services (include related areas such as child and family services or social services)	0	0	0	0
5. Nursing plus Registered Nurse (RN) license	0	0	0	0
6. Early childhood education	0	0	0	0
7. Other	0	0	0	0
Home-Based Visitors:				
Home-Based Visitor Supervisors:				
Family Child Care Providers:				
Family Child Care Specialists:				

	(1) # of Home- Based Visitors	(2) # of Home- Based Visitor Supervisors	(3) # of Family Child Care Providers	(4) # of Family Child Care Specialists
Of the number of child development staff by position, the number with the following degrees and licenses:				
c. An associate degree in:				
1. Social work	0	0	0	0
2. Psychology	0	0	0	0
3. Sociology	0	0	0	0
4. Human services (include related areas such as child and family services or social services)	0	0	0	0
5. Nursing plus Registered Nurse (RN) license	0	0	0	0
6. Early childhood education	0	0	0	0
7. Other	0	0	0	0
Home-Based Visitors:				
Home-Based Visitor Supervisors:				
Family Child Care Providers:				
Family Child Care Specialists:				

	(1) # of Home- Based Visitors	(2) # of Home- Based Visitor Supervisors	(3) # of Family Child Care Providers	(4) # of Family Child Care Specialists
Of the number of child development staff by position, the number with the following credentials:				
d. License, certification, or credential held:				
1. Nursing, non-RN, i.e. LPN, CNA, etc.	0	0	0	0
2. Family development credential (FDC)	0	0	0	0
3. Child development associate credential (CDA)	0	0	0	0
4. State-awarded certification, credential, or license appropriate to the option in which they are working, i.e. home-based option or family child care option	0	0	0	0
5. Other	0	0	0	0
Home-Based Visitors:				
Home-Based Visitor Supervisors:				
Family Child Care Providers:				
Family Child Care Specialists:				

	(1) # of Home- Based Visitors	(2) # of Home- Based Visitor Supervisors	(3) # of Family Child Care Providers	(4) # of Family Child Care Specialists
Of the number of child development staff by position:				
e. The number who do not have the qualifications listed in B.9.a through B.9.d	0	0	0	0
Of the child development staff in B.9.e above, the number enrolled in:				
1. An advanced degree or license	0	0	0	0
2. A baccalaureate degree	0	0	0	0
3. An associate degree	0	0	0	0
4. Studies leading to a non-degree license, certificate, or credential	0	0	0	0

NON-SUPERVISORY CHILD DEVELOPMENT STAFF

Child development staff - ethnicity

B.12 Ethnicity:	# of non-supervisory child development staff
a. Hispanic or Latino origin	9
b. Non-Hispanic or Non-Latino origin	26

Child development staff - race

B.13 Race:	# of non-supervisory child development staff
a. American Indian or Alaska Native	0
b. Asian	0
c. Black or African American	25
d. Native Hawaiian or other Pacific Islander	0
e. White	1
f. Biracial/Multi-racial	0
g. Other	9
1. Explain: Hispanic	
h. Unspecified	0

Child development staff - language

	# of non-supervisory child development staff
B.14 The number who are proficient in a language(s) other than English	8
a. Of these, the number who are proficient in more than one language other than English	0
B.15 Language groups in which staff are proficient	# of non-supervisory child development staff
a. Spanish	8
b. Native Central American, South American, and Mexican Languages	0
c. Caribbean Languages	0
d. Middle Eastern & South Asian Languages	0
e. East Asian Languages	0
f. Native North American/Alaska Native Languages	0
g. Pacific Island Languages	0
h. European & Slavic Languages	0
i. African Languages	0
j. Other	0
k. Unspecified	0

Child development staff - classroom teacher turnover

	# of classroom teachers
B.16 The number of classroom teachers who left your program during the year.	2
B.17 Of these, the number who left for the following reasons:	# of classroom teachers
a. Higher compensation/benefits package in the same field	0
b. Change in job field	0
c. Other	2
1. Comments: Resignation	
B.18 Number of classroom teacher vacancies in your program that remained unfilled for a period of 3 months or longer	0
B.19 Number of classroom teachers hired during the year due to turnover	0

Child development staff - home-based visitor turnover

	# of home-based visitors
B.20 The number of home-based visitors who left the program during the year	0
B.21 Of these, the number who left for the following reasons:	
a. Higher compensation/benefits package in the same field	0
b. Change in job field	0
c. Other	0
1. Comments: null	
B.22 Number of home-based visitor vacancies in the program that remained unfilled for a period of 3 months or longer	0
B.23 Number of home-based visitors hired during the year due to turnover	0

FAMILY & COMMUNITY PARTNERSHIPS STAFF

Family & community partnerships staff - qualifications

	(1) # of family workers	(2) # of FCP supervisors
B.24 Total number of family & community partnerships staff	3	2
a. Of the FCP supervisors, the number who work directly with families, i.e. staff with a family caseload		0
B.25 Of the family & community partnerships staff, the number with the following education	(1) # of family workers	(2) # of FCP supervisors
a. A related advanced degree	0	0
b. A related baccalaureate degree	0	0
c. A related associate degree	1	1
d. GED or high school diploma	2	1
B.26 Of the family & community partnerships staff who do not have a degree, the number in training leading to a related degree or credential	0	0
B.27 Comments on staff shared by Head Start and Early Head Start programs:		

	# of ECD managers/ coordinators
B.28 Total number of education & child development managers/coordinators	2
	# of ECD managers/ coordinators
Of the education & child development managers/coordinators, the number with the following degrees or credentials:	
a. An advanced degree in early childhood education, or an advanced degree in any field and coursework equivalent to a major relating to early childhood education with experience teaching preschool-age children	1
b. A baccalaureate degree in early childhood education, or a baccalaureate degree in any field and coursework equivalent to a major relating to early childhood education with experience teaching preschool-age children	1
	# of ECD managers/ coordinators
Of the education & child development managers/coordinators, the number with the following degrees or credentials:	
c. An associate degree in early childhood education, or an associate degree in any field and coursework equivalent to a major relating to early childhood education with experience teaching preschool-age children	0
Of the education & child development managers/coordinators preschool child development staff in B.28.c above, the number enrolled in:	
1. A baccalaureate degree in early childhood education, or a baccalaureate degree in any field and coursework equivalent to a major relating to early childhood education	0
	# of ECD managers/ coordinators
Of the education & child development managers/coordinators, the number with the following degrees or credentials:	
d. A Child Development Associate (CDA) credential or state-awarded preschool, infant/toddler, family child care or home-based certification, credential, or licensure that meets or exceeds CDA requirements	0
Of the education & child development managers/coordinators preschool child development staff in B.28.d above, the number enrolled in:	
1. A baccalaureate degree in early childhood education, or a baccalaureate degree in any field and coursework equivalent to a major relating to early childhood education	0
	# of ECD managers/ coordinators
Of the education & child development managers/coordinators, the number with the following degrees or credentials:	
e. None of the qualifications listed in B.28.a through B.28.d	0
Of the education & child development managers/coordinators preschool child development staff in B.28.e above, the number enrolled in:	
1. A baccalaureate degree in early childhood education, or a baccalaureate degree in any field and coursework equivalent to a major relating to early childhood education	0
B.29 Comments on education & child development managers/coordinators shared by Head Start and Early Head Start programs:	

C. CHILD & FAMILY SERVICES

HEALTH SERVICES

Health insurance - children

	(1) # of children at enrollment	(2) # of children at end of enrollment year
C.1 Number of all children with health insurance	137	180
a. Number enrolled in Medicaid and/or CHIP	136	179
b. Number enrolled in state-only funded insurance (for example, medically indigent insurance)	0	0
c. Number with private health insurance (for example, parent's insurance)	0	0
d. Number with health insurance other than those listed above, for example, Military Health (Tri-Care or CHAMPUS)	1	1
1. Specify	KidCare	
C.2. Number of children with no health insurance	44	1

Health insurance - pregnant women

	(1) # of pregnant women at enrollment	(2) # of pregnant women at end of enrollment
C.3 Number of pregnant women with at least one type of health insurance	20	20
a. Number enrolled in Medicaid	20	20
b. Number enrolled in another publicly funded insurance program that is not Medicaid	0	0
c. Number with private health insurance	0	0
d. Number with health insurance other than those listed above, for example, Military Health (Tri-Care or CHAMPUS)	0	0
1. Specify		
C.4 Number of pregnant women with no health insurance	0	0

Medical

Medical home - children

	(1) # of children at enrollment	(2) # of children at end of enrollment year
C.5 Number of children with an ongoing source of continuous, accessible health care	181	181
C.6 Number of children receiving medical services through the Indian Health Service	0	0
C.7 Number of children receiving medical services through a migrant community health center	0	0

Medical services - children

	(1) # of children at enrollment	(2) # of children at end of enrollment year
C.8 Number of all children who are up-to-date on a schedule of age-appropriate preventive and primary health care, according to the relevant state's EPSDT schedule for well child care	181	181
		# of children at end of enrollment year
a. Of these, the number diagnosed by a health care professional with a chronic condition needing medical treatment since last year's PIR was reported		0
1. Of these, the number who have received or are receiving medical treatment		0
b. Specify the primary reason that children who needed medical treatment, for any chronic condition diagnosed by a health care professional since last year's PIR was reported, did not receive it:		

C.9 Number of all children who received medical treatment for the following chronic conditions since last year's PIR was reported, regardless of when the condition was first diagnosed by a health care professional:	# of children
a. Anemia	7
b. Asthma	8
c. Hearing Difficulties	0
d. Vision Problems	0
e. High Lead Levels	0
f. Diabetes	0

Immunization services - children

	(1) # of children at enrollment	(2) # of children at end of enrollment year
C.11 Number of children who have been determined by a health care professional to be up-to-date on all immunizations appropriate for their age	180	180
C.12 Number of children who have been determined by a health care professional to have received all immunizations possible at this time, but who have not received all immunizations appropriate for their age	1	1
C.13 Number of children who meet their state's guidelines for an exemption from immunizations	0	0

Pregnant women - services (EHS programs)

C.14 Indicate the number of pregnant women who received the following services while enrolled in EHS	# of pregnant women
a. Prenatal health care	20
b. Postpartum health care	20
c. Mental health interventions and follow up	0
d. Substance abuse prevention	20
e. Substance abuse treatment	0
f. Prenatal education on fetal development	20
g. Information on the benefits of breastfeeding	20

Pregnant women - prenatal health (EHS programs)

C.15 Trimester of pregnancy in which the pregnant women served were enrolled:	# of pregnant women
a. 1st trimester (0-3 months)	6
b. 2nd trimester (3-6 months)	11
c. 3rd trimester (6-9 months)	3
C.16 Of the total served, the number whose pregnancies were identified as medically high risk by a physician or health care provider	0

Dental

Dental home - children

	(1) # of children at enrollment	(2) # of children at end of enrollment year
C.17 Number of children with continuous, accessible dental care provided by a dentist	82	181

Infant and toddler preventive dental services (EHS and Migrant programs)

	# of children at end of enrollment year
C.20 Number of all children who are up-to-date on a schedule of age-appropriate preventive and primary oral health care according to the relevant state's EPSDT schedule	181

Pregnant women dental services (EHS programs)

	# of pregnant women
C.21 Of the number of pregnant women served, the number who received a professional dental examination(s) and/or treatment since last year's PIR was reported	15

MENTAL HEALTH SERVICES

Mental health professional

	# of hours
C.22 Average total hours per operating month a mental health professional(s) spends on-site	5

Mental health services

C.23 Indicate the number of enrolled children who were served by the mental health (MH) professional(s) since last year's PIR was reported.	<i># of children at end of enrollment year</i>
a. Number of children for whom the MH professional consulted with program staff about the child's behavior / mental health	0
1. Of these, the number for whom the MH professional provided three or more consultations with program staff since last year's PIR was reported	0
b. Number of children for whom the MH professional consulted with the parent(s) / guardian(s) about their child's behavior/mental health	0
1. Of these, the number for whom the MH professional provided three or more consultations with the parent(s) / guardian(s) since last year's PIR was reported	0
c. Number of children for whom the MH professional provided an individual mental health assessment	0
d. Number of children for whom the MH professional facilitated a referral for mental health services	0

Mental health referrals

	<i># of children at end of enrollment year</i>
C.24 Number of children who were referred by the program for mental health services outside of Head Start since last year's PIR was reported	0
a. Of these, the number who received mental health services since last year's PIR was reported	0

Infant and toddler Part C early intervention services (EHS and Migrant programs)

	<i># of children</i>
C.26 Number of children enrolled in the program who have an Individualized Family Service Plan (IFSP) indicating they have been determined eligible by the Part C Agency to receive early intervention services under the Individuals with Disabilities Education Act (IDEA)	9
a. Of these, the number who were determined eligible to receive early intervention services:	<i># of children</i>
1. Prior to enrollment into the program for this enrollment year	3
2. During this enrollment year	6
b. Of these, the number who have not received early intervention services under IDEA	0

EDUCATION AND DEVELOPMENT TOOLS/APPROACHES

Screening

	<i># of children</i>
C.28 Number of all newly enrolled children since last year's PIR was reported	76
C.29 Number of all newly enrolled children who completed required screenings within 45 days for developmental, sensory, and behavioral concerns since last year's PIR was reported	56
a. Of these, the number identified as needing follow-up assessment or formal evaluation to determine if the child has a disability	4
C.30 The instrument(s) used by the program for developmental screening:	
ASQ- 3 (Ages & Stages Questionnaire)	
Other (Please Specify) - DECA I/T Devereux Early Childhood Assessment	
Other (Please Specify) - Infant/Toddler Behavior	

Assessment

C.31 Approach or tool(s) used by the program to support ongoing child assessment:

<i>Name/title</i>	<i>Locally designed</i>
Galileo Assessment Scales Online	No

Curriculum

C.32 What curriculum does your program use:

a. For center-based services:

<i>Name/title</i>	<i>Locally designed</i>
Creative Curriculum (Infant & Toddler)	No

b. For family child care services:

c. For home-based services:

d. For pregnant women services:

<i>Name/title</i>	<i>Locally designed</i>
Partners For A Healthy Baby (Florida State University)	No

STAFF-CHILD INTERACTION OBSERVATION TOOLS

		# of families at enrollment
C.33 Does the program routinely use staff-child interaction observation tools to assess quality?		Yes
C.34 If yes, interaction observation tool(s) used by the program:		
	(1) Name/title	(2) Locally designed
a. Center-based settings	Classroom Observation	Yes
b. Home-based settings		
c. Family child care settings		

FAMILY AND COMMUNITY PARTNERSHIPS

Number of families

	# of families at enrollment
C.35 Total number of families:	163
a. Of these, the number of two-parent families	25
b. Of these, the number of single-parent families	138

Employment

C.36 Of the number of two-parent families, the number of families in which:	# of families at enrollment
a. Both parents/guardians are employed	3
b. One parent/guardian is employed	18
c. Both parents/guardians are not working (i.e. unemployed, retired, or disabled)	4

C.37 Of the number of single-parent families, the number of families in which:	# of families at enrollment
a. The parent/guardian is employed	78
b. The parent/guardian is not working (i.e. unemployed, retired, or disabled)	60

	# of families at enrollment
C.38 The number of all families in which at least one parent/guardian is a member of the United States military on active duty	0

Federal or other assistance

	# of families
C.39 Total number of families receiving any cash benefits or other services under the Federal Temporary Assistance for Needy Families (TANF) Program	18
C.40 Total number of families receiving Supplemental Security Income (SSI)	17
C.41 Total number of families receiving services under the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)	136
C.42 Total number of families receiving services under the Supplemental Nutrition Assistance Program (SNAP), formerly referred to as Food Stamps	126

Job training/school

C.43 Of the number of two-parent families, the number of families in which:	# of families at enrollment
a. Both parents/guardians are in job training or school	0
b. One parent/guardian is in job training or school	1
c. Neither parent/guardian is in job training or school	24

C.44 Of the number of single-parent families, the number of families in which:	# of families at enrollment
a. The parent/guardian is in job training or school	26
b. The parent/guardian is not in job training or school	112

Parent/guardian education

C.45 Of the total number of families, the highest level of education obtained by the child's parent(s) / guardian(s)	# of families at enrollment
a. An advanced degree or baccalaureate degree	2
b. An associate degree, vocational school, or some college	28
c. A high school graduate or GED	90
d. Less than high school graduate	43

Family services

C.46 Report the number of families who received the following services since last year's PIR was reported	# of families
a. Emergency/crisis intervention such as meeting immediate needs for food, clothing, or shelter	9
b. Housing assistance such as subsidies, utilities, repairs, etc.	57
c. Mental health services	3
d. English as a Second Language (ESL) training	7
e. Adult education such as GED programs and college selection	22
f. Job training	25
g. Substance abuse prevention	100
h. Substance abuse treatment	0
i. Child abuse and neglect services	163
j. Domestic violence services	0
k. Child support assistance	0
l. Health education	163
m. Assistance to families of incarcerated individuals	0
n. Parenting education	163
o. Relationship/marriage education	0
C.47 Of these, the number that received at least one of the services listed above	163

Father involvement

C.48 Does the program have organized and regularly scheduled activities designed to involve fathers / father figures?	Yes
	# of children at end of enrollment
a. Number of enrolled children whose fathers / father figures participated in these activities	12

Homelessness services

	# of families
C.49 Total number of families experiencing homelessness that were served during the enrollment year	0
	# of children
C.50 Total number of children experiencing homelessness that were served during the enrollment year	0
	# of families
C.51 Total number of families experiencing homelessness that acquired housing during the enrollment year	0

Foster care and child welfare

	# of children
C.52 Total number of enrolled children who were in foster care at any point during the program year	0
C.53 Total number of enrolled children who were referred to Head Start/Early Head Start services by a child welfare agency	0

Collaboration Agreements and Community Engagement

Child care partners

	# of formal agreements
C.54 Total number of formal agreements with Child Care Partners during program year	3
a. Of the Child Care Partners, the number of formal contractual agreements made void or broken during the program year	0

Local education agency (LEA)

	# of LEAs
C.55 Number of LEAs in the service area	1
C.56 Number of formal agreements the program has with LEAs:	# of formal agreements
a. To coordinate services for children with disabilities	1
b. To coordinate transition services	1

Public school pre-kindergarten programs

C.57 Does the program have formal collaboration and resource sharing agreements with public school pre-kindergarten programs?	Yes
	# of formal agreements
a. If yes, the number of formal agreements in which the program is currently participating	1

Part C agencies

	# of Part C Agencies
C.58 Number of Part C agencies in the program's service area	1
	# of formal agreements
a. Number of formal agreements the program has with Part C agencies to coordinate services for children with disabilities	1

Child welfare agencies

C.59 Does the program have formal collaboration agreements with child welfare agencies?	No
	# of formal agreements
a. If yes, the number of formal agreements in which the program is currently participating	0

REPORTING INFORMATION

PIR Report Status	Started
Last Update Date	08/31/2015

REIMBURSEMENT REPORTS

DOH CHILD CARE FOOD REPORTS

Florida Department of Health

9/8/2015

9:45AM

Child Care Food Program

Child Care Center Claim

S - 501 Region: C RPS: 6 Fiscal Year: 2015 Termination Date: _____

Add'l Doc Required: _____ ADR Reason: _____ Meal Disallowance: _____

Legal Name: AGRICULTURE/ LABOR PROG. INC. FEIN: 591634148001

D/B/A: AGRICULTURE/ LABOR PROG. INC.

