



**PROGRAM PLANNING COMMITTEE MEETING**  
**ALPI Corporate Office/Teleconference**  
**Thursday, April 20, 2023 | 5:00 pm to 7:00 pm**  
**Via Zoom:** Meeting ID: 891 9482 6949. Passcode: 816255  
 Call-In Phone Number: +1 929 205 6099

**AGENDA**

**Committee Members:** Gena Spivey (Chairperson); Dr. Donna Mills (Vice Chairperson); RaShondra Croskey, and Melvin Philpot

**Staff Liaisons:** Al Miller; Myrna Rodriguez

What	How	Who
<b>1. Call to Order</b> <b>Mission Statement</b> <b>Roll Call</b>	Present	Chairperson
<b>2. Review:</b>  <u><b>Child Development/Family Services Division</b></u> <ul style="list-style-type: none"> <li>• Head Start/Early Head Start 2023-2024 Program Goals and Objectives;</li> <li>• Community Target Areas to be Served by ALPI Head Start/Early Head Start 2023-2024;</li> <li>• Head Start/Early Head Start 2023-2024 Community Resources Plan;</li> <li>• Program’s Quarterly Monitoring Reports;</li> <li>• Head Start/Early Head Start Policy Council Membership Recruitment and Organization;</li> <li>• Head Start/Early Head Start 2023 Self-Assessment Results;</li> <li>• Head Start/Early Head Start 2023-2024 Criteria for Recruitment, Selection and Enrollment Priorities; and,</li> </ul> <u><b>Community Services/Economic Development Division</b></u> <ul style="list-style-type: none"> <li>• Division-Wide Performance;</li> <li>• Division-Wide Reimbursements; and</li> <li>• ALPI 2022 SCC CQA Monitoring Report.</li> <li>• 2021-2022 Annual Report Highlight</li> <li>• 2023 Organizational Standards</li> </ul>		Chairperson/ Liaisons
<b>3. Approve or Ratify, as Appropriate, the following Proposed Grant Applications:</b>  <u><b>Child Development/Family Services Division</b></u> <ul style="list-style-type: none"> <li>• FY 23-24: Head Start/Early Head Start Grant Application in the amount of \$10,942.872;</li> <li>• FY 23-24: ARP Budget Revision Request &amp; Budget Period 12-Month Extension in the amount of \$728,086;</li> <li>• FY 22-23: Head Start/Early Head Start Cost-of-Living Adjustments (COLA) in the amount of \$557,517;</li> <li>• FY 22-23: Head Start/Early Head Start Quality Improvement (OI) in the amount of \$224,085;</li> <li>• FY 22-23: Head Start/Early Head Start Program Improvement (One-Time) Request in the amount of \$310,000; and,</li> <li>• Disaster Recovery Funding in the amount of \$240,000.</li> </ul> <u><b>Community Services/Economic Development Division</b></u> <ul style="list-style-type: none"> <li>• Emergency Rental Assistance Program (ERAP) for COVID impacted persons Modification increasing total funding from \$6,270,000 to \$6,960,000;</li> <li>• United Migrant Opportunity Program for recruiting 800 farmworkers for receipt of a one-time emergency benefit.</li> </ul>		



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<ul style="list-style-type: none"><li>• Emergency Home Energy Assistance Program (EHEAP) – Adds additional funding in the amount of \$163,576.54 for period ending September 30, 2023.</li><li>• Economic Opportunity Umbrella Modification Three (3) – Main funding agreement for CSBG and LIHEAP. This mod extends grant through September 30, 2026 pending available funds.</li></ul>		
<b>4. ADJOURNMENT</b>	Present	Chairperson

**ALPI Mission Statement**

To collaborate with community partners and deliver human service programs that empower the economically disadvantaged and others to be self-sufficient.

# CHILD DEVELOPMENT AND FAMILY SERVICES DIVISION

## HEAD START AND EARLY HEAD START

BOARD OF DIRECTORS MEETING APRIL 22, 2023

ACTION ITEMS

Review Head Start/Early Head Start  
2023-2024 Program Goals and  
Objectives

GOAL 1	The program will utilize, integrate and implement the newly revised Head Start Early Learning Outcomes Framework and <b>Florida's</b> Early Learning and Development Standards to ensure that children receive high-quality comprehensive services.
GOAL 2	The program will provide engagement activities that support the importance of the parent's roles as their <b>child's</b> first teacher.
GOAL 3	The program will build relationships with schools and community service professionals to serve families in more comprehensive ways.
GOAL 4	The program will collaborate with community partners to address the health concerns of all children and families.
GOAL 5	The program will create opportunities for staff to identify goals and develop professional practices that result in staff retention.

1. Service and Recruitment Area

a. Identify the service and recruitment area for proposed program operations: ALPI's Head Start/Early Head Start Program targeted areas, are those considered to be the highest concentrated poverty areas in Martin, St. Lucie and Polk Counties. The program recruitment meets the needs of the children and the families to include low-income working families in accordance with the community assessment and other pertinent community data in the three counties. The program will continue to serve the areas where the neediest families have been identified, ensuring that the neediest, such as those experiencing homelessness or who are in foster care, benefit from the program. ALPI will provide Head Start and Early Head Start Services to 947 children and their families in Martin, St. Lucie, and Polk Counties. In Martin, 117 preschool children will receive Head Start services, and 32 infants/toddlers will receive Early Head Start services. In St. Lucie, 642 children will receive Head Start services, and 80 infants/toddlers/pregnant women will receive Early Head Start services. In Polk, 76 infants/toddlers and pregnant women will receive Early Head Start services.

ALPI will continue to operate the Head Start and Early Head Start Program in the highest poverty concentrated communities in the three counties as the designated service areas including, Stuart, Port Salerno, Jensen Beach, Hobe Sound, and Indiantown, Martin County; Fort Pierce, and Port St. Lucie, St. Lucie County; and; Frostproof, Lake Wales, and near surrounding communities, in Polk County.

In Martin County, Florida, The ALPI is in the second year of its Head Start and Early Head Start Program operations. In 2020, ALPI was awarded funding to provide services to 132 preschool children, infants, and toddlers in five cities/towns in the county.

In St. Lucie County, Florida, ALPI has operated the Head Start Program since 1968 and the Early Head Start Program since 2000, located in the southeastern section; we have provided services in Fort Pierce and Port St. Lucie to the most vulnerable children and their families. In the Cities of Port St. Lucie and Fort Pierce, these two cities serve four (4) of its highest poverty concentrated zip codes.

In Polk County, Florida, ALPI is currently providing Early Head Start services since 2010 in the areas of Frostproof and Lake Wales, Florida. Although, ALPI operates in those two cities/towns, the services are extended to other near surrounding areas within Polk County.

ALPI's Head Start and Early Head Start Program, annually updates the Selection Criteria in accordance with the new Federal Poverty Guidelines, and weighs the priority based on the neediest families including family income, homelessness, placement in foster care, child's age, special education needs for services and early intervention. The program will continue to collaborate with community partners to promote and maximize recruitment efforts through the referral support system for children and their families in the targeted areas.

b. Provide evidence to demonstrate that the proposed area is the area of greatest need: In Martin County, Florida, according to the most recent Martin County, Florida demographics data available from the US Census Bureau released in the American Community Survey in December of 2020, the population in 2019 was estimated at 159,065; with an overall poverty level of 8.6%. Martin County population has increased by 8.7%. 4.1% were under the age of 5, 3.9% were between the ages of 5-9, 16.2% were under the age of 18, and 31.5% were under the age of 65 and over. The breakdown by race and ethnicity was, White at 88.1%, Black or African American at 5.7%, Asian at 1.4%, two or more races at 4.2%, and Hispanic or Latino at 13.6%. <https://www.towncharts.com/Florida/Demographics/Polk-County-FL-Demographics-data.html>

In St. Lucie County, Florida, according to the most recent St. Lucie County, Florida demographics data available from the US Census Bureau released in the American Community Survey in December of 2020, the population in 2019 was estimated at 312,947; with an overall poverty level of 10.5%. St. Lucie County population has increased by 12.7%. 5.0% were under the age of 5, 19.5% were under the age of 18, and 24.7% were under the age of 65 and over. Breakdown by race and ethnicity was, White at 73.6%, Black or African American at 20.2%, Asian at 2%, two or more races at 4.3%, and Hispanic or Latino at 19%.

In Polk County, Florida, according to the most recent Polk County, Florida demographics data available from the US Census Bureau released in the American Community Survey in December of 2020, the population in 2019 was estimated at 686,218; with an overall poverty level of 14%. Polk County population has increased by 14%. Polk County's population is around 18.4% age 14 or younger, while almost 50% of the population falls between ages 25-64. According to the 2020 Polk County Community Health Assessment, 5.4% is under the age of 5, 11.1% between ages of 5-14, 11.8% between ages of 15-24. Breakdown by race and ethnicity was, White at 77.1%, Black or African American at 15.3%, Native at 0.4%, Other race at 5.5%, and Hispanic or Latino at 22.5%.

Review Community Target Areas to be Served by ALPI Head Start/Early Head Start in 2023-2024

## Review ALPI Head Start/Early Head Start 2023-2024 Community Resources Plan

As part of the program's efforts toward continuous improvement, the program will provide parents with the opportunity to meet their established goals and needs. The program will maintain collaborations with the local agencies and organizations to include Parent Academy, Children Services Council, 211 Helpline, Healthy Start, HANDS Clinic, LEA, Early Steps, Help Me Behave, WIC, Tri-County WH Behavioral Health, Public School, State Colleges, Universities, etc.

The program will collaborate with the Florida Department of Child Welfare; Foster Care and Homelessness; Homelessness Services Councils; and other homeless services agencies to recruit families. The program will develop flyers, announcements, and notices, in multiple languages to attract families of a) dual language learners; b) children with disabilities; c) homeless children and their families; and d) families with children in foster care. Through the program's collaborations with the local LEA and Early Steps (Part C Agency), and other agencies serving children with disabilities, to recruit at a minimum of 10 percent of children with disabilities. The program will use a computerized selection criteria system to select families; the criterion is designed utilizing the federal poverty guidelines.

Additionally, the program will work with services providers to include the public schools to identify and provide homeless children with a smooth transition into school and receive the support services for academic success.

The program will also provide parents with community resources where parents can obtain needed screenings, serve as liaison with children's physicians, facilitate health fairs, and help parents with transportation needs and translations. The program will facilitate two health fairs prior to the beginning of school year to connect with families, community resources, such as the Health Department, WIC, Healthy Start, Healthy Families, HANDS Dental Clinic, LEA, and Early Steps.

The program in collaboration with the program's Health Services Advisory Committee will address health concerns that have an impact on the child(ren's), develop and/or update policies and procedures as deemed necessary, etc.

## Review of Program's Quarterly Monitoring Reports

### January 2023

Department of Children and Families (DCF): During this reporting period, several ALPI Head Start, Early Head Start, and Contracted facilities were monitored/inspected. The following represents the outcomes/compliance:

- 1/19/2023 Gertrude Walden Child Care Center 100% compliance
- 1/23/2023 Loving Care Child Development Center 100% compliance
- 1/24/2023 Francina Duval Head Start Center 100% compliance
- 1/24/2023 Lincoln Park Head Start Center 100% compliance
- 1/24/2023 George W. Truitt Family Services Center 100% compliance

### February 2023

Department of Children and Families (DCF): During this reporting period, only one ALPI Head Start, Early Head Start, contracted facility we monitored/inspected. The following represents the outcomes/compliance:

- 2/28/2023 Banner Lake Early Learning Center 100% compliance

### March 2023

Department of Child and Families (DCF): During this reporting period, ALPI Head Start/Early Head Start Centers and one contracted center were monitored/inspected. The following represents the outcomes/compliance:

- On 3/21/2023, the ALPI Frostproof Child Development Center was monitored/inspected. One area was out of compliance due to the collapse of time between annual inspections by the Fire Marshall, which was classified as a Class 3 violation. Nevertheless, it was validated that the annual inspection was done. Therefore, it was marked as corrected onsite.
- On 3/22/2023, the ALPI Frostproof Child Development Center was visited by a DCF Investigator to clear two pending non-compliances; 1) was due to staff calling DCF stating that there was no operable water, and 2) allegations made regarding an employee. Both non-compliances were cleared. However, a DCF Facility Inspection report dated 11/16/2022 reflected the non-compliance Class 2 violation for not having operable water was posted/published under the Public Records DCF site on 3/21/2023.
- On 3/22/2023, the Hobe Sound Early Learning Center, contracted site was monitored/inspected achieving 100% compliance.
- On 3/27/2023, the ALPI Queen Townsend Head Start Center II was monitored/inspected achieving 100% compliance.

Polk County Fire Rescue: During this reporting period an annual fire inspection was conducted:

- On 3/2/2023, the Frostproof Child Development Center was visited by the Polk County Fire Rescue to conduct the annual inspection of several buildings. During the inspection, two buildings were found to have a violation. Violation #1, Storage building, the Fire alarm panel was in trouble mode. This violation was corrected on 3/14/2023, and Violation #2, Kitchen building, a back door does not open. The vendor is currently waiting for permits. The work is expected to be completed in the 1st week of April 2023.

Early Learning Coalition: During this reporting period, two ALPI Head Start/Early Head Start Centers were audited by the Early Learning Coalition of St. Lucie County. The two centers were found to have findings in the following areas:

- VPK Program: The Coalition found the parent's sign-in/out sheets to have parents' initials instead of the full signature, arrival, and departure times. After submitting supporting documentation to validate the corrections, the two centers achieved 100% compliance.
- SR Program: Parent's copay fees. After submitting supporting documentation that validates free services for enrolled children, the two centers achieved 100% compliance.

## POLICIES

a) ALPI establish and maintain a Policy Council at the agency level and is responsible for the direction of the Head Start and Early Head Start program, including program design and operations, long/short-term planning goals and objectives, taking into account the annual communitywide strategic planning, needs assessment and self-assessment.

b) Composition – ALPI's Policy Council composition consist of parents of children who are currently enrolled in the Head Start and Early Head Start program, which constitute of the majority (74%) of the members of the policy council; and members at large of the community served by the program who may include parents of children who were formerly enrolled in the program and one Board of Directors (governing body) representative.

ALPI establish and maintain a process that ensures that members of the policy council do not have a conflict of interest in accordance with Head Start Act. No staff or members of their immediate families will serve on the policy council except parents who occasionally substitute as staff.

c) Duties and Responsibilities –

(1) ALPI's Policy Council is responsible for activities specified §642(c)(2)(D) of the Head Start Act; which activities shall approve and submit to the Board of Directors (governing body) decisions to include the following:

- Activities that support the active involvement of parents in supporting program operations, including policies to ensure that the program is responsive to the community and parent's needs;
- Program recruitment, selection, and enrollment priorities;
- Applications for funding and amendments to applications for funding for programs prior to submission of the applications;
- Budget planning for program expenditures, including policies for reimbursement and participation in policy council activities;
- Bylaws for the operation of the policy council;
- Program personnel policies and decisions regarding the employment of program staff, consistent with the Head Start Act §642(1)(E)(iv)(IX), including but are not limited to the following:
  - Personnel policies and procedures, including policies and procedures regarding the hiring, evaluation, compensation, and termination of the Executive Director, Head Start Director, Director of Human Resources, Chief Fiscal Officer, and any other person in an equivalent position with the agency;
  - Personnel policies regarding the hiring, evaluation, termination, and compensation of employees.
- Developing procedures for how members of the policy council will be elected
- Recommendations on the selection of delegate agencies and the service areas of such agencies.

(2) The Policy Council uses ongoing monitoring results, data on school readiness goals, other information described in §1302.102, and information described in section (642(d)(2) of the Head Start Act to conduct its responsibilities to include but are not limited to:

- Financial statements including credit card expenditures
- Program progress summaries reports
- Program enrollment and attendance reports including children partially enrolled in subsidize care
- Meals and snacks provided through the Child Care Food Program/USDA
- Financial audit
- Program annual self-assessment report and improvement plan
- Agency's communitywide strategic planning, and needs assessment of the program including annual updates
- Communication and guidance from the funders
- The annual Program Information Report (PIR).

d) Term

- (1) A member will serve for one-year term
- (2) If the member intends to serve for another year, she or he will stand for re-election
- (3) The Policy Council at the agency level in its bylaws will include how many one-year terms, not to exceed five terms, a person may serve
- (4) The program seats the successor policy council, before the existing policy council is dissolved (October).

e) Reimbursement

The program will reimburse low-income parents participating in the policy council for reasonable expenses incurred if necessary.