Mailing Address: P.O. BOX 3126 WINTER HAVEN, FL 33885

Program Manager: YOUNG, ELIZABETH Phone: (863) 956-3491 Ext: 231

Email: eyoung@alpi.org

Claim Information

Status: Submitted Entered By: 0501

Claim Month/Year: 7/2015 Date Received: 09/08/2015

Revision #: 0

Operating Days: 1 Average Daily Participation: 44

Sites Operated:

PNP: 0 OSHCC: 0 For-Profit: 0 HS: 3 Total: 3

Children Enrolled by Category:

Free 44 Reduced 0 Non-needy 0 Total 44

Meals Claimed:

Breakfast	Morning Snack	Lunch	Afternoon Snack	Supper	Evening Snack
<u>44</u>	<u>0</u>	<u>44</u>	<u>44</u>	<u>0</u>	<u>0</u>

Operating Expenditures	<u>\$7,056.00</u>
Administrative Expenditures	<u>\$8,390.00</u>
Total Expenditures	<u>\$15,446.00</u>
Income	<u>\$0.00</u>

Meal Earnings:	<u>\$245.08</u>
Cash-In-Lieu:	<u>\$10.46</u>
Total Earnings:	<u>\$255.54</u>
Adjustments:	<u>\$0.00</u>
Total Reimbursement:	<u>\$255.54</u>

ELC REIMBURSEMENT REPORT

EARLY LEARNING COALITION OF ST. LUCIE
804 S. SIXTH STREET
FORT PIERCE, FL 34950
Final Provider Advance Payment Report

Report Date: 07/28/2015 01:08:32

Vendor # : 4161
ALPI QUEEN TOWNSEND HEAD START CENTER II (XXXXXX4148 17)
2202 AVENUE Q
FORT PIERCE, FL 34950
(772)429-8889

All Rates Have Been Multiplied by 95 %

Class ID		Child	Flgibility Activity	Care Level	VOLUNTARY PRE-K (VPK)		Days Provider Reimbursed	Rate	Gold Seal Rate	Parent Fee	Gross Reimb.	Gold Seal Cost	Less Fees	Net Reimb.
		** LICENSED CENTER SUB **												
		Reporting Period: 08/01/2015 - 08/31/2015												
K15		XXX-XX-5986	VOLUNTARY PRE-K											
WORKMAN, CHLOE L		Enrolled 08/17/2015		PR4	11	HR Days	.00	.00	.00	.00	0.00	0.00	0.00	0.00
					33	FEE Hours	4.25				140.25			140.25
		48 TO <60 MTH TOTALS:			990	HR Days					0.00	0.00	0.00	0.00
					2970	HR Hours					12622.50	0.00		12622.50
B15		XXX-XX-0245	VOLUNTARY PRE-K											
THOMAS, REGINA I		Enrolled 08/17/2015		SPCR	11	HR Days	.00	.00	.00	.00	0.00	0.00	0.00	0.00
					33	FEE Hours	4.25				140.25			140.25
		SPECIAL NEEDS TOTALS:			11	HR Days					0.00	0.00	0.00	0.00
					33	HR Hours					140.25	0.00		140.25
		TOTALS FOR PERIOD:			1067	Days					13604.25	0.00	0.00	13604.25
					3201	Hours								

EARLY LEARNING COALITION OF ST. LUCIE
 804 S. SIXTH STREET
 FORT PIERCE, FL 34950
 Final Provider Advance Payment Report

Report Date: 07/28/2015 01:08:32

Reporting Period: 08/01/2015 - 08/31/2015

	VPK	REPORT TOTALS:	Days Reimbursed	Gross Reimb.	Gold Seal Cost	Less Fees	Net Reimb.
VOLUNTARY PRE-K		1067 Days		13604.25	0.00	0.00	13604.25

EARLY LEARNING COALITION OF ST. LUCIE
 804 S. SIXTH STREET
 FORT PIERCE, FL 34950
 Final Provider Advance Payment Report

Report Date: 07/28/2015 01:05:12

Vendor # : 4154
 ALPI LINCOLN PARK HEADSTART (XXXXXX4148 5)
 2202 AVENUE Q
 FORT PIERCE, FL 34950
 (772)464-6061

All Rates Have Been Multiplied by 95 %

(772)464-0061		** GS CENTER NON-SUB **	VOLUNTARY PRE-K (VPK)		Reporting Period: 08/01/2015 - 08/31/2015					
Class ID	Child	Eligibility Activity	Care Level	Reimbursed	Days Provider	Gold Seal Parent	Gross Reimb.	Gold Seal Cost	Less Fees	Net Reimb.
		48 TO <60 MTH	TOTALS:	350	HR Days		0.00	0.00	0.00	0.00
				1050	HR Hours		4462.50	0.00		4462.50
		TOTALS FOR PERIOD:		390	Days		4972.50	0.00	0.00	4972.50
				1170	Hours					

--> Child Care For Period: 08/01/2015 - 08/31/2015 <==

--> Child Care For Period: 08/01/2015 - 08/31/2015 <==

EARLY LEARNING COALITION OF ST. LUCIE
804 S. SIXTH STREET
FORT PIERCE, FL 34950
Final Provider Advance Payment Report

Report Date: 07/28/2015 01:05:12

Reporting Period: 08/01/2015 - 08/31/2015

	VPK	REPORT TOTALS:	Days Reimbursed	Gross Reimb.	Gold Seal Cost	Less Fees	Net Reimb.
VOLUNTARY PRE-K			390 Days	4972.50	0.00	0.00	4972.50

EARLY LEARNING COALITION OF ST. LUCIE
804 S. SIXTH STREET
FORT PIERCE, FL 34950
Final Provider Advance Payment Report

Report Date: 07/28/2015 12:58:35

Vendor # : 4158
ALPI FRANCINA DUVAL HEAD START (XXXXXX4148 7)
2202 AVENUE Q
FT. PIERCE, FL 34950
(772)461-0398

All Rates Have Been Multiplied by 95 %

(772)461-0398	Class ID	Child	Eligibility Activity	Care Level	VOLUNTARY PRE-K (VPK)				Reporting Period: 08/01/2015 - 08/31/2015				
					Days Reimbursed	Provider Rate	Gold Seal Rate	Parent Fee	Gross Reimb.	Gold Seal Cost	Less Fees	Net Reimb.	
					TOTALS FOR PERIOD:	253	Days			3225.75	0.00	0.00	3225.75
						759	Hours						

=>

Child Care For Period: 08/01/2015 - 08/31/2015 <==

Child Care For Period: 08/01/2015 - 08/31/2015

EARLY LEARNING COALITION OF ST. LUCIE
 804 S. SIXTH STREET
 FORT PIERCE, FL 34950
 Final Provider Advance Payment Report

Report Date: 07/28/2015 12:58:35

Reporting Period: 08/01/2015 - 08/31/2015

	VPK	REPORT TOTALS:	Days Reimbursed	Gross Reimb.	Gold Seal Cost	Less Fees	Net Reimb.
VOLUNTARY PRE-K		253 Days		3225.75	0.00	0.00	3225.75

EARLY LEARNING COALITION OF ST. LUCIE

804 S. SIXTH STREET

FORT PIERCE, FL 34950

Final Provider Advance Payment Report

Report Date: 07/28/2015 12:59:57

Vendor # : 4149

ALPI GARDEN TERRACE HEADSTART (XXXXXX4148 2)

2202 AVENUE Q

FORT PIERCE, FL 34950

(772)468-0300

** GS CENTER NON-SUB **

All Rates Have Been Multiplied by 95 %

VOLUNTARY PRE-K (VPK)

Reporting Period: 08/01/2015 - 08/31/2015

Class ID	Child	Eligibility Activity	Care Level	Days Reimbursed	Days Provider	Gold Seal Rate	Parent Fee	Gross Reimb.	Gold Seal Cost	Less Fees	Net Reimb.
VOLUNTARY PRE-K											
B15	XXX-XX-3710	VOLUNTARY PRE-K									
WILLINGHAM, CA'MAURI L		Enrolled 08/17/2015	PR4	11 HR Days	.00	.00	.00	0.00	0.00	0.00	0.00
				33 FEE Hours	4.25			140.25			140.25
48 TO <60 MTH TOTALS:				506 HR Days				0.00	0.00	0.00	0.00
				1518 HR Hours				6451.50	0.00		6451.50
TOTALS FOR PERIOD:				528 Days				6732.00	0.00	0.00	6732.00
				1584 Hours							

EARLY LEARNING COALITION OF ST. LUCIE
 804 S. SIXTH STREET
 FORT PIERCE, FL 34950
 Final Provider Advance Payment Report

Report Date: 07/28/2015 12:59:57

Reporting Period: 08/01/2015 - 08/31/2015

	VPK	REPORT TOTALS:	Days Reimbursed	Gross Reimb.	Gold Seal Cost	Less Fees	Net Reimb.
VOLUNTARY PRE-K		528 Days		6732.00	0.00	0.00	6732.00

EARLY LEARNING COALITION OF ST. LUCIE
804 S. SIXTH STREET
FORT PIERCE, FL 34950
Final Provider Advance Payment Report

Report Date: 07/28/2015 01:02:29

Vendor # : 4150
ALPI GEORGE W TRUITT HEADSTART (XXXXXX4148 3)
2202 AVENUE Q
FORT PIERCE, FL 34950
(772)464-4452

All Rates Have Been Multiplied by 95 %

(772)464-4452		** GS CENTER SUB **		VOLUNTARY PRE-K (VPK)				Reporting Period: 08/01/2015 - 08/31/2015			
Class ID	Child	Eligibility Activity	Care Level	Reimbursed	Days Provider	Gold Seal Rate	Parent Fee	Gross Reimb.	Gold Seal Cost	Less Fees	Net Reimb.
==> Child Care For Period: 08/01/2015 - 08/31/2015 <==											
A15 XXX-XX-3853	SMITH, MALIK E	VOLUNTARY PRE-K	PR4	11	HR Days	.00	.00	0.00	0.00	0.00	0.00
		Enrolled 08/17/2015		33	FEE Hours	4.25		140.25			140.25
A15 XXX-XX-0403	SYRII, RYAD	VOLUNTARY PRE-K	PR4	11	HR Days	.00	.00	0.00	0.00	0.00	0.00
		Enrolled 08/17/2015		33	FEE Hours	4.25		140.25			140.25
A15 XXX-XX-8860	THOMAS, ANIYAH	VOLUNTARY PRE-K	PR4	11	HR Days	.00	.00	0.00	0.00	0.00	0.00
		Enrolled 08/17/2015		33	FEE Hours	4.25		140.25			140.25
A15 XXX-XX-9087	WATKINS, KAYDEN	VOLUNTARY PRE-K	PR4	11	HR Days	.00	.00	0.00	0.00	0.00	0.00
		Enrolled 08/17/2015		33	FEE Hours	4.25		140.25			140.25
B15 XXX-XX-5700	WILLIAMS, ZAKHOR	VOLUNTARY PRE-K	PR4	11	HR Days	.00	.00	0.00	0.00	0.00	0.00
		Enrolled 08/17/2015		33	FEE Hours	4.25		140.25			140.25
48 TO <60 MTH TOTALS:				231	HR Days			0.00	0.00	0.00	0.00
				693	HR Hours			2945.25	0.00		2945.25
TOTALS FOR PERIOD:				231	Days			2945.25	0.00	0.00	2945.25
				693	Hours						

EARLY LEARNING COALITION OF ST. LUCIE
804 S. SIXTH STREET
FORT PIERCE, FL 34950
Final Provider Advance Payment Report

Report Date: 07/28/2015 01:02:29

Reporting Period: 08/01/2015 - 08/31/2015

	VPK	REPORT TOTALS:	Days Reimbursed	Gross Reimb.	Gold Seal Cost	Less Fees	Net Reimb.
VOLUNTARY PRE-K			231 Days	2945.25	0.00	0.00	2945.25

EARLY LEARNING COALITION OF ST. LUCIE
804 S. SIXTH STREET
FORT PIERCE, FL 34950
Final Provider Advance Payment Report

Report Date: 07/28/2015 12:57:12

Vendor # : 4181
ALP1 CHILD DEV FAMILY SVCS CTR (XXXXXX4148 16)
2202 AVENUE Q
FORT PIERCE, FL 34950
(772)879-4944

All Rates Have Been Multiplied by 95 %

(772)879-4944		** LICENSED CENTER SUB **		VOLUNTARY PRE-K (VPK)		Reporting Period: 08/01/2015 - 08/31/2015						
Class ID	Child	Eligibility Activity	Care Level	Reimbursed	Days Provider	Rate	Gold Seal Rate	Parent Fee	Gross Reimb.	Gold Seal Cost	Less Fees	Net Reimb.
==> Child Care For Period: 08/01/2015 - 08/31/2015 <==												
A15	XXX-XX-5520	VOLUNTARY PRE-K										
VELASQUEZ JR, KEVIN L		Enrolled 08/17/2015	PR4	11	HR Days	.00	.00	.00	0.00	0.00	0.00	0.00
				33	FEE Hours	4.25			140.25			140.25
A15	XXX-XX-9074	VOLUNTARY PRE-K										
VOLTAIRE, JEANSON		Enrolled 08/17/2015	PR4	11	HR Days	.00	.00	.00	0.00	0.00	0.00	0.00
				33	FEE Hours	4.25			140.25			140.25
B15	XXX-XX-3251	VOLUNTARY PRE-K										
YOUNG, XAVION T		Enrolled 08/17/2015	PR4	11	HR Days	.00	.00	.00	0.00	0.00	0.00	0.00
				33	FEE Hours	4.25			140.25			140.25
A15	XXX-XX-5253	VOLUNTARY PRE-K										
ZIDOR, JOSHUA C		Enrolled 08/17/2015	PR4	11	HR Days	.00	.00	.00	0.00	0.00	0.00	0.00
				33	FEE Hours	4.25			140.25			140.25
48 TO <60 MTH TOTALS:				990	HR Days				0.00	0.00	0.00	0.00
				2970	HR Hours				12622.50	0.00		12622.50
TOTALS FOR PERIOD:				1089	Days				13884.75	0.00	0.00	13884.75
				3267	Hours							

EARLY LEARNING COALITION OF ST. LUCIE
 804 S. SIXTH STREET
 FORT PIERCE, FL 34950
 Final Provider Advance Payment Report

Report Date: 07/28/2015 12:57:12

Reporting Period: 08/01/2015 - 08/31/2015

	VPK	REPORT TOTALS:	Days Reimbursed	Gross Reimb.	Gold Seal Cost	Less Fees	Net Reimb.
VOLUNTARY PRE-K		1089	Days	13884.75	0.00	0.00	13884.75

LIHEAP FINANCIAL STATUS REPORT

Agency : Agricultural and Labor Program, Inc.

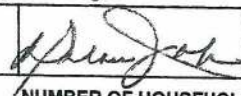
Version 1.0

Program : Low Income Home Energy Assistance Program (LIHEAP)

Low Income Home Energy Assistance Program (LIHEAP)

Contract # : 15EA-0F-07-63-08-001

FINANCIAL STATUS REPORT

Reporting Period:	6 2015-6 2015	Invoice #:	15EA0014		
LIHEAP FUNDS					
BUDGET CATEGORIES	Budget Allocation (A)	Current Month (B)	Total To Date (C)	Unexpended Balance (D) (A-C)	
VENUE AND FUNDING					
LIHEAP FUNDS (No Leveraging Funds)	\$4,329,956.00	\$528,963.19	\$1,080,757.87	\$3,249,198.13	
RANTEE ADMINISTRATIVE EXPENSE					
Salaries including Fringe, Rent, Utilities, Travel, Other (total cannot exceed 8% of Line 1)	\$311,927.00	\$45,622.63	\$102,214.88	\$209,712.12	
RANTEE OUTREACH EXPENSE					
Salaries including Fringe, Rent, Utilities, Travel, Other (cannot Exceed 15% of Line 1 minus Line 2)	\$658,726.00	\$140,452.75	\$283,344.16	\$375,381.84	
RECT CLIENT ASSISTANCE					
Home Energy Assistance Payments (must be at least 25% of Line 1)	\$1,082,513.00	\$145,030.10	\$311,689.00	\$770,824.00	
Crisis Benefits Payments	\$2,189,990.00	\$197,857.71	\$383,509.83	\$1,806,480.17	
Weather Related/Supply Shortage (must be at least 2% of Line 1)	\$86,800.00	\$0.00	\$0.00	\$86,800.00	
SUBTOTAL (Lines 4-6)	\$3,359,303.00	\$342,887.81	\$695,198.83	\$2,664,104.17	
RANTEE LEVERAGING EXPENSE					
Home Energy Assistance	\$0.00	\$0.00	\$0.00	\$0.00	
Crisis Assistance	\$0.00	\$0.00	\$0.00	\$0.00	
9. SUBTOTAL (Line 8 + 9)	\$0.00	\$0.00	\$0.00	\$0.00	
10. GRAND TOTAL ALL EXPENSES (Line 2 + 3 + 7 + 10)	\$4,329,956.00	\$528,963.19	\$1,080,757.87	\$3,249,198.13	
CASH POSITION					
Total grant funds received from DEO Y-T-D			\$753,277.20		
Interest Income Received to Date			\$0.00		
Program Income Received to Date			\$0.00		
Amount of Reimbursement Requested (not to exceed undisbursed balance)			\$528,963.19		
I certify that I am authorized to sign financial reports and the information provided herein is true and accurate to the best of my knowledge.					
Name (Please Type) :	Deloris Johnson	Title :	Chief Exec. Officer	Signature  Date : 7/10/2015	
Current Authority	\$2,890,073.00	Type of Assistance		NUMBER OF HOUSEHOLDS	
Year-to-Date Disbursed	\$753,277.20			Approved Workplan	Served with these Funds
Available Authority	\$2,136,795.80	Summer Home Energy	1729	365	817
Payment Number		Winter Home Energy	1724	0	0
Payment Amount		Summer Crisis	3195	584	1131
Approved		Winter Crisis	3325	0	0
Date		Weather Related	248	0	0
		TOTALS :	10221	949	1948

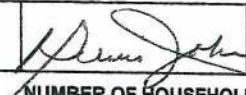
Agency: Agricultural and Labor Program, Inc.