## Review Head Start/Early Head Start Policy Council Membership Recruitment and Organization



## Self-Assessment Report

### I. Introduction

#### a. Briefly describe your program

The Agricultural and Labor Program, Inc. (ALPI), provides a high-quality comprehensive early childhood education Head Start and Early Head Start Program designed to be responsive to the needs of the children and families in Martin, St. Lucie, and Polk County, Florida. The Program serves children birth to 5 years, as well as pregnant women, with emphasis on the transition from Early Head Start to Head Start, and from Head Start to public school. The program operates center-based services across counties, serving 947 eligible children including, preschool, infants, toddlers, and pregnant women, to include children with disabilities.

The Program designated service areas include, Stuart, Jensen Beach, Hobe Sound, Port Salerno, and Indiantown, Martin County, Florida; Port St. Lucie and Fort Pierce, St. Lucie County, Florida; and Frostproof, Lake Wales, and other near surrounding areas in Polk County, Florida.

In Martin County, the Program serves 117 Head Start preschoolers, and 32 Early Head Start infants, and toddlers; In St. Lucie – 642 Head Start preschoolers, and 80 Early Head Start, infants, toddlers, and pregnant women; and Polk – 76 Early Head Start, infants, toddlers, and pregnant women.

The Program maintains collaborations with community partners, and early childhood education providers to maximize resources and to prepare children and families with the transition to public education, as well as to provide health, mental health, disabilities, and other services to meet the needs of the enrolled children and their families.

The Program has developed and implemented a School Readiness Plan that is in alignment with the federal and state school readiness expectations, and utilizes the research-based Creative Curriculums to deliver the education and child development program services. The Program uses Teaching Strategies GOLD (TSG), to conduct ongoing assessments of the children learning gains. The Program gathers and analyzes school readiness data three times per year; from various resources to include TSG, VPK Assessments, CLASS observations, and other relevant information to measure progress made towards meeting the program goals and objectives, as well as the federal and state school readiness expectations.

#### b. Provide a context for your Self-Assessment process

The Program Annual Self-Assessment, is the process to review and evaluate the program progress towards the goals and objectives described in the Head Start and Early Head Start grant application. The program uses this process to measure the effectiveness of the service delivery systems, to measure accountability, and assess the alignment with regulations and requirements.

This process allows ALPI to take a closer look at the effectiveness of the program strengths, and the areas of improvement and innovation. This process helps staff to engage in a comprehensive review of data collected through ongoing monitoring and the continuous quality improvement efforts for achieving the program goals and objectives that ensure the delivery of effective, and high-quality program services. The Program Annual Self-Assessment process provides ALPI, data of the following:

- The effectiveness of program ongoing oversight of the governing body and policy council;
- The effectiveness of its systems in facilitating compliance throughout the program year with required standards; regulations and requirements;
- The level of effectiveness of the professional development and family engagement in promoting school readiness;
- Determining the rate of progress towards meeting the goals and objectives set forth in the grant application;
- Confirm that the program has met “time sensitive” requirements outlined in the Head Start Program Performance Standards and regulations;
- Develop strategies for continuous program improvement;
- Allow the management team, and service delivery systems, to make the necessary course of corrections, and to evaluate changes and challenges.

## Review Head Start/Early Head Start 2022-2023 Self-Assessment Results

## II. Methodology

### a. Describe the design of your Self-Assessment and identify the members

The Program utilized the National Center on Program Management and Fiscal Operations Orientation to the Self-Assessment Process in Head Start information, and the Focus Area Two Monitoring Protocol to orientate and train participants. The team composition included, Board and Policy Council members, Community members, parents, and Management staff. The orientation and training took place on day-one, followed by small group/team discussion on the team's expected activities.

The methodology used to collect data for the purpose of, determining the program effectiveness of ALPI's Management Systems in facilitating the progress towards the program's goals and objectives, and compliance with Head Start Program Performance Standards, State and agency requirements were as follows:

- Data tours to, include,
  - Evidence of internal and external ongoing monitoring and reporting practices
  - Analysis of School Readiness data, including Teaching Strategies GOLD Ongoing Assessments, Voluntary Pre-K Assessments, STAR Assessments, and CLASS
  - Eligibility of families
  - Services to families
  - Community engagement
- Classrooms exploration and observations
  - Learning environment settings
  - Health and safety practices
  - Child/teacher interactions
- Discussion with staff
  - Procedures vs practices
  - Professional development and staff support
  - Challenges and course of correction
  - Continuous improvement efforts

### b. Provide the Self-Assessment time frame

Starting with the program planning for the Program Annual Self-Assessment to the implementation process, the period was approximately two months. The Program Annual Self-Assessment was conducted on May 17-20, 2022.

### c. List the data collection tools used

The program data collection tools used, included, but not limited to the following:

- Focus Area 2 Monitoring Protocol
- Fiscal Management System
- MyHeadstart Data-based System
- Teaching Strategies GOLD Assessment System
- VPK Assessment System
- STAR Assessment System
- CLASS Observation System
- External and internal monitoring data

### d. List any additional information used during the Self-Assessment

Grant Application Goals and Objectives  
 Community Assessment  
 Program Annual Report

Review Head Start/Early Head Start  
 2022-2023 Self-Assessment Results  
 Continue

### III. Key Insights

#### a. Describe the strengths of the program

Board of Directors – Evidence of, oversight/monitoring, reporting, training, etc.

Policy Council – Evidence of participation, monitoring, reporting, training, etc.

Community engagement – resources to children, families, and staff.

Health and Safety protocols across program

Teacher/child interactions

Conscious Discipline approach

#### b. Describe systemic issues

Through the Self-Assessment process, which included classroom observations, data tours, staff discussions, and the evaluation of planning and oversight based on the planning, and oversight systems, the team determined that there were no systemic issues; however, the team found improvement areas. The improvement areas are outlined under the recommendation section of this report.

#### c. Discuss the progress of the program in meeting its goals and objectives

The Program continues its efforts towards meeting the program's goals and objectives as described in the grant application through the data collection, data tours, observations, trainings, professional development, monitoring and reporting activities. The following represents the progress towards meeting the goals and objectives, including, but not limited to:

##### Goal 1:

- The program has integrated the ELOF, and utilizes the Individualized Professional Development Portfolio, as well as other federal, state and local professional development opportunities to improve staff knowledge, skills, and practices in the delivery of quality comprehensive services to children.
- The program continues to aggregate school readiness data to analyze areas of concerns and develop improvement strategies to implement.
- The program continues to monitor all classrooms to assess the teacher/child quality interactions.

##### Goal 2:

- The program continues to provide a monthly calendar of activities that promote parent/child engagement and school readiness.
- The program continues to provide monthly parent meeting and has increase parent participation and activities promoting the parent's role as the child's first teacher.
- The program continues to provide online educational resources promoting school readiness and parent engagement.

##### Goal 3:

- The program implemented the Conscious Discipline Parent Curriculum, and continues to provide training to parents.
- The program continues providing resources supporting their roles as their child's first teacher.
- The program continues community collaborations to improve services delivery.
- The program continues working with public schools promoting smooth transition.

##### Goal 4:

- The program has extended community partnership to address health concerns.
- The program has provided services in various ways to promoting the health and safety among children, parents, and staff.
- The program has extended mental health services and resources to parents, and staff.

##### Goal 5:

- The program continues to extended professional development opportunities with external and internal resources for staff to improve their knowledge, skills, and expertise.
- The program extended mentoring and coaching through a partnership to improve curriculum implementation, school readiness, and professional development.

Review Head Start/Early Head Start  
2022-2023 Self-Assessment Results  
Continue

#### IV. Recommendations

##### **a. Recommend areas for program improvement**

Based on the results of the Program Annual Self-Assessment and the alignment of the Head Start Management Systems Wheel of the 12-program management, planning, and oversight systems, it was determined that there were no systemic areas of concern; however, there were program areas of improvement. These areas included:

##### Active supervision approach

Increase the training/professional development activities, i.e., active supervision, learning environments, dual language settings/approach; Identify how we will monitor this to ensure compliance. Steps to improvement:

- Provide monthly refresher webinars/training on the 15-minutes suites
- Conduct weekly/monthly coaching sessions to evaluate progress
- Conduct monthly monitoring activities to follow up on coaching and progress towards achieving the desired outcome.