Program: Low Income Home Energy Assistance Program (LIHEAP)

Contract #: 15EA-0F-07-63-08-001

Low Income Home Energy Assistance Program (LIHEAP)

FINANCIAL STATUS REPORT

Reporting Period:	7 2015-7 2015	Invoice #:	15EA0015	
LIHEAP FUNDS				
BUDGET CATEGORIES	Budget Allocation (A)	Current Month (B)	Total To Date (C)	Unexpended Balance (D) (A-C)
REVENUE AND FUNDING				
LIHEAP FUNDS (No Leveraging Funds)	\$4,329,956.00	\$610,218.72	\$1,690,976.59	\$2,638,979.41
LIHEAP ADMINISTRATIVE EXPENSE				
Salaries including Fringe, Rent, Utilities, Travel, Other (Total cannot exceed 8% of Line 1)	\$311,927.00	\$31,275.42	\$133,490.30	\$178,436.70
LIHEAP OUTREACH EXPENSE				
Salaries including Fringe, Rent, Utilities, Travel, Other (Total cannot exceed 15% of Line 1 minus Line 2)	\$658,726.00	\$79,186.21	\$362,530.37	\$296,195.63
LIHEAP CLIENT ASSISTANCE				
Home Energy Assistance Payments (Total must be at least 25% of Line 1)	\$1,082,513.00	\$242,426.15	\$554,115.15	\$528,397.85
Crisis Benefits Payments	\$2,189,990.00	\$257,330.94	\$640,840.77	\$1,549,149.23
Weather Related/Supply Shortage (Total must be at least 2% of Line 1)	\$86,800.00	\$0.00	\$0.00	\$86,800.00
LIHEAP TOTAL (Lines 4-6)	\$3,359,303.00	\$499,757.09	\$1,194,955.92	\$2,164,347.08
LIHEAP LEVERAGING EXPENSE				
Home Energy Assistance	\$0.00	\$0.00	\$0.00	\$0.00
Crisis Assistance	\$0.00	\$0.00	\$0.00	\$0.00
SUBTOTAL (Line 8 + 9)	\$0.00	\$0.00	\$0.00	\$0.00
GRAND TOTAL ALL EXPENSES (Line 2 + 3 + 7 + 10)	\$4,329,956.00	\$610,218.72	\$1,690,976.59	\$2,638,979.41
CASH POSITION				
Total grant funds received from DEO Y-T-D				\$1,282,240.39
Interest Income Received to Date				\$0.00
Program Income Received to Date				\$0.00
Amount of Reimbursement Requested (not to exceed undisbursed balance)				\$610,218.72
I certify that I am authorized to sign financial reports and the information provided herein is true and accurate to the best of my knowledge.				
Name (Please Type):	Deloris Johnson	Title:	Chief Exec. Officer	Signature: 
Current Authority	\$2,890,073.00	Date: 8/6/2015		
Year-to-Date Disbursed	\$1,282,240.39	NUMBER OF HOUSEHOLDS		
Available Authority	\$1,607,832.61	Type of Assistance	Approved Workplan	Served with these Funds
Payment Number		Summer Home Energy	1729	611
Payment Amount		Winter Home Energy	1724	0
Approved		Summer Crisis	3195	759
Unexpended		Winter Crisis	3325	0
Balance		Weather Related	248	0
		TOTALS:	10221	1370
				3318

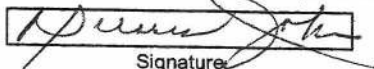
Recipient hereby certifies that it has been open and operating during its normal business hours for the month of

July

, as described in Attachment F, Warranties and Representations, of the FY2015 LIHEAP Agreement.

Deloris Johnson

Printed Name



Signature

8/6/2015

Date

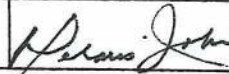
Agency: Agricultural and Labor Program, Inc.

Program: Low Income Home Energy Assistance Program (LIHEAP)

Contract #: 15EA-0F-07-63-08-001

Low Income Home Energy Assistance Program (LIHEAP)

FINANCIAL STATUS REPORT

Reporting Period:	8 2015-8 2015	Invoice #:	15EA0016	
LIHEAP FUNDS				
BUDGET CATEGORIES	Budget Allocation (A)	Current Month (B)	Total To Date (C)	Unexpended Balance (D) (A-C)
VENUE AND FUNDING				
LIHEAP FUNDS (No Leveraging Funds)	\$4,329,956.00	\$540,387.79	\$2,231,364.38	\$2,098,591.62
WARRANTY ADMINISTRATIVE EXPENSE				
Salaries including Fringe, Rent, Utilities, Travel, Other (total cannot exceed 8% of Line 1)	\$311,927.00	\$28,882.10	\$162,372.40	\$149,554.60
WARRANTY OUTREACH EXPENSE				
Salaries including Fringe, Rent, Utilities, Travel, Other (cannot Exceed 15% of Line 1 minus Line 2)	\$658,726.00	\$76,296.35	\$438,826.72	\$219,899.28
RECT CLIENT ASSISTANCE				
Home Energy Assistance Payments (must be at least 25% of Line 1)	\$1,082,513.00	\$170,675.00	\$724,790.15	\$357,722.85
Crisis Benefits Payments	\$2,189,990.00	\$264,534.34	\$905,375.11	\$1,284,614.89
Weather Related/Supply Shortage (must be at least 2% of Line 1)	\$86,800.00	\$0.00	\$0.00	\$86,800.00
SUBTOTAL (Lines 4-6)	\$3,359,303.00	\$435,209.34	\$1,630,165.26	\$1,729,137.74
WARRANTY LEVERAGING EXPENSE				
Home Energy Assistance	\$0.00	\$0.00	\$0.00	\$0.00
Crisis Assistance	\$0.00	\$0.00	\$0.00	\$0.00
9. SUBTOTAL (Line 8 + 9)	\$0.00	\$0.00	\$0.00	\$0.00
1. GRAND TOTAL ALL EXPENSES (Line 2 + 3 + 7 + 10)	\$4,329,956.00	\$540,387.79	\$2,231,364.38	\$2,098,591.62
CASH POSITION				
Total grant funds received from DEO Y-T-D				\$1,892,459.11
Interest Income Received to Date				\$0.00
Program Income Received to Date				\$0.00
Amount of Reimbursement Requested (not to exceed undisbursed balance)				\$540,387.79
I certify that I am authorized to sign financial reports and the information provided herein is true and accurate to the best of my knowledge.				
Name (Please Type):	Deloris Johnson	Title:	Chief Exec. Officer	Signature: 
Current Authority	\$4,329,956.00	Type of Assistance		Date: 9/11/2015
Year-to-Date Disbursed	\$1,892,459.11			
Available Authority	\$2,437,496.89	NUMBER OF HOUSEHOLDS		
Payment Number		Approved Workplan	Served with these Funds	Served to Date
Payment Amount		Summer Home Energy	1729	430
Approved		Winter Home Energy	1724	0
Date		Summer Crisis	3195	780
		Winter Crisis	3325	0
		Weather Related	248	0
		TOTALS:	10221	1210

Recipient hereby certifies that it has been open and operating during its normal business hours for the month of August, as described in Attachment F, Warranties and Representations, of the FY2015 LIHEAP Agreement.

Deloris Johnson
Printed Name


Signature

9/11/2015
Date

FLORIDA NON-PROFIT HOUSING


**THE AGRICULTURAL AND LABOR PROGRAM, INC.
EXPENSE REPORT TO FLORIDA NON-PROFIT HOUSING**

MONTHLY REQUEST

DATE SUBMITTED: 13-Jul-15
FOR THE MONTH OF: JUNE, 2015 FINAL REPORT

AMOUNT OF THIS REQUEST \$ \$5,648.03

	BUDGET LINE ITEM	APPROVED BUDGET	CUM. COST PRIOR PERIOD	ACTUAL COST THIS PERIOD	CUM. COST TO DATE	BAL. OF BUDGET
500	Salaries	\$2,353.00	\$2,151.34	\$201.66	\$2,353.00	\$0.00
505	Fringes	\$588.00	\$516.01	\$71.99	\$588.00	\$0.00
52000	Workmen's Comp.	\$31.00	\$26.83	\$4.17	\$31.00	\$0.00
57810	Housing Assist. Payment	\$43,366.00	\$38,076.94	\$5,289.06	\$43,366.00	\$0.00
52300	Travel	\$744.00	\$665.67	\$78.33	\$744.00	\$0.00
990	Sub-Total	\$47,082.00	\$41,436.79	\$5,645.21	\$47,082.00	\$0.00
597	Indirect	\$388.00	\$385.18	\$2.82	\$388.00	\$0.00
	Total Cost	\$47,470.00	\$41,821.97	\$5,648.03	\$47,470.00	\$0.00



SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL

13-Jul-15

DATE

Deloris Johnson, Chief Executive Officer

TYPED OR PRINTED NAME & TITLE

**THE AGRICULTURAL AND LABOR PROGRAM, INC.
EXPENSE REPORT TO FLORIDA NON-PROFIT HOUSING**

MONTHLY REQUEST

DATE SUBMITTED: 3-Sep-15
FOR THE MONTH OF: August, 2015

AMOUNT OF THIS REQUEST \$ \$1,109.83

	BUDGET LINE ITEM	APPROVED BUDGET	CUM. COST PRIOR PERIOD	ACTUAL COST THIS PERIOD	CUM. COST TO DATE	BAL. OF BUDGET
500	Salaries	\$2,476.00	\$0.00	\$0.00	\$0.00	\$2,476.00
505	Fringes	\$619.00	\$0.00	\$0.00	\$0.00	\$619.00
52000	Workmen's Comp.	\$59.00	\$0.00	\$0.00	\$0.00	\$59.00
57810	Housing Assist. Payment	\$42,775.00	\$0.00	\$1,109.83	\$1,109.83	\$41,665.17
52300	Travel	\$716.00	\$0.00	\$0.00	\$0.00	\$716.00
990	Sub-Total	\$46,645.00	\$0.00	\$1,109.83	\$1,109.83	\$45,535.17
597	Indirect	\$408.00	\$0.00	\$0.00	\$0.00	\$408.00
	Total Cost	\$47,053.00	\$0.00	\$1,109.83	\$1,109.83	\$45,943.17



SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL

3-Sep-15

DATE

Deloris Johnson, Chief Executive Officer

TYPED OR PRINTED NAME & TITLE

DOE/FJEP DISBURSEMENT REPORT (EA)

I hereby certify that I have reviewed this disbursement report and that all items shown above are in accordance with applicable laws and regulations and have been classified properly according to this district's/agency's current chart of accounts. All records necessary to substantiate these items are available for review by the state and federal monitoring staff. I further certify that as a disbursement report, all disbursements; were obligated after the project approval date and prior to the termination date; have not been reported previously; and were not used for matching funds on this or any special project. Further, all inventory items included have been entered properly on the inventory records required by state and federal regulations.

DOE Audited By: _____
Use Date: ____/____/____

Worker's Compensation has gone over \$96.45, which is 52% over budget. This is a result of worker's compensation increasing from 1.3% to 2.41%. In the future a budget modification will be prepared before the deadline to accommodate the increase.

2015 HUD COUNSELING QUARTERLY REPORT

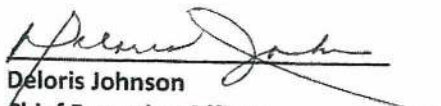
Housing Counseling Agency Activity Report		U.S. Department of Housing and Urban Development Office of Housing Federal Housing Commissioner	
1. Counseling Agency Name		2. Reporting Period and Budget	
Agency Name THE AGRICULTURE AND LABOR PROGRAM, INC. Agency ID: 80049 Agency Type: LHCA 300 Lynchburg Road LAKE ALFRED, FL 33850-2576 Parent Agency Name (if applicable)		Reporting Period: Quarter 3 ▾ Fiscal Year: 2015 From: 10/01/2014 To: 06/30/2015 Submission Date: 07/30/2015 Update Date: 07/30/2015 Total budget, all sources: \$68,860.00 Total HUD Funding, all grants: \$13,447.00	
HUD Funding Sources Passed @ 20% 2014-1 COMP 10/01/2013 - 03/31/2015 Notice of Funding Availability (NOFA) for the Department's Fiscal Year 2014-2015 Comprehensive Housing Counseling program. Funding: \$0.00 Projection: Submitted to HUD; Not Approved 2015-1 COMP 10/01/2014 - 03/31/2016 Notice of Funds Availability (NOFA) for the Department's Fiscal Year 2014 - 2015 Comprehensive Housing Counseling Program; FY 2015 Awards is the 2nd part of applicants awarded in 2014 Funding: \$13,447.00 Projection: Entered; Not submitted to HUD			
Validated: Validated Last Validated: 07/30/2015 Validated by: System		Only reports completed by 07/31/2015 will be credited for on time submission.	
<input type="button" value="Update"/> <input type="button" value="PDF Version"/> <input type="button" value="Cancel"/>		TOTAL	
<input type="button" value="Show HUD Grant Activity"/>		All Activities	All HUD Funded Activities
			Projected HUD Housing Counseling Activities
3. Ethnicity of Households (select only one)			
a. Hispanic	6	6	
b. Not Hispanic	27	26	
c. Chose not to respond	1	1	
Section 3 Total	34	33	
4. Race of Households			
Single Race			
a. American Indian/Alaskan Native	0	0	
b. Asian	2	2	
c. Black or African American	17	16	
d. Native Hawaiian or Other Pacific Islander	0	0	
e. White	13	13	
Multi-Race			
f. American Indian or Alaska Native and White	0	0	
g. Asian and White	0	0	
h. Black or African American and White	0	0	
i. American Indian or Alaska Native and Black or African American	0	0	
j. Other multiple race	0	0	
k. Chose not to respond	2	2	
Section 4 Total	34	33	
5. Income Levels			
a. < 30% of Area Median Income (AMI)	18	18	
b. 30 - 49% of AMI	2	2	
c. 50 - 79% of AMI	8	7	
d. 80 - 100% of AMI	4	4	
e. > 100% AMI	2	2	
f. Chose not to respond	0	0	
Section 5 Total	34	33	
6. Rural Area Status			
a. Household lives in a rural area	1	1	
b. Household does not live in a rural area	31	30	

c. Chose not to respond	2	2	
Section 6 Total	34	33	
7. Limited English Proficiency Status			
a. Household is Limited English Proficient	0	0	
b. Household is not Limited English Proficient	33	32	
c. Chose not to respond	1	1	
Section 7 Total	34	33	
8. Households Receiving Group Education by Purpose			
a. Completed financial literacy workshop, including home affordability, budgeting and understanding use of credit	0	0	0
b. Completed predatory lending, loan scam or other fraud prevention workshop	0	0	0
c. Completed fair housing workshop	0	0	0
d. Completed homelessness prevention workshop	0	0	0
e. Completed rental workshop	0	0	0
f. Completed pre-purchase homebuyer education workshop	0	0	0
g. Completed non-delinquency post-purchase workshop, including home maintenance and/or financial management for homeowners	0	0	0
h. Completed resolving or preventing mortgage delinquency workshop	0	0	0
i. Completed other workshop	0	0	0
Section 8 Total	0	0	0
9. Households Receiving One-on-One Counseling by Purpose			
a. Homeless Assistance	0	0	0
b. Rental Topics	2	2	0
c. Prepurchase/Homebuying	0	0	0
d. Home Maintenance and Financial Management for Homeowners (Non-Delinquency Post-Purchase)	7	7	0
e. Reverse Mortgage	1	1	0
f. Resolving or Preventing Mortgage Delinquency or Default	24	23	0
Section 9 Total	34	33	0
Households Served Sections 8 and 9 Total:	34	33	0
10. Impact and Scope of One-on-One Counseling Services			
a. Households that received one-on-one counseling that also received group education services.	0	0	
b. Households that received information on fair housing, fair lending and/or accessibility rights.	0	0	
c. Households for whom counselor developed a sustainable household budget through the provision of financial management and/or budget services.	0	0	
d. Households that improved their financial capacity (e.g. increased discretionary income, decreased debt load, increased savings, increased credit score) after receiving Housing Counseling Services.	0	0	
e. Households that gained access to resources to help them improve their housing situation (e.g. down payment assistance, rental assistance, utility assistance, etc.) after receiving Housing Counseling Services.	4	4	
f. Households that gained access to non-housing resources (e.g. social service programs, legal services, public benefits such as Social Security or Medicaid, etc) after receiving Housing Counseling Services.	2	2	
g. Homeless or potentially homeless households that obtained temporary or permanent housing after receiving Housing Counseling Services.	0	0	
h. Households that received rental counseling and avoided eviction after receiving Housing Counseling Services.	0	0	
i. Households that received rental counseling and improved living conditions after receiving Housing Counseling Services.	0	0	
j. Households that received prepurchase/homebuying counseling and purchased housing after receiving Housing Counseling Services.	0	0	

k.	households that received reverse mortgage counseling and obtained a Home Equity Conversion Mortgage (HECM) after receiving Housing Counseling Services.	0	0	
l.	Households that received non-delinquency post-purchase counseling that were able to improve home conditions or home affordability after receiving Housing Counseling Services.	0	0	
m.	Households that prevented or resolved a mortgage default after receiving Housing Counseling Services.	1	1	
Section 10 Total		7	7	

Last Updated: 07/27/2015 Version 14.4.0.0

United States Department of Housing and Urban Development

1.	Grantee's Name, Address, and Grant Number(s):	The Agricultural and Labor Program, Inc. (MX0049) 300 Lynchburg Rd. Lake Alfred, FL 33850 Grant #: HC130421106																																						
2.	Start and end Dates:	GRANT BEGINNING DATE: October 1, 2014 GRANT ENDING DATE: March 31, 2016 REPORT BEGINNING DATE: April 1, 2015 REPORT ENDING DATE: June 30, 2015																																						
3.	Hourly Rate(s):	Sandi Figel (Counselor) = \$31.60 per hour, including Fringe Benefits, Workers' Compensation, etc.																																						
4.	Staff Hour(s):		Prev. Period	Current Period																																				
		YTD																																						
	Sandi Figel (Counselor)	77.3 hrs.	0.0 hrs.	77.3 hrs.																																				
5.	Itemized Accounting of Actual Costs:	<table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="text-align: left;">Expenditure Item</th> <th style="text-align: right;">YTD</th> <th style="text-align: right;">Previous Period</th> <th style="text-align: right;">Current Period</th> </tr> </thead> <tbody> <tr> <td>Salaries</td> <td style="text-align: right;">\$1,935.29</td> <td style="text-align: right;">\$0.00</td> <td style="text-align: right;">\$1,935.29</td> </tr> <tr> <td>Fringe Benefits</td> <td style="text-align: right;">\$515.38</td> <td style="text-align: right;">\$0.00</td> <td style="text-align: right;">\$515.38</td> </tr> <tr> <td>Travel</td> <td style="text-align: right;">\$0.00</td> <td style="text-align: right;">\$0.00</td> <td style="text-align: right;">\$0.00</td> </tr> <tr> <td>Supplies</td> <td style="text-align: right;">\$0.00</td> <td style="text-align: right;">\$0.00</td> <td style="text-align: right;">\$0.00</td> </tr> <tr> <td>Printing</td> <td style="text-align: right;">\$28.31</td> <td style="text-align: right;">\$0.00</td> <td style="text-align: right;">\$28.31</td> </tr> <tr> <td>Training</td> <td style="text-align: right;">\$0.00</td> <td style="text-align: right;">\$0.00</td> <td style="text-align: right;">\$0.00</td> </tr> <tr> <td>Indirect Cost</td> <td style="text-align: right;">\$357.59</td> <td style="text-align: right;">\$0.00</td> <td style="text-align: right;">\$357.59</td> </tr> <tr> <td style="text-align: right;">GRAND TOTAL</td> <td style="text-align: right;">\$2,836.57</td> <td style="text-align: right;">\$0.00</td> <td style="text-align: right;">\$2,836.57</td> </tr> </tbody> </table> <p style="text-align: right; margin-top: 10px;">AMOUNT DUE THIS REPORTING PERIOD = \$2,836.57</p>			Expenditure Item	YTD	Previous Period	Current Period	Salaries	\$1,935.29	\$0.00	\$1,935.29	Fringe Benefits	\$515.38	\$0.00	\$515.38	Travel	\$0.00	\$0.00	\$0.00	Supplies	\$0.00	\$0.00	\$0.00	Printing	\$28.31	\$0.00	\$28.31	Training	\$0.00	\$0.00	\$0.00	Indirect Cost	\$357.59	\$0.00	\$357.59	GRAND TOTAL	\$2,836.57	\$0.00	\$2,836.57
Expenditure Item	YTD	Previous Period	Current Period																																					
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Indirect Cost	\$357.59	\$0.00	\$357.59																																					
GRAND TOTAL	\$2,836.57	\$0.00	\$2,836.57																																					
6.	Required Certification: "By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil, or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812)." <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 20px;"> <div style="width: 45%;">  Deloris Johnson Chief Executive Officer </div> <div style="width: 45%; text-align: center;"> <u>7-30-15</u> Date </div> </div>																																							

CSBG FINANCIAL STATUS

Agency : Agricultural and Labor Program, Inc.

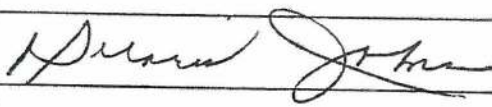
Version 3.0

Program : Community Services Block Grant Program (CSBG)

Community Services Block Grant Program (CSBG)

Contract # : 15SB-0D-07-63-08-001

MONTHLY FINANCIAL STATUS REPORT

Reporting Period:	June 2015- June 2015	Invoice #:	15SB0019	
TOTAL EXPENDITURES				
BUDGET CATEGORIES	Budget Allocation (A)	Current Month (B)	Total To Date (C)	Unexpended Balance (D) (A-C)
1. CSBG Grant Funds	\$1,046,948.00	\$122,146.87	\$717,046.95	\$329,901.05
2. Cash Match	\$0.00	\$0.00	\$0.00	\$0.00
3. In-Kind Match	\$0.00	\$0.00	\$0.00	\$0.00
4. Total Match (Line 2 + Line 3)	\$0.00	\$0.00	\$0.00	\$0.00
5. Total Funds (Line 1 + Line 4)	\$1,046,948.00	\$122,146.87	\$717,046.95	\$329,901.05
CSBG FUNDS ONLY BELOW THIS LINE (No Match Funds)				
ADMINISTRATIVE EXPENSES				
6. Recipient Administrative Expenses (Salaries, Rent, Utilities, Travel, Other)	\$157,042.00	\$11,110.69	\$88,033.20	\$69,008.80
7. Sub-Recipient Administrative Expenses (Salaries, Rent, Utilities, Travel, Other)	\$0.00	\$0.00	\$0.00	\$0.00
8. Total Administrative Expenses (Line 6 + Line 7)	\$157,042.00	\$11,110.69	\$88,033.20	\$69,008.80
9. Administrative Expense Percentage (Line 8 divided by Line 1)	15.00	Cannot Exceed 15% of CSBG Allocation		
Program Expenses				
10. Recipient Direct Client Assistance Expenses	\$516,058.00	\$70,472.97	\$375,437.43	\$140,620.57
11. Recipient Other Program Expenses (Salaries, Rent Utilities, Travel, Other)	\$253,848.00	\$23,375.21	\$186,693.65	\$67,154.35
12. Subtotal Recipient Program Expenses (Line 10 + Line 11)	\$769,906.00	\$93,848.18	\$562,131.08	\$207,774.92
13. Sub-Recipient Direct Client Assistance Expense	\$120,000.00	\$17,188.00	\$66,882.67	\$53,117.33
14. Sub-Recipient Other Program Expenses (Salaries, Rent, Utilities, Travel, Other)	\$0.00	\$0.00	\$0.00	\$0.00
15. Subtotal Sub-Recipient Program Expenses (Line 13 + Line 14)	\$120,000.00	\$17,188.00	\$66,882.67	\$53,117.33
16. Total Program Expense (Line 12 + Line 15)	\$889,906.00	\$111,036.18	\$629,013.75	\$260,892.25
17. Secondary Admin. Expense	\$0.00	\$0.00	\$0.00	\$0.00
18. Grand Total Expense (Line 8 + Line 16 + Line 17)	\$1,046,948.00	\$122,146.87	\$717,046.95	\$329,901.05
CASH POSITION				
1. Total grant funds received from DEO Y-T-D				\$719,954.44
2. Interest Income Received to Date				\$0.00
3. Program Income Received to Date				\$0.00
4. Amount of Reimbursement Requested (not to exceed undisbursed balance)				\$122,146.87
I certify that I am authorized to sign financial reports and the information provided herein is true and accurate to the best of my knowledge.				
Name (Please Type) :	Title :	Date :		
Deloris Johnson	Chief Executive Officer	7/13/2015		
Signature 				
Current Authority	\$904,761.00	Totals	Achieved This Month	Total Year to Date
Year-to-Date Disbursed	\$719,954.44	CSBG Dollars Expended This Month	\$122,146.87	\$717,046.95
Available Authority	\$184,806.56	# of Individuals Assisted with CSBG Dollars this Month	82	1061
Payment Number		# of Individuals Achieving Outcome in NPI 1.1 A-D	24	73
Payment Amount				
Approved				
Date				

Agency : Agricultural and Labor Program, Inc.


Version 4.0

Program : Community Services Block Grant Program (CSBG)

Community Services Block Grant Program (CSBG)

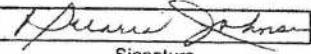
Contract # : 15SB-0D-07-63-08-001

MONTHLY FINANCIAL STATUS REPORT

Reporting Period:	July 2015-July 2015	Invoice #:	15SB00110	
TOTAL EXPENDITURES				
BUDGET CATEGORIES	Budget Allocation (A)	Current Month (B)	Total To Date (C)	Unexpended Balance (D) (A-C)
1. CSBG Grant Funds	\$1,046,948.00	\$91,884.45	\$808,931.40	\$238,016.60
2. Cash Match	\$0.00	\$0.00	\$0.00	\$0.00
3. In-Kind Match	\$0.00	\$0.00	\$0.00	\$0.00
4. Total Match (Line 2 + Line 3)	\$0.00	\$0.00	\$0.00	\$0.00
5. Total Funds (Line 1 + Line 4)	\$1,046,948.00	\$91,884.45	\$808,931.40	\$238,016.60
CSBG FUNDS ONLY BELOW THIS LINE (No Match Funds)				
ADMINISTRATIVE EXPENSES				
6. Recipient Administrative Expenses (Salaries, Rent, Utilities, Travel, Other)	\$157,042.00	\$64,526.29	\$152,559.49	\$4,482.51
7. Sub-Recipient Administrative Expenses (Salaries, Rent, Utilities, Travel, Other)	\$0.00	\$0.00	\$0.00	\$0.00
8. Total Administrative Expenses (Line 6 + Line 7)	\$157,042.00	\$64,526.29	\$152,559.49	\$4,482.51
9. Administrative Expense Percentage (Line 8 divided by Line 1)	15.00	Cannot Exceed 15% of CSBG Allocation		
Program Expenses				
10. Recipient Direct Client Assistance Expenses	\$516,058.00	\$10,936.83	\$386,374.26	\$129,683.74
11. Recipient Other Program Expenses (Salaries, Rent Utilities, Travel, Other)	\$253,848.00	\$13,661.33	\$200,354.98	\$53,493.02
12. Subtotal Recipient Program Expenses (Line 10 + Line 11)	\$769,906.00	\$24,598.16	\$586,729.24	\$183,176.76
13. Sub-Recipient Direct Client Assistance Expense	\$120,000.00	\$2,760.00	\$69,642.67	\$50,357.33
14. Sub-Recipient Other Program Expenses (Salaries, Rent, Utilities, Travel, Other)	\$0.00	\$0.00	\$0.00	\$0.00
15. Subtotal Sub-Recipient Program Expenses (Line 13 + Line 14)	\$120,000.00	\$2,760.00	\$69,642.67	\$50,357.33
16. Total Program Expense (Line 12 + Line 15)	\$889,906.00	\$27,358.16	\$656,371.91	\$233,534.09
17. Secondary Admin. Expense	\$0.00	\$0.00	\$0.00	\$0.00
18. Grand Total Expense (Line 8 + Line 16 + Line 17)	\$1,046,948.00	\$91,884.45	\$808,931.40	\$238,016.60
CASH POSITION				
1. Total grant funds received from DEO Y-T-D				\$842,101.31
2. Interest Income Received to Date				\$0.00
3. Program Income Received to Date				\$0.00
4. Amount of Reimbursement Requested (not to exceed undisbursed balance)				\$91,884.45
I certify that I am authorized to sign financial reports and the information provided herein is true and accurate to the best of my knowledge.				
Name (Please Type):	Title:	Date:		
Deloris Johnson	Chief Executive Officer	8/11/2015		
Signature 				
Current Authority	\$1,046,948.00	Totals	Achieved This Month	Total Year to Date
Year-to-Date Disbursed	\$842,101.31	CSBG Dollars Expended This Month	\$91,884.45	\$808,931.40
Available Authority	\$204,846.69			
Payment Number		# of Individuals Assisted with CSBG Dollars this Month	88	1149
Payment Amount		# of Individuals Achieving Outcome in NPI 1.1 A-D	19	92
Approved				
Date				

Recipient hereby certifies that it has been open and operating during its normal business hours for the month of July as described in Attachment F, Warranties and Representations, of the FY2015 CSBG Agreement.

Deloris Johnson
Printed Name


Signature

8/11/2015
Date

Agency : Agricultural and Labor Program, Inc.

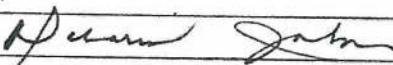
Version 4.0

Program : Community Services Block Grant Program (CSBG)

Community Services Block Grant Program (CSBG)

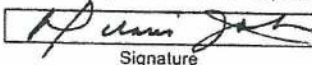
Contract # : 15SB-0D-07-63-08-001

MONTHLY FINANCIAL STATUS REPORT

Reporting Period:	August 2015- August 2015	Invoice #:	15SB00111	
TOTAL EXPENDITURES				
BUDGET CATEGORIES	Budget Allocation (A)	Current Month (B)	Total To Date (C)	Unexpended Balance (D) (A-C)
1. CSBG Grant Funds	\$1,046,948.00	\$114,057.08	\$922,988.48	\$123,959.52
2. Cash Match	\$0.00	\$0.00	\$0.00	\$0.00
3. In-Kind Match	\$0.00	\$0.00	\$0.00	\$0.00
4. Total Match (Line 2 + Line 3)	\$0.00	\$0.00	\$0.00	\$0.00
5. Total Funds (Line 1 + Line 4)	\$1,046,948.00	\$114,057.08	\$922,988.48	\$123,959.52
CSBG FUNDS ONLY BELOW THIS LINE (No Match Funds)				
ADMINISTRATIVE EXPENSES				
6. Recipient Administrative Expenses (Salaries, Rent, Utilities, Travel, Other)	\$157,042.00	(\$5,160.62)	\$147,398.87	\$9,643.13
7. Sub-Recipient Administrative Expenses (Salaries, Rent, Utilities, Travel, Other)	\$0.00	\$0.00	\$0.00	\$0.00
8. Total Administrative Expenses (Line 6 + Line 7)	\$157,042.00	(\$5,160.62)	\$147,398.87	\$9,643.13
9. Administrative Expense Percentage (Line 8 divided by Line 1)	15.00	Cannot Exceed 15% of CSBG Allocation		
Program Expenses				
10. Recipient Direct Client Assistance Expenses	\$516,058.00	\$61,652.42	\$448,026.68	\$68,031.32
11. Recipient Other Program Expenses (Salaries, Rent Utilities, Travel, Other)	\$253,848.00	\$39,643.78	\$239,998.76	\$13,849.24
12. Subtotal Recipient Program Expenses (Line 10 + Line 11)	\$769,906.00	\$101,296.20	\$688,025.44	\$81,880.56
13. Sub-Recipient Direct Client Assistance Expense	\$120,000.00	\$17,921.50	\$87,564.17	\$32,435.83
14. Sub-Recipient Other Program Expenses (Salaries, Rent, Utilities, Travel, Other)	\$0.00	\$0.00	\$0.00	\$0.00
15. Subtotal Sub-Recipient Program Expenses (Line 13 + Line 14)	\$120,000.00	\$17,921.50	\$87,564.17	\$32,435.83
16. Total Program Expense (Line 12 + Line 15)	\$889,906.00	\$119,217.70	\$775,589.61	\$114,316.39
17. Secondary Admin. Expense	\$0.00	\$0.00	\$0.00	\$0.00
18. Grand Total Expense (Line 8 + Line 16 + Line 17)	\$1,046,948.00	\$114,057.08	\$922,988.48	\$123,959.52
CASH POSITION				
1. Total grant funds received from DEO Y-T-D				\$933,985.76
2. Interest Income Received to Date				\$0.00
3. Program Income Received to Date				\$0.00
4. Amount of Reimbursement Requested (not to exceed undisbursed balance)				\$114,057.08
I certify that I am authorized to sign financial reports and the information provided herein is true and accurate to the best of my knowledge.				
Name (Please Type) :	Title :	Date :		
Deloris Johnson	Chief Executive Officer	9/11/2015		
Signature 				
Current Authority	\$1,046,948.00	Totals	Achieved This Month	Total Year to Date
Year-to-Date Disbursed	\$933,985.76	CSBG Dollars Expended This Month	\$114,057.08	\$922,988.48
Available Authority	\$112,962.24			
Payment Number		# of Individuals Assisted with CSBG Dollars this Month	85	1234
Payment Amount		# of Individuals Achieving Outcome in NPI 1.1 A-D	11	103
Approved				
Date				

Recipient hereby certifies that it has been open and operating during its normal business hours for the month of August, as described in Attachment F, Warranties and Representations, of the FY2015 CSBG Agreement.