##### Classroom management

Increase the mentoring/coaching practices to improve the teacher/child interactions, classroom management, instructional support, and school readiness in Head Start and Early Head Start classrooms. Steps to improvement:

- Develop a job improvement plan for individual classroom staff based on gathered data, i.e., class observations, school readiness, etc.
- Conduct weekly/monthly coaching sessions to evaluate new skills and practices progress.

##### Dual language materials

Purchase more dual language classroom materials; to enhance the learning environment and provide additional opportunities in the classrooms for dual language learners and teachers. Steps to improvement:

- Provide training on learning environment and dual-language Head Start Program Performance Standards exceptions.
- Provide training on materials usage in alignment with the Curriculum

##### Documenting service delivery

Retrain family services staff on how to document contact and follow-ups properly. Steps to improvement:

- Provide refresher training on recordkeeping/documentation on service delivered
- Conduct weekly/monthly monitoring of children/families cum files and MyHeadstart system on the service delivery in accordance with policies and procedures.

##### Fiscal Management

Strengthen Internal Control Policies and Procedures. Steps to improvement:

- Review fiscal management policies and procedures to ensure alignment with the Head Start Act, 45CFR § 75.303 Internal Controls, and 45 CFR 75.430 Human Resources
- Revise, update, and develop policies
- Obtain approvals
- Train on the revised, updated, and developed policies.

Review Head Start/Early Head Start  
2022-2023 Self-Assessment Results  
Ends

The Agricultural and Labor Program, Inc.  
**2023-2024 SELECTION CRITERIA SCALE**

Child's Name: \_\_\_\_\_ EHS \_\_\_\_\_  
 HS \_\_\_\_\_

ELIGIBILITY TYPE	POINTS	Updated after 6 months
Homeless (as defined by McKinney-Vento Act)	100	
Public Assistance (TANF/SSI)	100	
Foster Child	80	
Below or at the HHS poverty guidelines	80	
INCOME	POINTS	POINTS
Income is between 100% - 130% of the HHS poverty guidelines	55	
Income is over 130% of the HHS poverty guidelines	35	
AGE (By Compulsory School Age) – Head Start		
Age 3 by September 1, 2023	75	
Age 4 by September 1, 2023	65	
AGE (By Compulsory School Age) – Early Head Start		
Birth to 36 months	75	
OTHER FACTORS	Mark all that Apply	Mark all that Apply
Displaced Worker or Unemployed	35	
Single, Working Parent	45	
Transition from Early Head Start/ Sibling in Program	35	
Child receiving services (Behavioral plan, treatment/plan of care, etc.) <b>must be documented</b>	25	
Inter-agency Referral from Healthy Start	10	
Emergency evacuation/re-location due to disaster	10	
Legal / Temporary Guardianship	10	
Referral from another EHS/HS program out of service area	5	
Teen Parent (At time of application)	5	
DISABILITY (Must be Documented)	POINTS	POINTS
Documented disability with IEP from LEA- (HS)	120	
Referred by Part C- Disability IFSP- (EHS)	120	

Total \_\_\_\_\_

Staff Signature: \_\_\_\_\_ Date: \_\_\_\_\_

IF on Waitlist over 6- 12months

Verified/Updated Score: \_\_\_\_\_ Date: \_\_\_\_\_

Review ALPI Head Start/Early Head Start 2022-2023 Criteria for Recruitment, Selection and Enrollment Priorities

FY 2023-2024: Head Start/Early Head Start Grant Applications \$10,942,862  
 This funding is to serve 947 children and their families in the three-county services areas



FY 2023-2024: ARP Budget Revision Request & Budget Period 12-Month Extension \$728,086  
 These two requests are due to the delays experienced due to vendors staffing shortage, materials delays, etc.



Approve Proposed Grant Applications

FY 2022-2023: Head Start/Early Head Start Cost-of-Living Adjustment (COLA) \$557,517  
 This funding is to provide a permanent increase of no less than the 5.6% adjustment to the pay scale for each Head Start/Early Head Start position.

FY 2022-2023: Head Start/Early Head Start Quality Improvement (QI) \$224,085  
 This funding is to be used for quality improvement investments in according with HS Act, 640 (a)(5), etc.

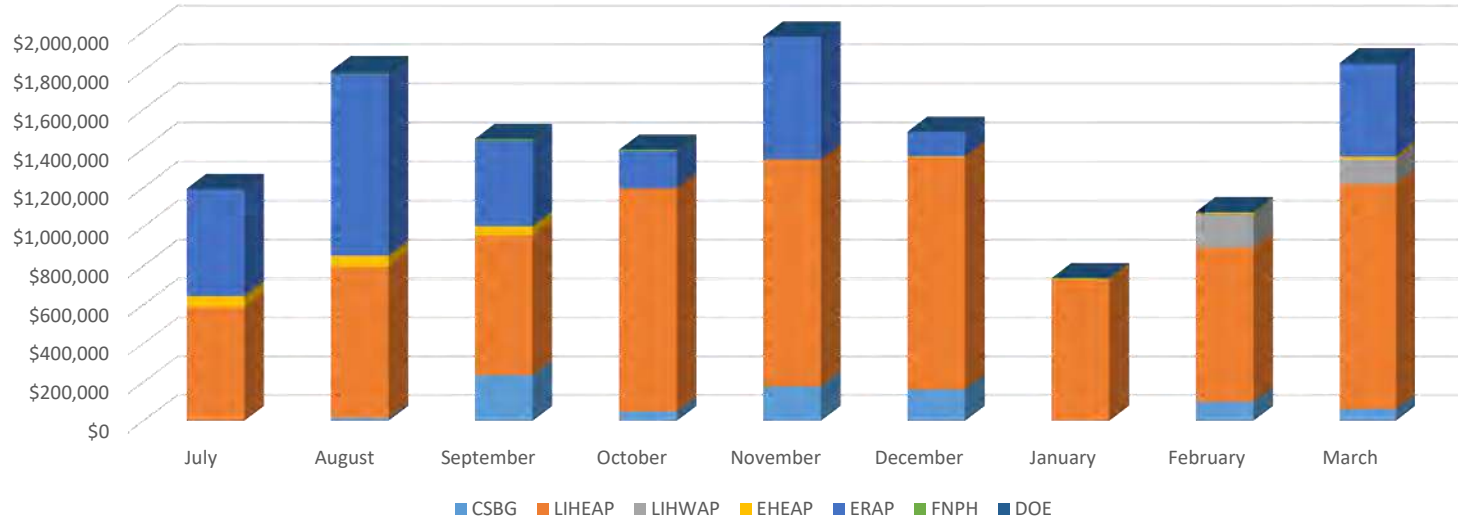
FY 2022-2023: Head Start/Early Head Start Program Improvement (One-Time) Request \$310,000  
 This funding request will be to support program improvement needs that cannot be supported by the agency budget.