Deloris Johnson
Printed Name


Signature

9/11/2015
Date

**CSBG QUARTERLY
FOCAS REPORT**

FY2014-2015 CSBG QUARTERLY FOCAS REPORT

DATE: 7/17/2015

GRANTEE: The Agricultural and Labor Program, Incorporated (ALPI)

AGREEMENT NUMBER: 15SB-0D-07-63-08-001

CONTACT: PaHoua Lee-Yang, CSBG/Economic Development Director

PHONE: (863) 956-3491, Ext. 218

EMAIL: pyang@aipi.org

Enter the date each report was generated:

STATE REPORTING DATA

Total unduplicated number of individuals assisted with CSBG funding only

Total unduplicated number of individuals achieving an outcome in Goal 1 (auto-populated)

Total amount of CSBG Funding allocated for the year

Total amount of CSBG Funding expended during each quarter (auto-populated)

1/15/2015	4/15/2015	7/17/2015	SFY 1st Quarter 01/01/15 - 03/31/15	TOTAL Year-to-Date
SFY 2nd Quarter 10/01/14 - 12/31/14	SFY 3rd Quarter 01/01/15 - 03/31/15	SFY 4th Quarter 01/01/15 - 03/31/15		
165	84	92		341
2,372	303	(47)	0	2,628
846,685	846,685	1,046,948		NA
194,474	231,147	273,223	0	698,844

AGREEMENT DELIVERABLES REPORT

A	B	C	D	E	F	G	H	I
		Units Expected To Be Achieved	Actual Year-to-Date Units Achieved	Actual Year-to-Date Percent Achvd	1st Quarter Units Achieved this Quarter	2nd Quarter Units Achieved this Quarter	3rd Quarter Units Achieved this Quarter	4th Quarter Units Achieved this Quarter
Total Number of Individuals Served		36,428	23,179	63.6%	9,133	13,749	297	
Total Number of Families Served		12,334	6,533	53.0%	2,730	1,563	2,240	

EXPENDITURES REPORT

A	B	C	D	E	F	G	H	I
		Units Expected To Be Achieved	Actual Year-to-Date Units Achieved	Actual Year-to-Date Percent Achvd	1st Quarter Units Achieved this Quarter	2nd Quarter Units Achieved this Quarter	3rd Quarter Units Achieved this Quarter	4th Quarter Units Achieved this Quarter
Table 1 Expenditures by Category								
A. Community Services Block Grant		1,046,948	698,844	66.6%	194,474	231,147	273,223	
B. Federal Government Resources other than CSBG		19,882,568	13,803,943	69.4%	7,685,513	2,997,105	3,121,325	
C. State Resources (Non-federal, state-appropriated funds)		868,837	1,335,792	153.7%	557,482	415,784	362,526	
D. Local Government Resources		374,599	50,847	16.0%	0	0	59,847	
E. Private Sector Resources		1,997,279	1,595,072	79.4%	85,525	15,549	1,463,998	
TOTAL NON-CSBG RESOURCES (Federal+State+Local Government+Private Sector)		22,123,283	16,764,664	75.8%	8,328,520	3,429,439	5,007,686	0
TOTAL CSBG Funds		1,046,948	698,844	66.6%	194,474	231,147	273,223	0
TOTAL AGENCY BUDGET		24,170,231	17,463,498	72.3%	8,522,994	3,660,585	5,280,919	0

OUTCOMES

NPI		Units Expected To Be Achieved	Actual Year-to-Date Units Achieved	Actual Year-to-Date Percent Achvd	1st Quarter Units Achieved this Quarter	2nd Quarter Units Achieved this Quarter	3rd Quarter Units Achieved this Quarter	4th Quarter Units Achieved this Quarter
1.1 Employment								
A. Unemployed and obtained a job		100	55	55.0%	13	28	14	
B. Employed and maintained a job for at least 90 days		15	38	253.3%	28	0	10	
C. Employed and obtained an increase in employment income and/or benefits		0	6	60.0%	0	6	0	
D. Achieved "living wage" employment and benefits		0			0	0	0	
1.2 Employment Supports								
A. Obtained skills/competencies required for employment		58	40	69.0%	8	25	7	
B. Completed ABE/GED and received certification or diploma		40	39	97.5%	2	37	0	
C. Completed post-secondary education program and obtained certificate or diploma		68	23	33.8%	2	8	13	
D. Enrolled children in before or after school programs		531	494	93.0%	482	1	11	
E. Obtained care for child or other dependent		839	938	111.8%	915	145	(122)	
F. Obtain access to reliable transportation and/or driver's license		10	4	40.0%	2	2	0	
G. Obtained health care services for themselves or a family member		951	831	87.4%	892	35	4	
H. Obtained and/or maintained safe and affordable housing		75	16	21.3%	9	2	5	
I. Obtained food assistance		50	25	50.0%	15	10	0	
J. Obtained non-emergency LIHEAP energy assistance		20	4	20.0%	2	2	0	
K. Obtained non-emergency WX energy assistance		0	4		0	0	4	
L. Obtained other non-emergency energy assistance (State/local/private energy programs. Do Not include LIHEAP or WX)		12	13	108.3%	4	3	6	
Other Obtained identification or work permit documentation for employment (social security card, work permit, etc.)		0			0	0	0	

EXPENDITURES REPORT									
1.3 Economic Asset Enhancement and Utilization									
Enhancement									
Units Expected To Be Achieved	Actual Year-to-Date Units Achieved	Actual Percent	1st Quarter Units Achieved this Quarter	2nd Quarter Units Achieved this Quarter	3rd Quarter Units Achieved this Quarter	4th Quarter Units Achieved this Quarter			
							Expected	Achieved	Percent
A. Participants in tax preparation programs who qualified for any type of Federal or State tax credit.									
			0	0	0	0			
B. Participants obtaining court-ordered child support payments.									
			0	0	0	0			
C. Number enrolled in telephone lifeline and/or energy discounts with agency assistance.									
			0	0	0	0			
Utilization									
D. Participants demonstrating ability to complete and maintain a budget for over 90 days									
50	6	12.0%	0	1	5				
E. Participants opening an Individual Development Account (IDA) or other savings account									
0			0	0	0	0			
F. Participants who increased their savings through IDA or other savings account									
0									
G. Number capitalizing a small business with accumulated savings									
0			0	0	0	0			
H. Number pursuing post-secondary education with savings									
0			0	0	0	0			
I. Number purchasing a home with accumulated savings									
0			0	0	0	0			
J. Number purchasing other assets with accumulated savings									
0			0	0	0	0			

2.1 Community Improvement and Revitalization									
A. Jobs created, or saved, from reduction or elimination in the community									
	Proj	Oppor	Achvd	%	Achvd	%	Proj	Oppor	Proj
B.	0	0					0	0	0
C. Accessible "living wage" jobs created, or saved from reduction or elimination in the community									
	0	0					0	0	0
D. Safe and affordable housing units created in the community									
	0	0					0	0	0
E. Safe, affordable housing units in the community preserved or improved through Community Action or advocacy									
	1	57	1	57	100.0%	100.0%	1	57	0
F. Accessible, safe and affordable health care services/facilities for low-income people created or saved.									
	0	0					0	0	0
G. Accessible, safe & affordable child care/child development placement opportunities created or saved.									
	2	8	2	16	100.0%	200.0%	2	16	0
H. Accessible before/after school program placement opportunities for low-income families created or saved.									
	5	504	5	494	100.0%	98.0%	5	494	0
I. Accessible new/preserved/expanded transportation resources available to low-income people (public/private)									
	0	0					0	0	0
J. Accessible new/preserved/increased educational and training placement opportunities for low-income people									
	1	20	1	10	100.0%	50.0%	1	0	0
2.2 Community Quality of Life and Assets									
	Proj	Oppor	Achvd	%	Achvd	%	Proj	Oppor	Proj
A.	0	0					0	0	0
B. Increase in community assets due to a change in law/regulation/policy, resulting in better quality of life									
	2	242	2	242	100.0%	100.0%	2	242	0
C. Increase availability/preservation of community facilities (schools, libraries, community centers, etc.)									
	0	0					0	0	0
D. Increase in the availability or preservation of community services to improve public health and safety									
	0	0					0	0	0
E. Increase in the availability or preservation of commercial services within low-income neighborhoods									
	0	0					0	0	0
F. Increase in or preservation of neighborhood quality-of-life resources									
	0	0					0	0	0
2.3 Community Engagement									
	Expected	Achieved		Percent		Achieved		Achieved	
A. Community members mobilized to participate in community revitalization and anti-poverty initiatives									
	111	107		96.4%		107		0	

Hours donated by low-income people									
B.	a)	Serve on the CAA Board of Directors	144	166	115.3%	64	46	56	
	b)	Serve on Head Start Policy Councils	609	252	41.4%	114	99	39	
	c)	Serve on Family Center / Parent Councils	0			0	0	0	
	d)	Serve on other CAA Advisory Boards, councils, or committees	468	310	66.2%	0	0	310	
	e)	Serve on other community advisory or governing boards or committees as a CAA representative	105	61	58.1%	18	27	16	
	f)	Assist with program activities and logistics	13,714	9,864	70.5%	2,670	6,994	0	
	g)	Participate in advocacy to meet agency and community goals	0			0	0	0	
	h)	Participate in advocacy to influence policies/practices of government and/or private entities	0			0	0	0	
	i)	Other CAA clients or low-income persons volunteer with the agency.	500	59	11.8%	0	0	59	
	Total volunteer hours from low income people			15,540	10,512	67.6%	2,865	7,166	480

Hours donated by <u>non</u> low-income people									
B.	2								
		a) General Public		0				0	0
		b) CAA non-low-income board members		316	258	81.6%	112	78	68
		c) Other non-profit or government agencies		0			0	0	0
		d) Business Community		97	59	60.8%	31	16	12
		e) Other (List on the Explanation tab)		0			0	0	0
		Total volunteer hours from non low-income people	413	317	143	94	80	0	
		Total number of volunteer hours donated to the agency	15,933	10,829	3,009	7,250	580	0	

EXPENDITURES REPORT							
	Units Expected To Be Achieved	Actual Year-to-Date Units Achieved	Actual Year-to-Date Percent Achvd	1st Quarter Units Achieved this Quarter	2nd Quarter Units Achieved this Quarter	3rd Quarter Units Achieved this Quarter	4th Quarter Units Achieved this Quarter

3.1 Community Enhancement through Maximum Feasible Participation									
A.	Total number of volunteer hours donated by LOW-INCOME INDIVIDUALS only to Community Action (auto-populated)			Percent	Achieved	Achieved	Achieved	Achieved	Achieved
	15,540			67.6%	10,512	2,865	7,165	480	0
3.2 Community Empowerment Through Maximum Feasible Participation									
A.	Low-income people in formal, decision-making, community organizations, government, boards or councils			Percent	Achieved	Achieved	Achieved	Achieved	Achieved
	130			97.7%	127	123	0	4	
B.	Number of low-income people acquiring businesses in their community as a result of Community Action					0	0	0	
	0					0	0	0	
C.	Number of low-income people purchasing their own home in their community as a result of Community Action								
	0								
D.	Low-income people in non-governance community activities/groups created/supported by Community Action								
	0					0	0	0	

4.1 Expanding Opportunities Through Community-Wide Partnerships									
A.	Non-Profit	# Orgs	# Parts	Achvd	%	# Orgs	# Parts	# Orgs	# Parts
		17	19	18	20	17	19	1	1
B.	Faith Based	7	7	7	7	100.0%	100.0%	7	7
C.	Local Government	3	3	3	3	100.0%	100.0%	3	3
D.	State Government Entity	7	7	7	7	100.0%	100.0%	7	7
E.	Federal Government Entity	2	2	2	2	100.0%	100.0%	2	2
F.	For-Profit Business or Corporation	242	242	242	242	100.0%	100.0%	242	242
G.	Consortiums/Collaboration	1	1	1	1	100.0%	100.0%	1	1
H.	Housing Consortiums/Collaboration	0	0					0	0
I.	School Districts	2	2	2	2	100.0%	100.0%	2	2
J.	Institutions of post secondary education/training	2	2	2	2	100.0%	100.0%	2	2
K.	Financial/Banking Institutions	3	3	4	4	133.3%	133.3%	3	3
L.	Health Service Institutions	9	9	9	9	100.0%	100.0%	9	9
M.	State-wide associations or collaborations	2	2	2	2	100.0%	100.0%	2	2
Others: Please identify:									
1)		0	0			0	0	0	0
2)		0	0			0	0	0	0
N.	Total unduplicated number of organizations agency actively works with to expand resources & opportunities	237	239	259	301	100.7%	100.7%	237	239

5.1 AGENCY DEVELOPMENT - Agency Increases Its Capacity to Achieve Results Through Training									
A.	Number of Certified Community Action Professionals	Expected	Achieved	Percent	Achieved	Achieved	Achieved	Achieved	Achieved
		0			0	0	0	0	0
B.	Number of Nationally Certified ROMA Trainers	2	2	100.0%	2	0	0	0	0
C.	Number of Family Development Certified Staff	0			0	0	0	0	0
D.	Number of Child Development Certified Staff	0			0	0	0	0	0
E.	Number of staff attending trainings	192	204	106.3%	167	13	24	24	24
F.	Number of board members attending trainings	18	18	100.0%	16	0	2	2	2
G.	Hours of staff in trainings	7,921	6,384	80.6%	1,420	3,609	1,355	1,355	1,355
H.	Hours of board members in training	366	372	101.6%	32	100	240	240	240

6.1 Independent Living									
A.	Senior Citizens (55 years old or older)	Expected	Achieved	Percent	Achieved	Achieved	Achieved	Achieved	Achieved
		19	31	163.16%	4	4	23	23	23
Individuals with Disabilities									
1.	Ages 0 - 17	0	10		1	7	2	2	0
2.	Ages 18 - 54	0			0	0	0	0	0
3.	Ages 55 and Over	19	4	21.05%	0	3	1	1	1
4.	Age Unknown	0	6	40.00%	1	4	1	1	1

EXPENDITURES REPORT															
6.2 Emergency Assistance		Units Expected To Be Achieved		Actual Year-to-Date Units Achieved		Actual Year-to-Date Percent Achvd		1st Quarter Units Achieved this Quarter		2nd Quarter Units Achieved this Quarter		3rd Quarter Units Achieved this Quarter		4th Quarter Units Achieved this Quarter	
		Expected		Achieved		Percent		Achieved	Achieved	Achieved	Achieved	Achieved	Achieved	Achieved	Achieved
A.	Emergency Food	75		61		81.3%		1	60			0			
B.	Emergency Fuel or Utility payments (including LIHEAP or other public or private funding source)	24,679		12,913		52.3%		5,284	3,096			4,533			
C.	Emergency Rent or Mortgage Assistance	252		336		133.3%		49	17			270			
D.	Emergency Car or Home Repair (i.e. structural, appliance, heating system, etc.)	0						0	0			0			
E.	Emergency Temporary Shelter	0						0	0			0			
F.	Emergency Medical Care	0						0	0			0			
G.	Emergency Protection from Violence	0						0	0			0			
H.	Emergency Legal Assistance	0						0	0			0			
I.	Emergency Transportation	0						0	0			0			
J.	Emergency Disaster Relief	0						0	0			0			
K.	Emergency Clothing	0						0	0			0			
Other Provide translation assistance in order for person to receive emergency services		0						0	0			0			
6.3 Child and Family Development		Expected		Achieved		Percent		Achieved	Achieved	Achieved	Achieved	Achieved	Achieved	Achieved	Achieved
Infants and Children		831		645		77.6%		611	33			1			
A.	Infants and children obtain age appropriate immunizations, medical and dental care	831		645		77.6%		611	33			1			
B.	Infants and children health and physical development are improved as a result of adequate nutrition	820		816		99.5%		776	5			35			
C.	Children participate in pre-school activities to develop school readiness skills	1,206		534		44.3%		424	4			106			
D.	Children participating in pre-school activities are developmentally ready for Kindergarten or 1st Grade	1,206		534		44.3%		424	4			106			
Youth		129		172		133.3%		59	0			113			
E.	Youth improve health and physical development	129		172		133.3%		59	0			113			
F.	Youth improve social/emotional development	129		172		133.3%		59	0			113			
G.	Youth avoid risk-taking behavior for a defined period of time	129		172		133.3%		59	0			113			
H.	Youth have reduced involvement with criminal justice system	129		172		133.3%		59	0			113			
I.	Youth increase academic, athletic or social skills by participating in before or after school programs	129		172		133.3%		59	0			113			
Adults		710		701		98.7%		30	671			0			
J.	Parents and other adults learn and exhibit improved parenting skills	710		701		98.7%		30	671			0			
K.	Parents and other adults learn and exhibit improved family functioning skills	710		701		98.7%		30	671			0			
6.4 Family Supports		Expected		Achieved		Percent		Achieved	Achieved	Achieved	Achieved	Achieved	Achieved	Achieved	Achieved
A.	Enrolled children in before or after school programs	0						0	0			0			
B.	Obtained care for child or other dependent	0		4				2	2			0			
C.	Obtained access to reliable transportation and/or driver's license	0		4				2	1			1			
D.	Obtained health care services for themselves or a family member	5		7		140.0%		1	4			2			
E.	Obtained safe and affordable housing	55		6		10.9%		0	2			4			
F.	Obtained food assistance	32		2		6.3%		1	1			0			
G.	Obtained non-emergency LIHEAP energy assistance	18,000		9,183		51.0%		4,274	2,077			2,832			
H.	Obtained non-emergency WX energy assistance	0						0	0			0			
I.	Obtained other non-emergency energy assistance (State/local/private energy program. Do NOT include LIHEAP or WX.)	0						0	0			0			
6.5 Service Counts		Expected		Achieved		Percent		Achieved	Achieved	Achieved	Achieved	Achieved	Achieved	Achieved	Achieved
A.	Food Boxes	0						0	0			0			
B.	Pounds of Food	0						0	0			0			
C.	Units of Clothing	0						0	0			0			
D.	Rides Provided	0						0	0			0			
E.	Information and Referral Calls	0						0	0			0			

**CSC MONTHLY
REIMBURSEMENT**

CHILDREN'S SERVICES COUNCIL OF ST. LUCIE COUNTY
MONTHLY REIMBURSEMENT REQUEST
FISCAL YEAR 2014/2015-OCTOBER 1, 2014 THRU SEPTEMBER 30, 2015

AGENCY NAME: ALPI

Date: September 8 , 2015

PROGRAM NAME: COMPUTER ASSISTED TUTORIAL

Report Period: August 2015

EXPENDITURES	Approved Budget	Actual Expense This Month	Actual Expense Year-to-Date	% of Budget Expended Year-to-Date
Salaries	51,510.00	3,766.34	47,040.23	91.32%
FICA	3,900.00	267.68	3,446.17	88.36%
Retirement			0.00	NO BUDGET
Life/ Health	6,321.48	544.67	5,812.57	91.95%
Workers Compensation	1,112.00	90.77	1,004.23	90.31%
Florida Unemployment	1,302.32		1,302.32	100.00%
Travel (Daily)			0.00	NO BUDGET
Travel/ Conferences/ Training			0.00	NO BUDGET
Office Supplies	400.00		0.00	0.00%
Telephone			0.00	NO BUDGET
Postage/Shipping	411.42	33.47	395.85	96.22%
Utilities			0.00	NO BUDGET
Occupancy (Building & Grounds)	12,000.00	1,000.00	11,000.00	91.67%
Printing & Publications			0.00	NO BUDGET
Subscriptions/Dues/Memberships			0.00	NO BUDGET
Insurance	1,272.68	105.61	1,167.07	91.70%
Equipment: Rental & Maintenance			0.00	NO BUDGET
Advertising			0.00	NO BUDGET
Equipment Purchases: Capital Expense			0.00	NO BUDGET
Professional Fees (Legal, Consulting)			0.00	NO BUDGET
Books/Educational Materials	1,523.63		0.00	0.00%
Food and Nutrition	589.00		0.00	0.00%
Administrative Costs	4,020.00	335.00	3,685.00	91.67%
Audit Expense	236.47		236.47	100.00%
Specific Assistance to Individuals			0.00	NO BUDGET
Other/Miscellaneous			0.00	NO BUDGET
Other/Contract			0.00	NO BUDGET
TOTAL	84,599.00	6,143.54	75,089.91	88.76%

EHEAP

**REQUEST FOR PAYMENT
EMERGENCY HOME ENERGY ASSISTANCE PROGRAM**

TRACTOR NAME, ADDRESS, PHONE# and FEID# THE AGRICULTURAL AND LABOR PROGRAM, INC 300 LYNCHBURG ROAD LAKE ALFRED, FL 33850-2576 (863) 956-3491 FEID # 59-1634148	TYPE OF REPORT : Advance Request _____ Reimbursement Request <u> X </u>	This Request Period <u>06/01/2015 - 06/30/2015</u> PSA # <u> 6 </u> Report # <u> 3 </u> Contract # <u> EH-15/16 - ALPI </u> Contract Period <u>04/01/2015 - 03/31/2016</u>
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CERTIFICATION: I hereby certify that this request to the best of my knowledge to be complete and correct and conforms with the terms of the above contract.

Prepared by:  Date: 7/2/15 Approved by:  Date: 7-2-15

PART A: BUDGET SUMMARY	ADMINISTRATION SERVICES	OUTREACH SERVICES	CRISIS SERVICES	WEATHER RELATED	ADMINISTRATION WEATHER RELATED	TOTAL
1. Approved Contract Amount	\$1,743.00	\$17,142.00	\$91,610.00	\$2,513.00	\$0.00	\$113,008.00
2. Previous Funds Received for Contract Period	\$221.13	\$2,337.71	\$16,431.30	\$0.00	\$0.00	\$18,990.14
3. Contract Balance (line 1 minus line 2)	\$1,521.87	\$14,804.29	\$75,178.70	\$2,513.00	\$0.00	\$94,017.86
4. Previous Funds Requested and Not Received for Contract Period	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5. Contract Balance (line 3 minus line 4)	\$1,521.87	\$14,804.29	\$75,178.70	\$2,513.00	\$0.00	\$94,017.86
PART B: CONTRACT FUNDS REQUEST						
1. Anticipated Cash Needs (1st - 2nd month, Attach Justification)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2. Net Expenditures For Month (DOEA Form 105P, Part B, Line 6)	\$147.17	\$1,472.77	\$6,639.57	\$0.00	\$0.00	\$8,259.51
3. TOTAL	\$147.17	\$1,472.77	\$6,639.57	\$0.00	\$0.00	\$8,259.51
PART C: NET FUNDS REQUESTED						
1. Less Advance Applied	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2. TOTAL FUNDS REQUESTED (Part B, Line 3 minus Part C, Line 1)	\$147.17	\$1,472.77	\$6,639.57	\$0.00	\$0.00	\$8,259.51

PART D: SERVICE INFORMATION

Number of individuals (units) served with crisis energy assistance during the report month: _____



24

Certification statement: Contractor hereby certifies that it has been open and operating during its normal business hours for the reporting month, as described in the Statement of Work section, of the EHEAP contract.

**RECEIPTS AND EXPENDITURE REPORT
EMERGENCY HOME ENERGY ASSISTANCE PROGRAM**

PROVIDER NAME, ADDRESS, PHONE# AND FEID# THE AGRICULTURAL AND LABOR PROGRAM, INC 300 LYNCHBURG ROAD LAKE ALFRED, FL 33850-2576 (863) 956-3491 FEID # 59-1634148	Program Funding Source : EHEAP (Emergency Home Energy Assistance for the Elderly Program)	THIS REPORT PERIOD FROM: 06/01/2015 TO: 06/30/2015 CONTRACT 4/1/2015 PERIOD: 3/31/2016 CONTRACT # EH-15/16-ALPI REPORT # 3 PSA# 6
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CERTIFICATION : I certify to the best of my knowledge and belief that this report is complete and all outlays herein are for purposes set forth in the contract.

Prepared by :  Date: 7/2/15
 Approved by :  Date: 7-2-15

PART A : BUDGETED INCOME/ RECEIPTS	1. Approved Budget	2. Actual Receipts For This Report	3. Total Receipts Year to Date	4. Percent of Approved Budget
1. Agreement Amount	\$113,008.00	\$18,990.14	\$18,990.14	16.80%
2. Interest on Agreement Funds	\$0.00	\$0.00	\$0.00	0.00%
3. TOTAL AGREEMENT AMOUNT	\$113,008.00	\$18,990.14	\$18,990.14	16.80%

PART B : EXPENDITURES	1. Approved Budget	2. Expenditures For This Report	3. Expenditures Year to Date	4. Percent of Approved Budget
1. Administration	\$1,743.00	\$147.17	\$368.30	21.13%
2. Outreach	\$17,142.00	\$1,472.77	\$3,810.48	22.23%
3. Crisis Services	\$91,610.00	\$6,639.57	\$23,070.87	25.18%
4. Weather Related Services	\$2,513.00	\$0.00	\$0.00	0.00%
5. Weather Related Administration	\$0.00	\$0.00	\$0.00	0.00%
6. TOTAL EXPENDITURES	\$113,008.00	\$8,259.51	\$27,249.65	24.11%

EHEAP EXPENDITURE SUMMARY

Provider: ALPI

Report Period: 06/1/2015 - 06/30/2015

Budget Category	Line Item	Description	Ck #, D.D., EFT	Amount
Administration	50000 SALARIES Fringe & Indirect	Burnham, Cheryl	DD	\$ 147.17
TOTAL ADMINISTRATION				\$ 147.17
Outreach	50000 SALARIES Fringe & Indirect	Burnham, Cheryl	DD	\$ 220.67
		Cantara, Timothy	DD	\$ 126.81
		Creech, Michelle	DD	\$ 351.61
		Ferguson, Betty	DD	\$ 82.81
		Leonard, Alice	DD	\$ 316.49
	53000 OFFICE SUPPLIES		CK	\$ 355.36
	53500 UTILITIES		CK	\$ 6.13
	53600 TELEPHONE		CK	\$ 1.48
	53700 DATA COMMUNICATION		CK	\$ 4.94
	53800 POSTAGE		CK	\$ 6.47
TOTAL OUTREACH				\$ 1,472.77

Contract # EH-15/16-ALPI
Report # 3

Report # 31

**REQUEST FOR PAYMENT
EMERGENCY HOME ENERGY ASSISTANCE PROGRAM**

FACTOR NAME, ADDRESS, PHONE# and FEID# IE AGRICULTURAL AND LABOR PROGRAM, INC 0 LYNCHBURG ROAD KE ALFRED, FL 33850-2576 33) 956-3491 ID # 59-1634148	TYPE OF REPORT : Advance Request _____ Reimbursement Request <u> X </u>	This Request Period <u>07/01/2015 - 07/31/2015</u> PSA # <u>6</u> Report # <u>4</u> Contract # <u>EH-15/16 - ALPI</u> Contract Period <u>04/01/2015 - 03/31/2016</u>
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RTIFICATION: I hereby certify that this request to the best of my knowledge to be complete and correct and conforms with the terms of the above contract.

Prepared by: *[Signature]* Date: 8/6/15 Approved by: *[Signature]* Date: 8-6-15

RT A: BUDGET SUMMARY	ADMINISTRATION SERVICES	OUTREACH SERVICES	CRISIS SERVICES	WEATHER RELATED	ADMINISTRATION WEATHER RELATED	TOTAL
Approved Contract Amount	\$1,743.00	\$17,142.00	\$91,610.00	\$2,513.00	\$0.00	\$113,008.00
Previous Funds Received for Contract Period	\$221.13	\$2,337.71	\$16,431.30	\$0.00	\$0.00	\$18,990.14
Contract Balance (line 1 minus line 2)	\$1,521.87	\$14,804.29	\$75,178.70	\$2,513.00	\$0.00	\$94,017.86
Previous Funds Requested and Not Received for Contract Period	\$147.17	\$1,472.77	\$6,639.57	\$0.00	\$0.00	\$8,259.51
Contract Balance (line 3 minus line 4)	\$1,374.70	\$13,331.52	\$68,539.13	\$2,513.00	\$0.00	\$85,758.35
3: CONTRACT FUNDS REQUEST						
Anticipated Cash Needs (1st - 2nd month, Attach Justification)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Net Expenditures For Month (DOEA Form 105P, Part B, Line 6)	\$147.08	\$1,915.78	\$5,771.65	\$0.00	\$0.00	\$7,834.51
TOTAL	\$147.08	\$1,915.78	\$5,771.65	\$0.00	\$0.00	\$7,834.51
RT C: NET FUNDS REQUESTED						
Less Advance Applied	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
TOTAL FUNDS REQUESTED (Part B, Line 3 minus Part C, Line 1)	\$147.08	\$1,915.78	\$5,771.65	\$0.00	\$0.00	\$7,834.51

RT D: SERVICE INFORMATION

Number of individuals (units) served with crisis energy assistance during the report month: _____



22

Justification statement: Contractor hereby certifies that it has been open and operating during its normal business hours for the reporting month, as described in the Statement of Work section, of the EHEAP contract.

**RECEIPTS AND EXPENDITURE REPORT
EMERGENCY HOME ENERGY ASSISTANCE PROGRAM**

PROVIDER NAME, ADDRESS, PHONE# AND FEID# THE AGRICULTURAL AND LABOR PROGRAM, INC 300 LYNCHBURG ROAD LAKE ALFRED, FL 33850-2576 (863) 956-3491 FEID # 59-1634148	Program Funding Source : EHEAP (Emergency Home Energy Assistance for the Elderly Program)	THIS REPORT PERIOD FROM: 07/01/2015 TO: 07/31/2015 CONTRACT PERIOD: 4/1/2015 3/31/2016 CONTRACT # EH-15/16-ALPI REPORT # 4 PSA# 6
--	--	---

CERTIFICATION : I certify to the best of my knowledge and belief that this report is complete and all outlays herein are for purposes set forth in the contract.

Prepared by:  Date: 8/6/15
 Approved by:  Date: 8-6-15

PART A : BUDGETED INCOME/ RECEIPTS	1. Approved Budget	2. Actual Receipts For This Report	3. Total Receipts Year to Date	4. Percent of Approved Budget
1. Agreement Amount	\$113,008.00	\$18,990.14	\$18,990.14	16.80%
2. Interest on Agreement Funds	\$0.00	\$0.00	\$0.00	0.00%
3. TOTAL AGREEMENT AMOUNT	\$113,008.00	\$18,990.14	\$18,990.14	16.80%

PART B : EXPENDITURES	1. Approved Budget	2. Expenditures For This Report	3. Expenditures Year to Date	4. Percent of Approved Budget
1. Administration	\$1,743.00	\$147.08	\$515.38	29.57%
2. Outreach	\$17,142.00	\$1,915.78	\$5,726.26	33.40%
3. Crisis Services	\$91,610.00	\$5,771.65	\$28,842.52	31.48%
4. Weather Related Services	\$2,513.00	\$0.00	\$0.00	0.00%
5. Weather Related Administration	\$0.00	\$0.00	\$0.00	0.00%
6. TOTAL EXPENDITURES	\$113,008.00	\$7,834.51	\$35,084.16	31.05%

EHEAP EXPENDITURE SUMMARY

Provider: ALPI

Report Period: 07/01/2015 - 07/31/2015

Budget Category	Line Item	Description	Ck #, D.D., EFT	Amount
Administration	50000 SALARIES Fringe	EHEAP Director	DD	\$ 66.80
	50500 FRINGE			\$ 40.67
	52000 DIRECT FRINGE W/C			\$ 1.56
	52300 TRAVEL			\$ 8.29
	59700 INDIRECT			\$ 29.76
TOTAL ADMINISTRATION				\$ 147.08
Outreach	50000 SALARIES Fringe & Indirect	Burnham, Cheryl	DD	\$ 205.84
		Cantara, Timothy	DD	\$ 127.80
		Creech, Michelle	DD	\$ 393.61
		Ferguson, Betty	DD	\$ 105.93
		Leonard, Alice	DD	\$ 305.07
	52000 DIRECT FRINGE W/C		CK	\$ 12.90
	52300 TRAVEL		CK	\$ 12.44
	52900 PRINTING		CK	\$ 274.25
	53000 OFFICE SUPPLIES		CK	\$ 140.34
	53500 UTILITIES		CK	\$ 7.39
	53600 TELEPHONE		CK	\$ 133.19
	53700 DATA COMMUNICATIONS		CK	\$ 176.43
	53800 POSTAGE		CK	\$ 6.28
	55500 BUILDING MAINTENANCE		CK	\$ 14.31
TOTAL OUTREACH				\$ 1,915.78

Contract # EH-15/16 - ALPI
Report # 4

41

41

**REQUEST FOR PAYMENT
EMERGENCY HOME ENERGY ASSISTANCE PROGRAM**

TRACTOR NAME, ADDRESS, PHONE# and FEID# E AGRICULTURAL AND LABOR PROGRAM, INC LYNCHBURG ROAD KE ALFRED, FL 33850-2576 (3) 956-3491 D # 59-1634148	TYPE OF REPORT : Advance Request _____ Reimbursement Request <u> X </u>	This Request Period <u>08/01/2015 - 08/31/2015</u> PSA # <u> 6 </u> Report # <u> 5 </u> Contract # <u> EH-15/16 - ALPI </u> Contract Period <u>04/01/2015 - 03/31/2016</u>
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JUSTIFICATION: I hereby certify that this request to the best of my knowledge to be complete and correct and conforms with the terms of the above contract.

Prepared by: *Ref Burden* Date: 9/1/15 Approved by: *Priscilla Jones* Date: 9-1-15

RT A: BUDGET SUMMARY	ADMINISTRATION SERVICES	OUTREACH SERVICES	CRISIS SERVICES	WEATHER RELATED	ADMINISTRATION WEATHER RELATED	TOTAL
Approved Contract Amount	\$1,743.00	\$17,142.00	\$91,610.00	\$2,513.00	\$0.00	\$113,008.00
Previous Funds Received for Contract Period	\$368.27	\$3,810.48	\$23,070.87	\$0.00	\$0.00	\$27,249.62
Contract Balance (line 1 minus line 2)	\$1,374.73	\$13,331.52	\$68,539.13	\$2,513.00	\$0.00	\$85,758.38
Previous Funds Requested and Not Received for Contract Period	\$147.08	\$1,915.78	\$5,771.65	\$0.00	\$0.00	\$7,834.51
Contract Balance (line 3 minus line 4)	\$1,227.65	\$11,415.74	\$62,767.48	\$2,513.00	\$0.00	\$77,923.87
RT B: CONTRACT FUNDS REQUEST						
Anticipated Cash Needs (1st - 2nd month, Attach Justification)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Net Expenditures For Month (DOEA Form 105P, Part B, Line 6)	\$142.83	\$1,371.20	\$3,981.55	\$0.00	\$0.00	\$5,495.58
TOTAL	\$142.83	\$1,371.20	\$3,981.55	\$0.00	\$0.00	\$5,495.58
RT C: NET FUNDS REQUESTED						
Less Advance Applied	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
TOTAL FUNDS REQUESTED (Part B, Line 3 minus Part C, Line 1)	\$142.83	\$1,371.20	\$3,981.55	\$0.00	\$0.00	\$5,495.58

RT D: SERVICE INFORMATION

Number of individuals (units) served with crisis energy assistance during the report month:

17

Justification statement: Contractor hereby certifies that it has been open and operating during its normal business hours for the reporting month, as described in the Statement of Work section, of the EHEAP contract.

**RECEIPTS AND EXPENDITURE REPORT
EMERGENCY HOME ENERGY ASSISTANCE PROGRAM**

PROVIDER NAME, ADDRESS, PHONE# AND FEID# THE AGRICULTURAL AND LABOR PROGRAM, INC 300 LYNCHBURG ROAD LAKE ALFRED, FL 33850-2576 (863) 956-3491 FEID # 59-1634148	Program Funding Source : EHEAP (Emergency Home Energy Assistance for the Elderly Program)	THIS REPORT PERIOD FROM: 08/01/2015 TO: 08/31/2015 CONTRACT 4/1/2015 PERIOD: 3/31/2016 CONTRACT # EH-15/16-ALPI REPORT # 5 PSA# 6
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CERTIFICATION : I certify to the best of my knowledge and belief that this report is complete and all outlays herein are for purposes set forth in the contract.