Disaster Recovery Funding \$240,000  
 This funding request will be to conduct minor facility upgrades at the Frostproof Child Development Center due to Hurricane Ian

**TOTAL REIMBURSEMENTS, BY PROGRAM, BY MONTH**

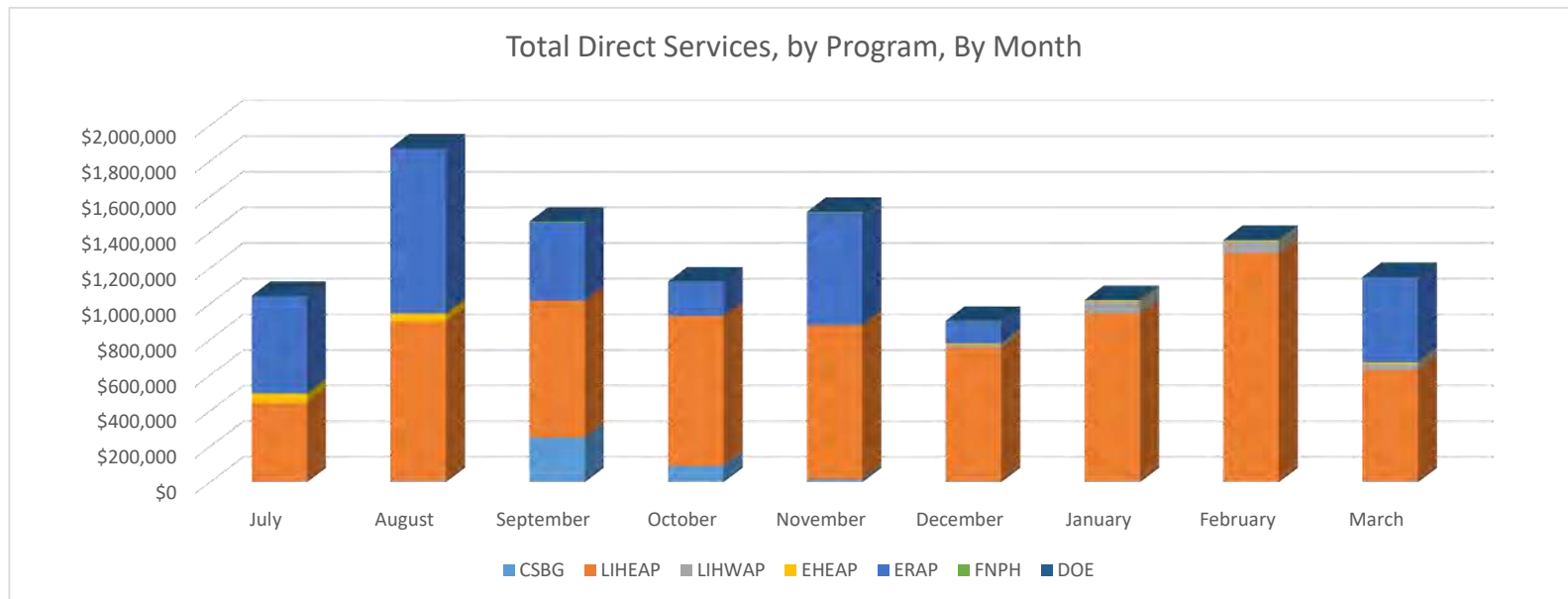
Program	July	August	September	October	November	December	January	February	March	TOTAL
CSBG	\$0	\$15,331	\$236,005	\$48,227	\$177,325	\$162,294	\$0	\$97,448	\$60,955	\$797,585
LIHEAP	\$587,204	\$778,255	\$719,268	\$1,148,644	\$1,168,035	\$1,191,632	\$727,607	\$796,562	\$1,158,702	\$8,275,907
LIHWAP	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$169,229	\$125,702	\$294,930
EHEAP	\$57,510	\$58,357	\$47,460	\$0	\$0	\$5,679	\$6,341	\$7,411	\$14,057	\$196,815
ERAP	\$547,487	\$925,991	\$438,031	\$190,038	\$628,297	\$125,474	\$0	\$0	\$475,126	\$3,330,445
FNPH	\$0	\$3,030	\$9,450	\$7,272	\$0	\$1,139	\$2,422	\$2,646	\$0	\$25,959
DOE	\$2,959	\$16,621	\$833	\$429	\$1,259	\$1,010	\$1,049	\$2,646	\$4,135	\$30,941
<b>TOTAL</b>	<b>\$1,195,160</b>	<b>\$1,797,584</b>	<b>\$1,451,046</b>	<b>\$1,394,610</b>	<b>\$1,974,916</b>	<b>\$1,487,229</b>	<b>\$737,418</b>	<b>\$1,075,942</b>	<b>\$1,838,677</b>	<b>\$12,952,583</b>

**Total Reimbursements by Program, by Program**



**TOTAL DIRECT SERVICES, BY PROGRAM, BY MONTH**

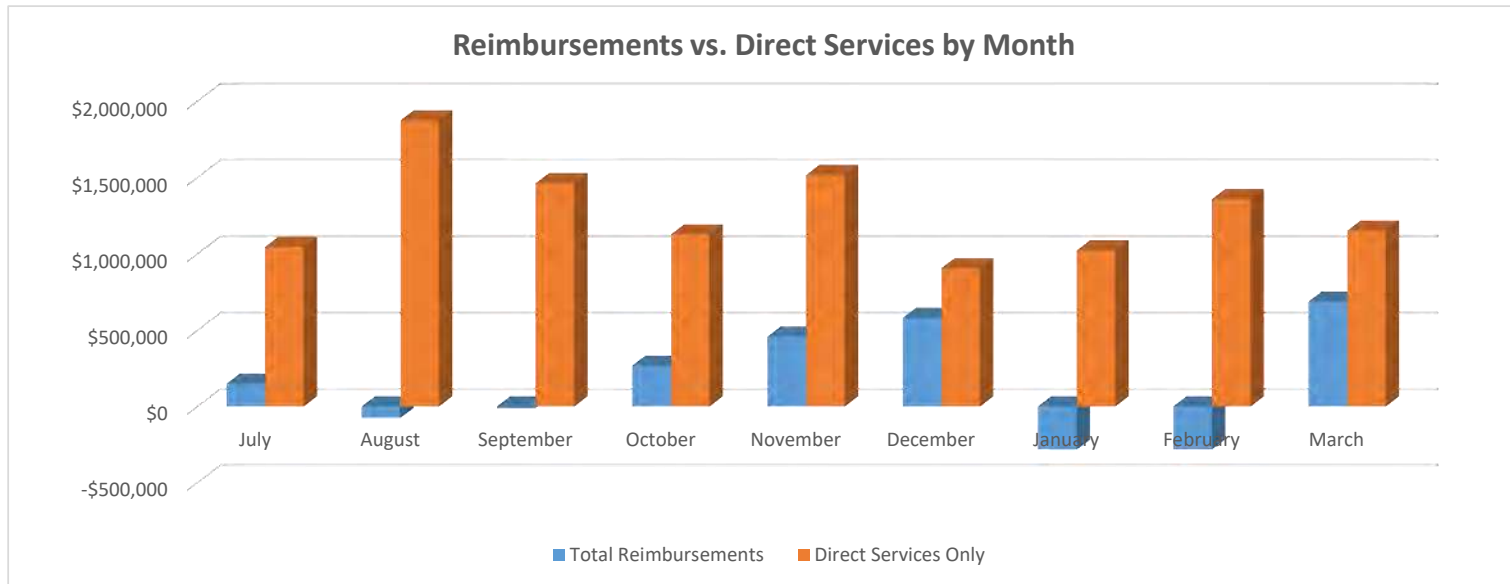
Program	July	August	September	October	November	December	January	February	March	TOTAL
CSBG	\$2,800	\$7,731	\$251,998	\$91,875	\$17,856	\$6,601	\$5,237	\$827	\$6,032	\$390,957
LIHEAP	\$444,935	\$894,395	\$767,877	\$842,784	\$865,142	\$750,575	\$942,056	\$1,283,788	\$625,414	\$7,416,966
LIHWAP	\$0	\$0	\$0	\$0	\$0	\$12,876	\$68,479	\$65,505	\$31,418	\$178,278
EHEAP	\$50,652	\$44,954	\$0	\$0	\$0	\$7,490	\$4,853	\$5,689	\$10,510	\$124,148
ERAP	\$547,487	\$925,991	\$438,031	\$190,038	\$628,297	\$125,475	\$0	\$0	\$475,126	\$3,330,445
FNPH	\$0	\$0	\$4,095	\$1,750	\$4,886	\$3,183	\$1,432	\$2,724	\$2,496	\$20,566
DOE	\$0	\$0	\$0	\$0	\$250	\$0	\$0	\$0	\$0	\$250
<b>TOTAL</b>	<b>\$1,045,874</b>	<b>\$1,873,071</b>	<b>\$1,462,001</b>	<b>\$1,126,447</b>	<b>\$1,516,431</b>	<b>\$906,200</b>	<b>\$1,022,057</b>	<b>\$1,358,533</b>	<b>\$1,150,996</b>	<b>\$11,461,610</b>