Prepared by:  Date: 9/1/15 Approved by:  Date: 9-1-15

PART A : BUDGETED INCOME/ RECEIPTS	1. Approved Budget	2. Actual Receipts For This Report	3. Total Receipts Year to Date	4. Percent of Approved Budget
1. Agreement Amount	\$113,008.00	\$27,249.62	\$27,249.62	24.11%
2. Interest on Agreement Funds	\$0.00	\$0.00	\$0.00	0.00%
3. TOTAL AGREEMENT AMOUNT	\$113,008.00	\$27,249.62	\$27,249.62	24.11%

PART B : EXPENDITURES	1. Approved Budget	2. Expenditures For This Report	3. Expenditures Year to Date	4. Percent of Approved Budget
1. Administration	\$1,743.00	\$142.83	\$658.21	37.76%
2. Outreach	\$17,142.00	\$1,371.20	\$7,097.46	41.40%
3. Crisis Services	\$91,610.00	\$3,981.55	\$32,824.07	35.83%
4. Weather Related Services	\$2,513.00	\$0.00	\$0.00	0.00%
5. Weather Related Administration	\$0.00	\$0.00	\$0.00	0.00%
6. TOTAL EXPENDITURES	\$113,008.00	\$5,495.58	\$40,579.74	35.91%

EHEAP EXPENDITURE SUMMARY

Provider: ALPI

Report Period: 08/01/2015 - 08/31/2015

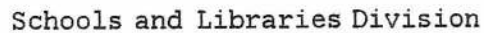
Budget Category	Line Item	Description	Ck #, D.D., EFT	Amount
Administration	50000 SALARIES Fringe	EHEAP Director	DD	\$ 96.88
	50500 FRINGE			\$ 20.67
	52000 DIRECT FRINGE W/C			\$ 2.40
	52300 TRAVEL			\$ 4.64
	59700 INDIRECT			\$ 18.24
	TOTAL ADMINISTRATION			\$ 142.83
Outreach	50000 SALARIES Fringe & Indirect	Burnham, Cheryl	DD	\$ 207.16
		Cantara, Timothy	DD	\$ 111.08
		Creech, Michelle	DD	\$ 385.70
		Ferguson, Betty	DD	\$ 112.21
		Leonard, Alice	DD	\$ 390.91
	52000 DIRECT FRINGE W/C		CK	\$ 21.02
	52300 TRAVEL		CK	\$ 6.96
	52900 PRINTING		CK	\$ 3.08
	53000 OFFICE SUPPLIES		CK	\$ 13.27
	53500 UTILITIES		CK	\$ 4.18
	53600 TELEPHONE		CK	\$ 70.85
	53700 DATA COMMUNICATIONS		CK	\$ 31.03
	53800 POSTAGE		CK	\$ 13.76
	TOTAL OUTREACH			\$ 1,371.20

Contract # EH-15/16 - ALPI
Report # 5

AGENCY: ALPI

[illegible]

E-RATE REIMBURSEMENT



June 24, 2015

Re: Invoice Number - as assigned by USAC: 2196341
Service Provider Identification Number: 143001435
Reimbursement Form Number: 2015 VERIZON June (Final)
Billed Entity Number: 16045101

Preferred Mode of Contact: E-mail at mcrespo@alpi.org
Total Amount of Reimbursement Approved for Payment: \$986.87

In certain instances, a line may not have been paid. Review the BEAR Letter Applicant Reimbursement Report (Report) following this letter for the reason(s) this may have occurred. For more information about lines that have not been paid, see the explanation of Invoice Error Codes in Step 9 on our website. Work with the applicant (your customer) to correct any errors. Once corrected, your customer may submit a new BEAR to request reimbursement for any unpaid lines.

Pursuant to the Federal Communication Commission's (FCC) Second Report and Order and Further Notice of Proposed Rulemaking (FCC 03-101, released April 29, 2003), you must remit the amount shown as "Total Amount of Reimbursement Approved for Payment" above to your customer no later than 20 days after receipt of payment of the approved discounts from USAC. You also agreed not to tender or make use of the payment of the approved discounts issued by USAC to you prior to remitting the discount to your customer (See BEAR Form, Block 4, Service Provider Acknowledgment).

Schools and Libraries Division - Correspondence Unit
30 Lanidex Plaza West, PO Box 685, Parsippany, NJ 07054-0685
Visit us online at: www.usac.org/sl

The maximum remaining amount available for each Funding Request Number (FRN) listed on the Report will be the original commitment less the amount approved herein for reimbursement and less any earlier disbursements to your customer.

PLEASE NOTE: The type of invoice form (BEAR or SPI) for the funding year is established by the receipt and approval of the first invoice submitted for the FRN for the funding year. For example, if we successfully process a BEAR for an FRN, we will not approve a SPI for that same FRN at a later time.

Please see the Guide to Letter Reports posted on our website for an explanation of the items listed in the attached Report.

COMPLETE PROGRAM INFORMATION is posted on our website. You may also contact our Client Service Bureau using the "Submit a Question" link on our website, toll-free by fax at 1-888-276-8736 or toll-free by phone at 1-888-203-8100.

Schools and Libraries Division
Universal Service Administrative Company

CC: THE AGRICULTURAL AND LABOR PROGRAM, INC.

BEAR NOTIFICATION LETTER APPLICANT REIMBURSEMENT REPORT

Form 471 Application Number: 988151
Funding Request Number: 2699001
Funding Year 2014: 07/01/2014 - 06/30/2015
Contract Number: MTM
Funding Commitment Decision: \$12195.79
Reimbursement Amount for this FRN: \$986.87





Universal Service Administrative Company

Schools and Libraries Division

Form 472 (BEAR) Notification Letter

June 26, 2015

Donald Landin
Fort Pierce Utilities Authority
206 S. 6th St.
Fort Pierce, FL 34950

Re: Invoice Number - as assigned by USAC: 2196344
Service Provider Identification Number: 143024173
Reimbursement Form Number: 2015 FPUA May/Jun (Final)
Billed Entity Number: 16045101

Maria Crespo
THE AGRICULTURAL AND LABOR PROGRAM, INC.
300 LYNCHBURG ROAD
LAKE AFRED, FL 33850

Preferred Mode of Contact: E-mail at mcrespo@alpi.org
Total Amount of Reimbursement Approved for Payment: \$658.91

This letter is your notification that the Schools and Libraries Division (SLD) of the Universal Service Administrative Company (USAC) has processed an FCC Form 472, "Billed Entity Applicant Reimbursement (BEAR)" Form from the above named applicant listing you as the service provider. USAC has committed to reimburse the discounted portion of the cost of eligible services provided to eligible entities pursuant to one or more FCC Forms 471, "Description of Services Ordered and Certification Form".

In certain instances, a line may not have been paid. Review the BEAR Letter Applicant Reimbursement Report (Report) following this letter for the reason(s) this may have occurred. For more information about lines that have not been paid, see the explanation of Invoice Error Codes in Step 9 on our website. Work with the applicant (your customer) to correct any errors. Once corrected, your customer may submit a new BEAR to request reimbursement for any unpaid lines.

We recommend using the BEAR Online tool from the Apply Online area or Required Forms section of our website for additional submissions. If a new BEAR cannot be submitted before the invoice deadline passes, you or your customer may submit a request for a deadline extension. (See "Invoice Deadlines and Extension Requests" posted in the SLD section of our website for more information.)

Pursuant to the Federal Communication Commission's (FCC) Second Report and Order and Further Notice of Proposed Rulemaking (FCC 03-101, released April 29, 2003), you must remit the amount shown as "Total Amount of Reimbursement Approved for Payment" above to your customer no later than 20 days after receipt of payment of the approved discounts from USAC. You also agreed not to tender or make use of the payment of the approved discounts issued by USAC to you prior to remitting the discount to your customer (See BEAR Form, Block 4, Service Provider Acknowledgment).

The USAC check should be mailed to the service provider named above within 20 days of the date of this letter.

Schools and Libraries Division - Correspondence Unit
30 Lanidex Plaza West, PO Box 685, Parsippany, NJ 07054-0685
Visit us online at: www.usac.org/sl

The maximum remaining amount available for each Funding Request Number (FRN) listed on the Report will be the original commitment less the amount approved herein for reimbursement and less any earlier disbursements to your customer.

PLEASE NOTE: The type of invoice form (BEAR or SPI) for the funding year is established by the receipt and approval of the first invoice submitted for the FRN for the funding year. For example, if we successfully process a BEAR for an FRN, we will not approve a SPI for that same FRN at a later time.

Please see the Guide to Letter Reports posted on our website for an explanation of the items listed in the attached Report.

COMPLETE PROGRAM INFORMATION is posted on our website. You may also contact our Client Service Bureau using the "Submit a Question" link on our website, toll-free by fax at 1-888-276-8736 or toll-free by phone at 1-888-203-8100.

Schools and Libraries Division
Universal Service Administrative Company

CC: THE AGRICULTURAL AND LABOR PROGRAM, INC.

BEAR NOTIFICATION LETTER APPLICANT REIMBURSEMENT REPORT



Form 471 Application Number: 988151
Funding Request Number: 2701505
Funding Year 2014: 07/01/2014 - 06/30/2015
Contract Number: MTM
Funding Commitment Decision: \$4428.00
Reimbursement Amount for this FRN: \$658.91
Reimbursement Request Decision Explanation:
 Partial Paymnt, Inv > Remaining Commitment;



Schools and Libraries Division

**Quarterly E-Rate Payment Authorization Report
(2nd Quarter 2015)**

June 30, 2015

Deloris Johnson
THE AGRICULTURAL AND LABOR PROGRAM, INC.
300 Lynchburg Road
Lake Alfred, FL 33850

Re: Billed Entity Number 16045101

Enclosed you will find your Quarterly E-Rate Payment Authorization Report (Report) reflecting payment activity under the program for your billed entity for the period of April 1, 2015 through June 30, 2015.

This report is issued each quarter to provide you with timely information and reflects the invoice payment authorization activity related to all E-Rate fund years for your billed entity. You may expect your next Report in early October 2015 for the 3rd quarter 2015 payment authorization activity. The payment authorizations are a direct result of invoices submitted by your service provider(s) [FCC Form 474, Service Provider Invoice (SPI) Form] and/or invoices submitted on behalf of your billed entity [FCC Form 472, Billed Entity Applicant Reimbursement (BEAR) Form].

Please take the time to review this report and ensure the payment authorization activity is accurate. We want to be sure that you are receiving services and discounts for which payments have been authorized. If you have not received reimbursement from your service provider on an approved BEAR payment and more than 30 days has passed since the service provider was paid by USAC, please contact your service provider. In addition, you may report it using "Submit a Question" on our website. Please provide the following information:

Applicant Name
Form 471 Application Number
Service Provider Name
Service Provider Identification Number (SPIN)
Funding Request Number (FRN)
Amount of payment
Your name and contact information

Schools and Libraries Division
Universal Service Administrative Company

Enclosure

Schools and Libraries Division - Correspondence Unit
30 Lanidex Plaza West, PO Box 685, Parsippany, NJ 07054-0685
Visit us online at: www.usac.org/sl

USAC Schools and Libraries
E-Rate Quarterly Disbursements
Authorization Report

Period: 04/01/2015 - 06/30/2015

Billed Entity Number: 16045101

Billed Entity Name: THE AGRICULTURAL AND LABOR PROGRAM, INC.

Funding Year	APPL #	FRN #	FRN		Service Provider Name	Disbursement Authorization Date	Authorized Disbursements	
			Committed Amount	Authorized Disbursements To Date			SPI	BEAR
07/01/2014-06/30/2015	988151	26976	\$79,753.46	\$79,749.53	143004824 BellSouth Telecommunica	04/20/2015		\$7,114.50
						05/28/2015		\$7,242.81
						06/04/2015		\$2,529.00
					SPIN Total			\$16,886.31
	26990	41	\$12,195.79	\$11,786.66	143001435 Verizon Florida LLC.	04/23/2015		\$976.34
						05/28/2015		\$1,000.71
						06/04/2015		\$1,003.68
						06/18/2015		\$986.87
					SPIN Total			\$3,967.60
	26993	42	\$12,464.39	\$9,863.74	143016611 Bright House Networks,	05/11/2015		\$976.46
						05/14/2015		\$878.94
						05/28/2015		\$971.96
					SPIN Total			\$2,827.36
	27010	43	\$8,873.60	\$7,223.04	143003990 Comcast Business Commun	04/20/2015		\$666.14
						06/04/2015		\$661.50
						06/11/2015		\$487.86
					SPIN Total			\$1,815.50
	27015	45	\$4,428.00	\$4,428.00	143024173 Fort Pierce Utilities A	04/20/2015		\$374.39
						04/20/2015		\$380.46
						06/22/2015		\$658.91
					SPIN Total			\$1,413.76
	27808	49	\$5,683.39	\$4,975.37	143000677 Verizon Wireless (Cellc	05/18/2015		\$3,003.53
						06/15/2015		\$945.00
						06/15/2015		\$1,026.84
					SPIN Total			\$4,975.37
					Application Total			\$31,885.90
					Total Fund Year Applications			\$31,885.90
					Total Applications All Fund Years			\$31,885.90

Disbursement Authorization Date: Data SLD authorized disbursement unit to disburse funds.

SPI: Service Provider Invoice; payments authorized based on this form.

BEAR: Billed Entity Applicant Reimbursement Form; payments authorized based on this form.

OTHER REPORTS

**ADVISORY COUNCILS'
MEETING REPORTS**

COUNCIL/COMMITTEE MEETING REPORT FORM

INSTRUCTIONS: Complete and submit to the Board Secretary after reporting to the full Board.

Central Region Advisory Council
COUNCIL/COMMITTEE

August 12, 2015
DATE

Type of Report

- ☒ X Reporting/Updating
☐ Recommending Board Action
☐ Recommending Policy Changes

- I. **CALL TO ORDER:** The Meeting was called to order @ 5:38 p.m. by Chairperson Johnnie McNair.
- II. **MISSION STATEMENT:** Recited in unison
- III. **A MOMENT OF SILENCE**
- IV. **ROLL CALL:** See Attendance Roster
- V. **SECRETARY'S REPORT:** (March 2015 Minutes)
Elizabeth Scafe moved to accept the minutes as presented. Clarence Grier seconded. Motion carried.
- VI. **BOARD REPRESENTATIVE REPORT**
 - Ruby Willix did not attend. Josephine Howard reported in her place.
- VII. **NEW BUSINESS**
 - **2015 Annual Corporate Meeting**
 - **Location:** Winter Haven Senior Center (secured)
 - **Keynote Speaker** - Derrick Feacher/WH City Manager (Glenda Jones has made contact)
 - **Annual Meeting Theme:** Building the Future Together, Putting Families and Children First
 - **Caterer(s) to check on :** Especially for You- Shayanne Jones- Bartow/Patricia Gamble will provide name of another vendor.
 - **2015 Arabell Wiggins Scholarship Award-** No recipients, no applications completed (Status update by Ruby Willix)
 - **Recommendations for 2016 Agency's Community Service Award** - Rev. Christopher Darby
 - **One Goal Summer Conference Report** – Josephine Howard reporting on attendance.
- VIII. **Old Business**
 - **Corporate Membership Roster (Revisions)**
 - **Feedback re: ALPI Family Picnic**
It was excellent! Well attended! Great food!
- IX. **Other Business**
 - LIHEAP Energy Fair will be held at First Baptist Church at the Mall in Lakeland on August 13th from 10:00 am – 3:00 pm. Volunteers welcome—(Johnnie McNair)
 - Glenda Jones – paid \$30.00 (via check) towards Arabell Wiggins Scholarship.
 - Lillie Jackson moved to accept Jacqueline Rentz to the CRAC. Clarence Grier seconded. Motion carried.
- X. **ADJOURNMENT**
The meeting adjourned at 7:15 p.m.

Brief Background information and possible impact of issue/area (i.e.: Why is it an issue? Will funding, staff utilization, services and/or facility changes be necessary?)
N/A

Recommendation for Board Action, if any (State in the form of a motion(s) to be acted upon by the full Board).
N/A



The Agricultural and Labor Program, Inc.
2014-2015 CRAC Attendance Roster
 (Scheduled Meetings: October, March, May, August)

Council Member	Oct 2014 Annual Corporate Membership Meeting	Jan 2015 Agency's 47 th Annual Mtg	Feb Agency's Shared Gov. Orientation	Mar	May	Aug	Sept Special Events Planning Meeting
Louvenia Crumity	P		E	E	P	P	
Earnestine Davis	E	P	E	P	P	E	
John Doles	P		A	P	P	E	
Clora Dubose	P		P	P	P	P	
Patricia Gamble	P		E	P	P	P	
Clarence Grier	P		P	P	P	P	
Josephine Howard	E	P	P	P	E	P	
Hollis Jackson	E		P	P	P	A	
Lillie Jackson	E		A	A	P	P	
Glenda Jones	P	P	P	P	P	P	
Annie Larkins	P	P	P	P	P	P	
Johnnie McNair	P	P	P	P	P	P	
Helen Rowe	P		P	P	P	A	
Elizabeth Scaife	P		A	P	P	P	
Margaree Simon	E	P	P	E	P	P	
Dorothy Spencer	P		P	P	P	P	
Lydia Thomas	P		E	P	P	P	
Ruby Willix	P	P	P	P	P	P	
Total Present	13		11	15	17	14	

P = Present

E = Excused

A = Absent



EASTERN REGION COUNCIL/COMMITTEE MEETING REPORT FORM

INSTRUCTIONS: Complete and submit to the Board Secretary after reporting to the full Board.

Eastern Region Advisory Council
COUNCIL/COMMITTEE

August 17, 2015
DATE

Members Present/Absent: Attach Meeting Attendance Roster

Type of Report

 X Reporting/Updating
 Recommending Board Action
 Recommending Policy Changes

Brief Statement of Committee's Issue/Area Reporting:

The ERAC met to review and discuss upcoming events and to review 2015 timelines. Items discussed were the followings: fundraising activities, development of the annual meeting program and scholarship for the four countries

Brief Background information and possible impact of issue/area (i.e.: Why is it an issue? Will funding, staff utilization, services and/or facility changes be necessary?)

- Approval of the May 11, 2015 minutes
- Treasurer's report \$364.70
- Thanked Council members for their participation with the LIHEAP Energy fair July 15th & July 16, 2015
- The council developed the annual meeting program. The theme is: Uplifting The Community For A Positive Change
- Souvenir Book Ads deadline: September 11, 2015
- Several Fish Fry fundraisers are scheduled for the month of September
- Community Service Award was discussed – recommendation due by September 14, 2015
- Recognized birthdays for August – December 2015 – William Holt, Debra Williams, Janea' Rolle, Tiffany Wilder, Bobby Byrd, Fannie Moore and Bliss Johnson
- Annual meeting date: Saturday, October 17, 2015 @ 11:00 am – ALPI Administrative Office – Queentown II

Recommendation for Board Action, if any (State in the form of a motion(s) to be acted upon by the full Board). Attach brief summary of request.

Marjorie Gaskins, ERAC Secretary

Notes taken by Christine Samuel,
ERAC Liaison

The Agricultural and Labor Program, Inc.
2014-2015 ERAC Attendance Roster
 (Scheduled Meetings: October, March, May, August)

Council Member	Oct 2014 Annual Meeting	Jan 2015 Agency's 47 th Annual Mtg	Feb 2015 Agency's Shared Gov. Orientation	March 2015	May 2015	Aug. 2015
Bradwell, Betty	P	P	A	P	P	P
Byrd, Bobby	P	E	P	P	P	P
Cooper, Frances	P	P	A	P	P	P
Gaskin, Marjorie	P	E	P	P	P	E
Griffin, Constance	E	P	P	P	P	P
Holt, William	P	P	P	P	P	P
Johnson, Bliss	x	x	x	P(new)	P	E
Jules, Ann	P	P	A	P	P	P
Moore, Fannie	P	P	A	P	P	P
Porter, Margaret	P	P	P	P	P	P
Richardson, Beverly	P	A	A	P	P	P
Rolle, Janea	x	x	x	P(new)	P	P
Sims, Katherine	P	P	A	P	P	P
Spivey, Gena	P	P	P	P	P	P
Wilder, Tiffany	P	E	P	A	P	P
<u>Williams, Debra</u>	P	P	A	P	P	P
<u>Waldron Brown</u>	x	x	x	x	P(new)	A
TOTAL	13	10	7	15	17	14

P = Present

E = Excused

A = Absent



Northern Region Advisory Council August 10, 2015 Minutes of Meeting

CALL TO ORDER

The meeting was called to order by Chairperson Donald Tillman at 7:00 pm.

SECRETARY'S REPORT

Members Present

Donald Tillman Marva Hawkins
Charles Harris, Jr. Sheila Dixon
Constance Anderson
Elizabeth Young (Staff Liaison)
David Rucker (new member)

Members absent

Grace Miller
Dorothy Curry
Yvonne Grey
Evelyn Seabrook

David Rucker, new member, was presented by Chairperson Tillman to the Council, and current council members were introduced. Mrs. Young explained to Mr. Rucker the organization's functions, programs, and locations of councils, etc. Ms. Hawkins motioned to accept Mr. Rucker into the Council. Motion was seconded by Mr. Harris. Secretary read minutes from May 11, 2015 meeting. Ms. Hawkins motioned to accept minutes as read; Mr. Harris seconded the motion.

TREASURER'S REPORT

Ms. Hawkins indicated that \$1683.20 is in the account. \$300 was requested for Annual Meeting Refreshments.

OLD BUSINESS

The Scholarship's purpose and review was provided by Mrs. Young to update new member. Process and guidelines for sample of scholarship motioned for acceptance by Ms. Hawkins, and seconded by Mr. Harris. Scholarship criteria: Target black students to ensure that they are aware of scholarships through school, churches, community, etc.

NEW BUSINESS

Chairperson Tillman led the discussion:

- Review of NRAC Tasks & Timelines for 2015
- Mrs. Young reminded about the finalization of Annual Meeting plans.
- New speaker has to found for Annual meeting (Mr. Rucker will make contact for a speaker).
- Theme for meeting: Helping People, Changing Lives.
- Selection of individual/organization for 2016 Community Service Award should be sent to the Board of Directors by the September 15th meeting.
- Mr. Rucker suggested Mr. Rufus Brooks. Mr. Ted Wilson was also suggested. Council selected Mr. Rufus Brooks for 2016 Community Service Award.
- Chairperson Tillman will get Bio and photo of Mr. Brooks for Board approval.
- The Annual Advisory Meeting is in October. It will be held at Allen Chapel AME Church in Sanford.
- Council members' volunteer service hours need to be submitted to the office as soon as possible.
- NRAC Annual meeting is October 24, 2015.

MEETING ADJOURNED

NORTHERN REGION ADVISORY COUNCIL

2015 Attendance Roster

Name	Jan	28-Feb	Mar	13-Apr	11-May	June	July	10-Aug	Sept	24-Oct	Nov	Dec
Constance Anderson		P		E	P			P				
Dorothy Curry		P		E	E			E				
Sheila Dixon		P		E	P			P				
Yvonne Grey		E		E	P			E				
Charles Harris, Jr.		E		P	P			P				
Marva Hawkins		E		P	P			P				
Grace Miller		E		E	E			E				
Evelyn Seabrook		P		P	P			E				
Donald Tillman		P		P	P			P				
Rucker, David		N/A		N/A	N/A			P				
Total Present		5		4	7			6				

P= Present

E = Excused

A = Absent

No Meeting Held



COUNCIL/COMMITTEE MEETING REPORT FORM

INSTRUCTIONS: Complete and submit to the Board Secretary after reporting to the full Board.

The Southern Region Advisory Council
COUNCIL/COMMITTEE

August 17, 2015
DATE

Members Present/Absent: *Please see attached Attendance Roster*

Type of Report

- ☒ Reporting/Updating
☐ Recommending Board Action
☐ Recommending Policy Changes

Brief Statement of Committee's Issue/Area Reporting:

- Five (5) Corporate Applications were reviewed and approved for SRAC membership. New members *welcomed* are as follows: Tracy Maloy (*Highlands County*), Patricia Brown and Annessa Chilous (*Glades County*), LaVita Holmes and Kimberly Ross (*Hendry County*).
- The Southern Region Advisory Council Membership is currently at Twenty-three (23) with One (1) vacant slot.
- Committee Assignments are: Nominating: Tracy Maloy, Special Events: Patricia Brown and LaVita Holmes and Membership: Annessa Chilous.
- Council's Mileage requests were discussed. Mileage reimbursement form was reviewed and approved.
- '2015' Annual Corporate Meeting was discussed and program participants were identified. The program is scheduled for *Monday, October 19, 2015* at Lake View Park Community Center in Frostproof. Time: 7:00 PM.
- '2015' SRAC Community Award Recipient is: Robert Saffold from Highlands County. Biographical information will be secured by Terry Wellington, Chairperson.
- The *Seigler, Sims & Wade* Scholarship donations are: \$360.00. Commissioner Janet Taylor (Council guest) will follow up with Allan Jay Chrysler Dealership in Hendry County in reference to "Car Drive" fundraiser. The Council's goal for '2016' is to raise \$2,000 for scholarships to be awarded to students in Polk, Highlands, Glades and Hendry Counties.
- LIHEAP (Low Income Home Energy Assistance Program) will provide utility assistance to eligible Head Start/Early Head Start families and low income families in the community on Thursday, September 3rd at the Lake View Park Community Center in Frostproof. SRAC Council members will assist with the program.
- The Southern Region Advisory Council will serve as host for the '2016' Annual Family Day Picnic on June 25, 2016. Location to be announced.

Brief Background information and possible impact of issue/area (i.e.: Why is it an issue? Will funding, staff utilization, services and/or facility changes be necessary?)

- None at this time

Recommendation for Board Action, if any (State in the form of a motion(s) to be acted upon by the full Board). Attach brief summary of request.

- None at this time

The Agricultural and Labor Program, Inc.
2014-2015 SRAC Attendance Roster
(Scheduled Meetings: October, March, May, August)

Name	October 2014 Annual Meeting	March 2015	May 2015	August 2015
John Ash	A	P	P	P
Keith Brown			A	A
Katie Clarke	P	P	P	P
Noemi R. Cruz	A	P	P	A
Ruth Gay			P	P
Barbara Grace	P	P	P	P
Rosa Hampton			P	P
Annette Jones	P	E	P	E
N'Kosi Jones			E	E
Bernice Lopez	P	P	P	P
Emma Malcolm	P	P	A	P
Pamela Moxley	P	P	E	E
Lester Roberts	P	P	P	P via telephone
Annie Robinson	P	P	P	P
Beverly Sloan	P	P	E	E
Ethelrine Watts	P	P	A	A
Terry Wellington	P	P	P	P
Anthony Wiggins			E	A
Total Present	11	12	11	10

P = Present

E = Excused

A = Absent



COUNCIL/COMMITTEE MEETING REPORT FORM

ATEC Advisory Council (Annual) Meeting
COUNCIL/COMMITTEE

August 19, 2015
DATE

Members Present/Absent: Attach Meeting Attendance Roster

Purpose of Report

- ☒ Reporting/Updating
☐ Recommending Board Action
☐ Recommending Policy Changes

Brief Statement of Committee's Issue/Area Reporting:

Met to order by Chester McNorton (Chair) at 6:11pm, Jonel Groundwater (secretary) was absent and roll call by Chester McNorton. Jonel Groundwater, Leona Ter, Sheila Dixon, Patty McCollister and Flor Toledo were absent. Chester McNorton, Nereida Jackson and Patricia James were presented. Staff Liaisons: Pa Houa Lee-Yang, CSBG Economic Development Director/ATEC Administrator and Claudia Sanchez Administrative Assistant I. The council did not have a quorum due to four absent members. Meeting was basically for reporting purposes.

EC

- Pa Houa Lee-Yang, ATEC Administrator welcome newest addition to ATEC Advisory Council, Patricia James from Volusia County Community Action Agency.
- The CNA Prep Course was approved by ALPI's CEO. First CNA Prep Course started on July 6, 2015 and ended July 14, 2015. Five (5) students had enrolled into the course, with three (3) students' tuition was paid by DOE Putnam County School Board and two (2) were self-paid. ATEC was able to profit \$500.00 from this course.
- Ms. Leona, had showed some interested in teaching the CNA Prep Course in the near future by teaching the course once a month and also looking at one weekend out of the month to teach the course. Pa Houa will schedule a meeting with Ms. Leona and go over instructor's contract and what is needed to teach the course.
- ATEC had also completed two (2) Home Health Aid courses with a total enrollment of ten (10) students. Seven (7) students out of the ten (10) students were placed.
- Mr. McNorton, had mentioned about Careersource of Flagler and Volusia Counties of a program that they currently run. How the program works, is that Careersource will pay 100% of wages up to 90 days for anyone who had received an interview with an employer who is looking to hire. Careersource will let the employer know that Careersource can pay for the employee's first 90 days and then employer can hire individual permanently. Mr. McNorton, advised Pa Houa that he will provide Bill's number to Pa Houa to contact him and follow-up with him regarding the program.
- Pa Houa advised the council that ALPI's has a Community Service Award that ALPI present to an individual or an agency who had volunteered their time to support and assists the agency/community or council. If council know of anyone to send in their nominee's name in to ALPI by Sept. 15, 2015 for consideration.
- Patricia had advised Claudia that she will send in a referral form for Claudia to refer any individual who is income eligible for her program, so they can assist the individual enroll into their Family Self-Sufficiency program.

Literacy Council:

- Jonel Groudwater was absent and was unable to update council on literacy information. Pa Houa had advised Claudia to get in touch with Jonell and see if she is still interested in being a part of the council. If not for her to send in her letter of resignation.

Membership/Partnership

- Staff liaison advised council members that we need more members to participate in the council and to continue to look for more members. Would like to have at least 10 active members.

Scheduled upcoming ATEC Council meeting dates:

- October 20, 2015

Action for approval by council members

- No motion during this meeting due to no quorum

Brief Background information and possible impact of issue/area (i.e.: Why is it an issue? Will funding, staff utilization, services and/or facility changes be necessary?) No issue during this reporting period.

Recommendation for Board Action, if any (State in the form of a motion(s) to be acted upon by the full Board). Attach brief summary of request.
None during this reporting period.

INSTRUCTIONS: Complete and submit to the Board Secretary after reporting to the full Board.

The Agricultural and Labor Program, Inc.

2015 ATEC Advisory Committee

Attendance Roster

August 19, 2015

Name	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
Chester McNorton								P				
Patty McCollister								A				
Leona Nater								A				
Jonel Groundwater								A				
Nereida Jackson								P				
Sheila Dixon Northern Region								A				
Patricia James New Member								P				
Total Members								3				

P= Present

E= Excused

A= Absent

 = No Meeting Held

PC = Phone Conference

HS/EHS POLICY COUNCIL REPORT



COUNCIL/COMMITTEE MEETING REPORT FORM

INSTRUCTIONS: Complete and submit to the Board Secretary after reporting to the full Board.

Executive Policy Council Committee
COUNCIL/COMMITTEE

September 4, 2015
DATE

Members Present/Absent: Attach Meeting Attendance Roster

Type of Report

- ☒ Reporting/Updating
☐ Recommending Board Action
☐ Recommending Policy Changes

Brief Statement of Committee's Issue/Area Reporting:

- On August 26, 2015 the Executive Policy Council Committee met to review, discuss and approve the new hires and terminations.

Brief Background information and possible impact of issue/area (i.e.: Why is it an issue? Will funding, staff utilization, services and/or facility changes be necessary?)
None, at this time.

Recommendation for Board Action, if any (State in the form of a motion(s) to be acted upon by the full Board). Attach brief summary of request.
None at this time.

Agricultural and Labor Program, Inc.
Head Start/Early Head Start Executive Policy Council Committee Meeting
ALPI Administrative Office
2202 Avenue Q, Fort Pierce, FL 34950
August 26, 2015

MINUTES

1. CALL TO ORDER

Antonia Jackson, Policy Council Vice-Chairperson called the meeting to order at 12:50 p.m.

2. ROLL CALL

Antonia Jackson, Policy Council Vice-Chairperson did the roll call. Members present: Antonia Jackson, Denise Simons and Raymond Cromes.

Staff present: Myrna Rodriguez and Aletha Stroder.

3. HUMAN RESOURCES LISTING OF NEW HIRES/TERMINATIONS

Myrna Rodriguez presented and distributed the Human Resources List of new hires and terminations from August 26, 2015 for review, discussion and approval. The list included: New Hires -3 Teachers, and 3 Teacher Assistants. Terminations list included: 2 Teachers and 1 Administrative Assistant. Information such as names, qualifications, date of hire and the background clearance dates were read.

Antonia Jackson made a motion to approve the Policy Council Human Resources List dated August 26, 2015 as presented. Raymond Cromes seconded. Motion carried. (Original Human Resources Listings are on file with minutes).

Myrna Rodriguez indicated that there is a possibility for another Executive Policy Council Committee Meeting which will be held on September 16, 2015.

4. ADJOURNMENT

The meeting was adjourned at 1:15 p.m.

Policy Council Vice-Chairperson

AGRICULTURAL AND LABOR PROGRAM, INC.
2014-2015 POLICY COUNCIL MONTHLY MEETING ATTENDANCE

CENTER	NAME	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEPT
Lincoln Park	Raynard Cromes	P	P	A	P	P	P	P	P			P	
Lincoln Park	Gwendolyn Rouse				P	P	P	P	P				
Garden Terrace	Miavonti Shaw	P	A	P	P	A	P	A	A				
Garden Terrace	Vivian Tindall		P	P	P	P	A	P	A				
Queen Townsend HSC II	Quenithia Wright	P	P	P	A	P	A	A	A				
Queen Townsend HSC II	Pamela Burson				P	P	P	P	P				
Child Dev. & Family Services	Sandra Denise Larkins	P	A	P	A	P	P	A	P				
Child Dev. & Family Services	Russell Balasco	P	P	P	P	P	P	P	E			A	
Francina Duval	Raquell Bizzell	P	E	P	P	A	P	A	P				
George W. Truitt	Alicia Villegas	P	P	P	P	P	P	P	E				
George W. Truit	Edmord Pierre louis-Delva	P	P	P	P	P	A	P	P				
Frostproof Child Development	Brandi White					P	A	P	A				
EHS Contracted Site St. Lucie	Antonia Jackson	P	P	P	P	A	P	P	P			P	
HS Contracted Site St. Lucie	Cotina Best	A	P	P	P	P	A	A	P				
EHS Contracted Site Polk	Nadia Stewart	A	A	A	A	A	A	E	A				
Community Rep.	Ervin Valcin	P	P	A	P	P	E	A	P				
Community Rep.	Tom Peer	P	P	P	A	A	E	E	P				
Community Rep.	Denise Sirmons	E	P	P	E	P	A	P	A			P	
Community Rep.	Dwight Wright						P	P	P				
Board Rep.	Patricia Gamble			P	E	E	P	P	P				
<i>Total Representatives Present:</i>		14	14	14	13	13	11	12	12				

CENTER	NAME	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEPT
ALTERNATES													
Lincoln Park	Michael Daniels												
Lincoln Park	Marie Laventure												
Garden Terrace	Felicia Sweeting-Harris					P		P					
Garden Terrace	Octravia Spears												
Queen Townsend HSC II	Shaqnita Jackson												
Queen Townsend HSC II	Carrie Jacobs				P								
Child Dev. & Family Services	Brandi Rogers		P										
Child Dev. & Family Services	Recartha Smith												
Francina Duval	Asante Vogle												
George W. Truitt	Samantha Lindsay												
George W. Truit	Christina Bradwell												
Frostproof Child Development	Yadira Buentello						P						
EHS Contracted Site St. Lucie	Whitney Marie King												
HS Contracted Site St. Lucie	Demetrice Strapp												
EHS Contracted Site Polk	Karla Wood												
		0	1	0	1	1	1	1					

P - PRESENT

E - EXCUSE

A - ABSENT

NO MEETING

BOARD ANNUAL FUNDRAISING REPORT

**THE AGRICULTURAL AND LABOR PROGRAM, INC
2015 BOARD OF DIRECTORS**

	Assessed	Contributed To Date	Balance Due
Katie Clark	1,000.00	145.00	855.00
Dorothy Curry	1,000.00	105.00	895.00
Alexis Echeverria	1,000.00	-	1,000.00
Patricia Gamble	1,000.00	-	1,000.00
Marjorie Gaskin	1,000.00	300.00	700.00
Marva Hawkins	1,000.00	1,000.00	-
William Holt	1,000.00	400.00	600.00
Josephine Howard	1,000.00	480.00	520.00
Glenda Jones	1,000.00	405.00	595.00
Patricia Brown	1,000.00	-	1,000.00
Chester McNorton	1,000.00	500.00	500.00
Vernon McQueen	1,000.00	9,035.00	(8,035.00)
Lester Roberts	1,000.00	100.00	900.00
Janet B Taylor	1,000.00	-	1,000.00
David Walker	1,000.00	-	1,000.00
Annie Robinson	1,000.00	40.00	960.00
Ruby Willix	1,000.00	260.00	740.00
Antonia Jackson	1,000.00	660.00	340.00
LaVita Holmes	1,000.00	-	1,000.00
Annessa Chilous	1,000.00	-	1,000.00
Total	20,000.00	13,430.00	6,570.00

If you should have any questions please see individual detail sheets or call Dennis Gniewek.

**BUREAU OF LABOR
STATISTICS REPORT (BLS)**

CES Report Number: 120476400

REVIEW PAY GROUP 1

	Reporting for the pay period that includes the 12 th of August, 2015		Pay: Bi-weekly	Commissions: No Commissions	
	1 Employee Count	2 Women Workers	3 Payroll, Excluding Commissions (Whole dollars)	4 Commissions Paid at Least Once a Month (Whole dollars)	5 Hours, Including Overtime (Whole hours)
All Workers	232	208	197,817		12,475
Nonsupervisory Workers	156		106,500		7,876
Reason for Large Changes			19-Employment returns to normal or returning to normal 19-Employment returns to normal or returning to normal		