**TOTAL REIMBURSEMENTS VS DIRECT SERVICES, BY MONTH**

Program	July	August	September	October	November	December	January	February	March	TOTAL
Total										
Reimbursements	\$149,286	-\$75,487	-\$10,955	\$268,163	\$458,485	\$581,029	-\$284,639	-\$282,591	\$687,681	\$1,490,973
Direct Services Only	\$1,045,874	\$1,873,071	\$1,462,001	\$1,126,447	\$1,516,431	\$906,200	\$1,022,057	\$1,358,533	\$1,150,996	\$11,461,610
<b>TOTAL</b>	<b>\$1,195,160</b>	<b>\$1,797,584</b>	<b>\$1,451,046</b>	<b>\$1,394,610</b>	<b>\$1,974,916</b>	<b>\$1,487,229</b>	<b>\$737,418</b>	<b>\$1,075,942</b>	<b>\$1,838,677</b>	<b>\$12,952,583</b>



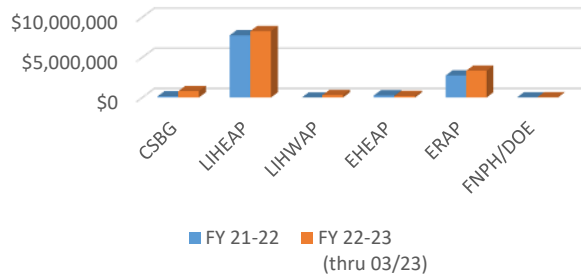
Expenditures - FY 21-22 compared to FY 22-23 (first 9 months)

Programs	FY 21-22	FY 22-23 (thru 03/23)	Change
CSBG	\$169,346	\$797,585	\$628,239
LIHEAP	\$7,756,780	\$8,275,907	\$519,127.09
LIHWAP	\$0	\$294,930	\$294,930.42
EHEAP	\$254,386	\$196,815	-\$57,570.97
ERAP	\$2,751,805	\$3,330,445	\$578,639.84
FNP/DOE	\$28,287	\$56,500	\$28,213.00
<b>TOTAL</b>	<b>\$10,960,604</b>	<b>\$12,952,182</b>	<b>\$1,991,578.36</b>

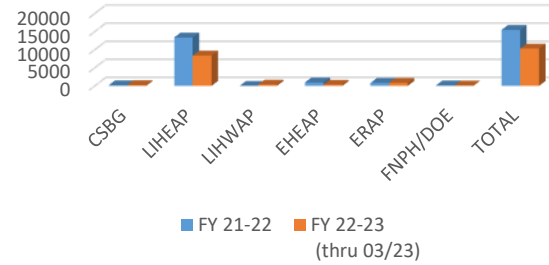
Units of Service - FY 21-22 compared to FY 22-23 (first 9 months)

Programs	FY 21-22	FY 22-23 (thru 03/23)	Change
CSBG	178	248	70
LIHEAP	13396	8372	-5024
LIHWAP	0	402	402
EHEAP	978	388	-590
ERAP	815	815	0
FNP/DOE	120	92	-28
<b>TOTAL</b>	<b>15487</b>	<b>10317</b>	<b>-5170</b>

Expenditures - FY 21-22 vs. FY 22-23 (thru 9 months)



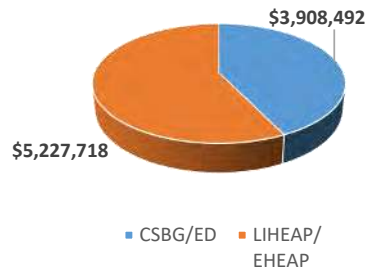
Units of Service - FY 21-22 compared to FY 22-23 (First Nine Months)



**Expenditures by Department**

	<b>CSBG/ED</b>	<b>LIHEAP/ EHEAP</b>
Expenditures By Department	\$3,908,492	\$5,227,718

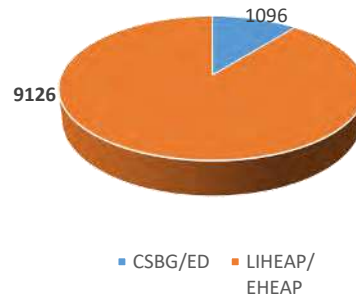
Division Funding by Department/Program



**Units of Service by Department**

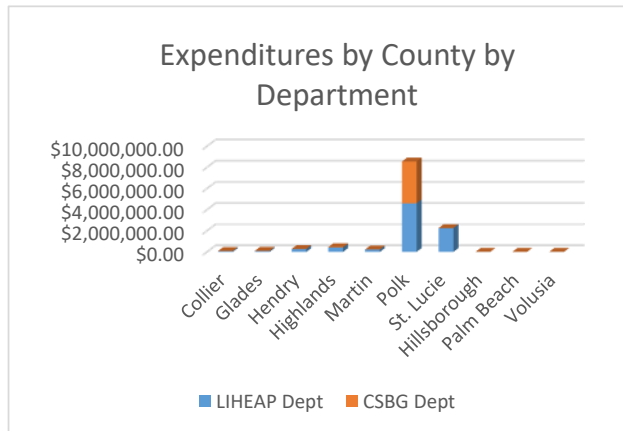
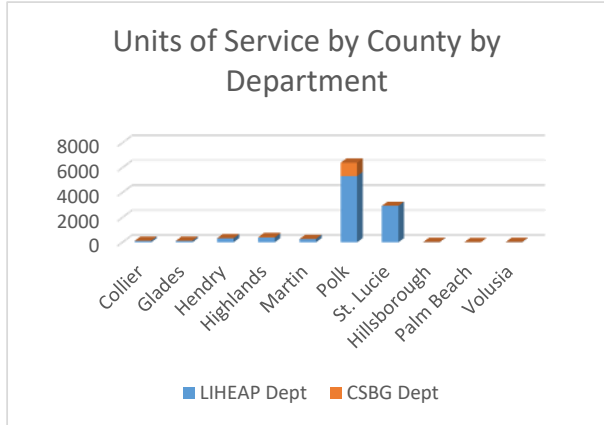
	<b>CSBG/ED</b>	<b>LIHEAP/ EHEAP</b>
Units of Service	1096	9126

Units of Service



Units of Service by County by Department		
COUNTY	LIHEAP Dept	CSBG Dept
Collier	129	0
Glades	127	1
Hendry	329	0
Highlands	378	35
Martin	269	0
Polk	5328	1070
St. Lucie	2931	0
Hillsborough	17	0
Palm Beach	9	0
Volusia	19	0

Units of Service by County by Department		
COUNTY	LIHEAP Dept	CSBG Dept
Collier	\$83,312.37	\$0.00
Glades	\$101,939.77	\$278.19
Hendry	\$280,687.31	\$0.00
Highlands	\$414,520.89	\$41,547.79
Martin	\$233,573.94	\$0.00
Polk	\$4,598,576.77	\$3,944,856.77
St. Lucie	\$2,260,170.45	\$0.00
Hillsborough	\$4,158.00	\$0.00
Palm Beach	\$2,242.00	\$0.00
Volusia	\$3,999.61	\$0.00





March 21, 2023

Mr. William Holt, Chair  
The Agricultural and Labor Program, Inc.  
300 Lynchburg Road  
Lake Alfred, FL 33850

**Re: 2022 Contracts and Quality Assurance Monitoring Report**

Dear Mr. Holt:

Senior Connection Center, Inc. has completed the annual Contracts and Quality Assurance Monitoring of the federally funded programs and services provided through The Agricultural and Labor Program, Inc. The purpose of the monitoring is to determine if these programs are in compliance with applicable federal and state rules, regulations, statutes, and guidelines, and to ensure that an effective service delivery system is in place, which meets the needs of the seniors authorized to receive these services.

The monitoring process this year included a review of the programmatic and fiscal requirements for these programs and services, which was accomplished using an expanded desk review, as well as an on-site visit.

Enclosed for your review is a copy of the monitoring report. As a result of the monitoring, it was determined that The Agricultural and Labor Program, Inc. is in compliance with the applicable federal and state rules, regulations, statutes, guidelines, and policies and procedures governing these programs. There are no findings, recommendations, or corrective actions requiring your attention.

We appreciate the quality of services your organization provides to the seniors and their caregivers who reside in Polk County. As always, your staff was very cooperative and helpful throughout the monitoring process. Should you have any questions regarding this report, please contact us.

Sincerely,

Charlotte K. McHenry  
President/CEO

Enclosure(s)

cc: Board of Directors, SCC  
Advisory Council, Chair, SCC  
Arlene Dobison, Chief Executive Officer, ALPI  
Katie Parkinson, Chief Operating Officer, SCC  
Kristina Melling, Director of Contracts & Quality Assurance, SCC

**Senior Connection Center, Inc.**  
Contracts and Quality Assurance Monitoring Report  
2022 Contract Year

Agency: The Agricultural and Labor Program, Inc. (ALPI)

Programs: Master Contract  
Emergency Home Energy Assistance Program (EHEAP)  
Emergency Home Energy Assistance Program American Rescue Plan Act (EHEAP ARP)

SCC Contract Manager: Clairedine Senat

Director: Arlene Dobison, Chief Executive Director

Board Chairperson: William Holt, Chair

Date of On-Site Visit: February 27, 2023

Participants: Cheryl Burnham, ALPI  
Kristina Melling, SCC  
Clairedine Senat, SCC

Date of Monitoring Report: March 21, 2023

**I. Introduction and Summary**

Senior Connection Center, Inc. (SCC) conducted an annual Contracts and Quality Assurance Monitoring of the federally funded elderly services programs awarded to this subrecipient during the 2022 contract year. The monitoring was conducted in accordance with commonly accepted procedures used to monitor federal and state funded programs.

The monitoring and review of the programs included inquiries of staff, examination of selected records, client file reviews, and other documentation and/or observations obtained through the expanded desk review process, which was conducted throughout the contract year. It should be noted that the tests of compliance used for this monitoring were not comprehensive in scope, and may not have identified all deficiencies.

A copy of the Contracts and Quality Assurance Monitoring Checklists are attached to this report for your review. They identify the items included in this monitoring review, and the compliance status of each item.

As a result of this review, SCC staff has noted the 2022 monitoring process resulted in no findings or recommendations.

## II. Contract and Program Review

The DOEA provides federal and state funding for programs and services to older adults throughout the state of Florida by contracting these funds with designated, regional Area Agencies on Aging. SCC is the designated Area Agency on Aging for the Planning and Service Area which includes Hardee, Highlands, Hillsborough, Manatee, and Polk counties (PSA 6). SCC provides management and oversight of these services and funds through contracts with local service providers in each county.

The ultimate goal of these programs and services is to provide home and community-based services which offer a continuum of care to assist older adults aged 60 and over, and who may be at risk of nursing facility placement, to live in the least restrictive environment suitable for their needs, ensuring the maximum independence and dignity for the individual and support for their caregivers.

At the time of this monitoring, SCC provided funding to the Agricultural and Labor Program, Inc. (ALPI), as follows:

**Total ALPI Funding = \$497,097.67**

- **2021-2023 Emergency Home Energy Assistance Program (EHEAP) - \$348,776.67**  
Services: Energy vendor payments made to resolve emergency home energy crises
- **2021-2024 Emergency Home Energy Assistance Program American Rescue Plan Act (EHEAP ARP) - \$148,321.00**  
Services: Energy vendor payments made to resolve emergency home energy crises
- **2021-2023 Master Contract (MASTER) - \$0.00**  
Services: Federal and state regulations and requirements governing all of the above referenced contracts

## III. Findings

### a. Previous Monitoring Findings and/or Recommendations:

There were no findings or recommendations from the 2021 monitoring process.

### b. 2022 Monitoring Findings and/or Recommendations:

The 2022 monitoring process resulted in no findings or recommendations.

## IV. Issues and Challenges

No issues or challenges were identified for this report.

**V. Noteworthy Grants, Awards, Management, or Service Activities**

ALPI received \$3,380,634 in Low Income Home Water Assistance Program (LIHWAP) and \$2,679,168 in Low Income Home Water Assistance Program American Rescue Plan Act (LIHWAP ARP) funding through September 30, 2023. Through the LIHWAP program, low-income qualified applicants can receive a one-time payment of up to \$1,000 to help pay outstanding bills for residential water or wastewater services.

**VI. Technical Assistance**

No technical assistance was requested by ALPI through the desk review. However, SCC staff discussed the untimely submissions of ALPI's monthly invoices during the monitoring meeting. ALPI acknowledged there is room for improvement and moving forward invoices will be submitted to SCC by the eighth of every month.

**VII. Best Practices**

No new best practices were identified for this report.

**VIII. Summary**

Overall, this SCC monitoring has confirmed that ALPI is in compliance with the federal and state regulations and requirements governing the programs and services reviewed during this monitoring.

SCC appreciates the efforts being made by ALPI staff to provide these critically needed services to seniors residing in Polk County, and to ensure that the services are being provided in a high quality manner. SCC staff is available to assist your organization in any way that will help you to continue to provide quality services to these seniors and their caregivers.

As always, the staff of ALPI were accommodating and professional in preparing for this monitoring. SCC appreciates their continued commitment and dedication to serving the needs of Polk County's older adults.

Submitted By: Sonat Claire-dine Date: 3/21/2023

Reviewed By: Justin Murray Date: 3/21/2023



# **Agricultural and Labor Program, Inc. (ALPI)**

## **FY21-22 ANNUAL REPORT HIGHLIGHTS**

### **DEMOGRAPHICS**

**Total Households Served = 11,250**  
**Average HH Size = 2.6**

**Household Type:**  
**Single Person = 3,985 (35%)**  
**Single Parent = 3,973 (35%)**

**Total Individuals Served = 29,226**  
**Disabled = 3129 (10.7%)**

**Public Assistance:**  
**SNAP = 4,841 (43.0%)**  
**WIC = 491 (4.4%)**

### **SKILLS/SERVICES**

**Employment = 87**  
**Summer Youth = 3**  
**Job Placement = 17**

**Early Head Start = 188**  
**Head Start = 759**  
**Before/After School Activities = 111**  
**Summer Program Activities = 107**

**Post Secondary Support = 15**

**School Readiness Skills = 774/947 (82%)**  
**Basic Literacy Skills = 774/947 (82%)**  
**Improved Personal Attitude = 988/1054 (93%)**  
**Improved Parental Skills = 947/947 (100%)**  
**Immunization = 861**  
**Physicals = 855**  
**Vision Screening = 542**  
**Mental Health Screening**  
**Dental Screening 646**  
**Parenting Classes = 840**

### **HOUSING SUPPORT**

**Avoided Eviction = 973/1110 (88%)**  
**Rental Assistance = 1,110**  
**Mortgage Assistance = 18**

**Utility Deposit = 51**  
**Utility Arrears = 9,040**  
**Utility Assistance = 14,758**

**COMMUNITY SERVICES BLOCK GRANT  
ORGANIZATIONAL STANDARDS ASSESSMENT FORM (Nonprofit)  
FFY 2023**

**PART I - AGENCY INFORMATION**

<b>AGENCY:</b>	ALPI
<b>DATE:</b>	3/7/2023
<b>Manager:</b>	Brodean Shepard

**PART II - OS CHECKLIST**

Standard Number	Standard	Met	Not Met	1 <sup>st</sup> Year/ Repeat	Corrective Action Taken	Cure Date
<b>MAXIMUM FEASIBLE PARTICIPATION – Category 1: Consumer Input and Involvement</b>						
1.1	The organization demonstrates low-income individuals' participation in its activities.	X				
1.2	The organization analyzes information collected directly from low-income individuals as part of the community assessment.	X				
1.3	The organization has a systematic approach for collecting, analyzing, and reporting customer satisfaction data to the governing board.	X				
<b>MAXIMUM FEASIBLE PARTICIPATION – Category 2: Community Engagement</b>						
2.1	The organization has documented or demonstrated partnerships across the community, for specifically identified purposes; partnerships include other anti-poverty organizations in the area.	X				
2.2	The organization utilizes information gathered from key sectors of the community in assessing needs and resources, during the community assessment process or other times. These sectors would include at minimum: community-based organizations, faith-based organizations, private sector, public sector, and educational institutions.	X				
2.3	The organization communicates its activities and its results to the community.	X				
2.4	The organization documents the number of volunteers and hours mobilized in support of its activities.	X				

**CSBG Organizational Standards  
Field Guide Assessment Form**

Standard Number	Standard	Met	Not Met	1 <sup>st</sup> Year/ Repeat	Corrective Action Taken	Cure Date
<b>MAXIMUM FEASIBLE PARTICIPATION – Category 3: Community Assessment</b>						
3.1	The organization conducted a community assessment and issued a report within the past 3 years.	X				
3.2	As part of the community assessment, the organization collects and includes current data specific to poverty and its prevalence related to gender, age, and race/ethnicity for their service area(s).	X				
3.3	The organization collects and analyzes both qualitative and quantitative data on its geographic service area(s) in the community assessment.	X				
3.4	The community assessment includes key findings on the causes and conditions of poverty and the needs of the communities assessed.	X				
3.5	The governing board formally accepts the completed community assessment.	X				
<b>VISION AND DIRECTION – Category 4: Organizational Leadership</b>						
4.1	The governing board has reviewed the organization’s mission statement within the past 5 years and assured that: 1. The mission addresses poverty, and 2. The organization’s programs and services are in alignment with the mission.	X				
4.2	The organization’s Community Action plan is outcome-based, anti-poverty focused, and ties directly to the community assessment.	X				
4.3	The organization’s Community Action plan and strategic plan document the continuous use of the full ROMA cycle. In addition, the organization documents having used the services of a ROMA-certified trainer (or equivalent) to assist in implementation.	X				
4.4	The governing board receives an annual update on the success of specific strategies included in the Community Action plan.	X				

**CSBG Organizational Standards  
Field Guide Assessment Form**

Standard Number	Standard	Met	Not Met	1 <sup>st</sup> Year/ Repeat	Corrective Action Taken	Cure Date
4.5	The organization has a written succession plan in place for the CEO/ executive director, approved by the governing board, which contains procedures for covering an emergency/ unplanned, short- term absence of 3 months or less, as well as outlines the process for filling a permanent vacancy.	X				
4.6	An organization-wide, comprehensive risk assessment has been completed within the past 2 years and reported to the governing board.	X				
<b>VISION AND DIRECTION – Category 5: Board Governance</b>						
5.1	The organization’s governing board is structured in compliance with the CSBG Act: 1. At least one third democratically-selected representatives of the low income community; 2. With one-third local elected officials (or their representatives); and 3. The remaining membership from major groups and interests in the community.	X				
5.2	The organization’s governing board has written procedures that document a democratic selection process for low-income board members adequate to assure that they are representative of the low- income community.	X				
5.3	The organization’s bylaws have been reviewed by an attorney within the past 5 years.	X				
5.4	The organization documents that each governing board member has received a copy of the bylaws within the past 2 years.	X				
5.5	The organization’s governing board meets in accordance with the frequency and quorum requirements and fills board vacancies as set out in its bylaws.	X				
5.6	Each governing board member has signed a conflict of interest policy within the past 2 years.	X				
5.7	The organization has a process to provide a structured orientation for governing board members within 6 months of being seated.	X				

**CSBG Organizational Standards  
Field Guide Assessment Form**

Standard Number	Standard	Met	Not Met	1 <sup>st</sup> Year/ Repeat	Corrective Action Taken	Cure Date
5.8	Governing board members have been provided with training on their duties and responsibilities within the past 2 years.	X				
5.9	The organization's governing board receives programmatic reports at each regular board meeting.	X				
<b>VISION AND DIRECTION – Category 6: Strategic Planning</b>						
6.1	The organization has an agency- wide strategic plan in place that has been approved by the governing board within the past 5 years.	X				
6.2	The approved strategic plan addresses reduction of poverty, revitalization of low-income communities, and/or empowerment of people with low incomes to become more self-sufficient.	X				
6.3	The approved strategic plan contains family, agency, and/or community goals.	X				
6.4	Customer satisfaction data and customer input, collected as part of the community assessment, is included in the strategic planning process.	X				
6.5	The governing board has received an update(s) on progress meeting the goals of the strategic plan within the past 12 months.	X				
<b>OPERATIONS AND ACCOUNTABILITY – Category 7: Human Resource Management</b>						
7.1	The organization has written personnel policies that have been reviewed by an attorney and approved by the governing board within the past 5 years.	X				
7.2	The organization makes available the employee handbook (or personnel policies in cases without a handbook) to all staff and notifies staff of any changes.	X				
7.3	The organization has written job descriptions for all positions, which have been updated within the past 5 years.	X				
7.4	The governing board conducts a performance appraisal of the CEO/ executive director within each calendar year.	X				

**CSBG Organizational Standards  
Field Guide Assessment Form**

Standard Number	Standard	Met	Not Met	1 <sup>st</sup> Year/ Repeat	Corrective Action Taken	Cure Date
7.5	The governing board reviews and approves CEO/executive director compensation within every calendar year.	X				
7.6	The organization has a policy in place for regular written evaluation of employees by their supervisors.	X				
7.7	The organization has a whistleblower policy that has been approved by the governing board.	X				
7.8	All staff participate in a new employee orientation within 60 days of hire.	X				
7.9	The organization conducts or makes available staff development/ training (including ROMA) on an ongoing basis.	X				
<b>OPERATIONS AND ACCOUNTABILITY – Category 8: Financial Operations and Oversight</b>						
8.1	The organization's annual audit (or audited financial statements) is completed by a Certified Public Accountant on time in accordance with Title 2 of the Code of Federal Regulations, Uniform Administrative Requirements, Cost Principles, and Audit Requirement (if applicable) and/or State audit threshold requirements.	X				
8.2	All findings from the prior year's annual audit have been assessed by the organization and addressed where the governing board has deemed it appropriate.	X				
8.3	The organization's auditor presents the audit to the governing board.	X				
8.4	The governing board formally receives and accepts the audit.	X				
8.5	The organization has solicited bids for its audit within the past 5 years.	X				
8.6	The IRS Form 990 is completed annually and made available to the governing board for review.	X				

**CSBG Organizational Standards  
Field Guide Assessment Form**

Standard Number	Standard	Met	Not Met	1 <sup>st</sup> Year/ Repeat	Corrective Action Taken	Cure Date
8.7	The governing board receives financial reports at each regular meeting that include the following: 1. Organization-wide report on revenue and expenditures that compares budget to actual, categorized by program; and 2. Balance sheet/statement of financial position.	X				
8.8	All required filings and payments related to payroll withholdings are completed on time.	X				
8.9	The governing board annually approves an organization-wide budget.	X				
8.10	The fiscal policies have been reviewed by staff within the past 2 years, updated as necessary, with changes approved by the governing board.	X				
8.11	A written procurement policy is in place and has been reviewed by the governing board within the past 5 years.	X				
8.12	The organization documents how it allocates shared costs through an indirect cost rate or through a written cost allocation plan.	X				
8.13	The organization has a written policy in place for record retention and destruction.	X				
<b>OPERATIONS AND ACCOUNTABILITY – Category 9: Data and Analysis</b>						
9.1	The organization has a system or systems in place to track and report client demographics and services customers receive.	X				
9.2	The organization has a system or systems in place to track family, agency, and/or community outcomes.	X				
9.3	The organization has presented to the governing board for review or action, at least within the past 12 months, an analysis of the agency's outcomes and any operational or strategic program adjustments and improvements identified as necessary.	X				
9.4	The organization submits its CSBG Annual Report and it reflects client demographics and organization-wide outcomes.	X				

# Low-Income Home Energy Assistance Program Quarterly Performance and Management Report

## Subrecipient Information

<b>Subrecipient Name:</b>	The Agricultural and Labor Program, Incorporated (ALPI)			
<b>Subrecipient Contact Name:</b>	Al Miller, Division Director			
<b>Subrecipient Contact Phone Number:</b>	(863) 956-3491, Ext. 212			
<b>Subrecipient Contact Email:</b>	Amiller@ALPI.ORG			
<b>Quarter and Date Range Reported On:</b>	Q1: <input type="checkbox"/> Check	Q2: <input checked="" type="checkbox"/> Check	Q3: <input type="checkbox"/> Check	Q4: <input type="checkbox"/> Check
	OCT - DEC	JAN - MAR	APR - JUN	JUL - SEP

### I. Total Households Assisted

	A. Total Households	
1. Number of assisted households	6917	
2. Number of assisted households during the same period last year	7073	

### II. Performance Management

	A. Total Occurrences	
1. Number of Occurrences of households where LIHEAP prevented the loss of home energy.	5912	
2. Number of Occurrences of households where LIHEAP restored home energy.	354	