STATEWIDE SCHOOL READINESS PROVIDER CONTRACT MONITORING TOOL

A. Monitoring Requirements

A coalition administers the School Readiness Program through the service delivery of a school readiness (SR) program provider.
An early learning coalition shall monitor all SR program providers, regardless of provider type (including school district SR programs), in accordance with its plan, or in response to a parental complaint, to verify that the standards prescribed in ss. 1002.82, and 1002.88, F.S. are being met using a standard monitoring tool adopted by the Department of Education. Providers that the coalition determines to be high-risk, as defined in section D below, shall be monitored more frequently. This does not prohibit a coalition from monitoring a provider more frequently for other concerns such as parental complaints or suspected fraud.

B. Tier 1 Compliance Tracking/Desk Review

A coalition shall annually monitor and document monitoring each of its SR program providers for Tier 1 compliance. The coalition must develop a process for Tier 1 monitoring. The process shall include monitoring and validation of the items below for each SR program provider:

1. Date of certified School Readiness Contract in accordance with Rule 6M-4.610, FAC.
2. Date of review of Department of Children and Families (DCF) exemption determination letter to ensure provider is eligible to provide the School Readiness Program, if applicable.
3. Date of completion of most recent Health and Safety Inspection (for all school readiness providers in accordance with Rule 6M-4.620, FAC).
4. A Program Assessment was completed in accordance with Rules 6M-4.740, FAC. Yes or No.
5. Date of completion of Quality Improvement Plan Elements (if applicable) in accordance with Rules 6M-4.740, FAC.
6. Conducting Developmental Screenings (if applicable) in accordance with Rule 6M-4.720, FAC. Yes or No.
7. Date of completion of orientation (if applicable) in accordance with Rule 6M-4.610, FAC, OEL-SR20.
8. Date of completion of Child Assessments (if applicable) in accordance with Rules 6M-4.500(11), FAC.
9. Date of approval of annual CCR&R Provider Updates in accordance with Rule 6M-9.300(8), FAC.
10. Date of review for completion of monthly enrollment/attendance certifications[1] in accordance with Rule 6M-4.500(2), FAC for the month(s) reviewed for post attendance monitoring.
11. Dates of expiration of liability insurance coverage.
12. An e-Verification affidavit was completed in accordance with Rule 6M-4.610, FAC. Yes or No.
13. Date of review of DCF's CARES system to verify continuation of provider Gold Seal designation to ensure a provider is eligible for the Gold Seal differential.

C. Tier 2 Compliance

Using the monitoring tool form DEL-SR 20M, ***Attachment A***, the coalition shall conduct onsite monitoring of a random sample of all of its contracted SR program providers, regardless of provider type (including school district SR programs) on an annual basis. The sample should be representative of all provider types (including school district SR programs) funded by the coalition and include no less than the number of providers included in ***Attachment B –Minimum Annual Sample Size***. The sample size is based on the number of SR programs funded by the coalition and not the total number of provider contracts. If a provider has multiple sites, each site must be included in the sample size and selection. This includes contracted provider program sites outside of the coalition service area. The coalition may accept the Tier 2 monitoring results of a provider's home coalition if the home coalition's Tier 2 monitoring is conducted during the same monitoring cycle. When establishing the sample size, a coalition must determine the final count of the total number of SR provider contracted sites with the

[1] The intent is to annually monitor all providers for attendance (reconciling enrollment/attendance certifications with sign-in/sign-out logs), however, this does not have to be done every month for each provider. The details of a coalition's post attendance monitoring shall be included in the coalition's monitoring plan submitted with the coalition's school readiness plan.

coalition, based on the current SR fiscal year. The coalition will include its random sampling process in its school readiness provider monitoring plan. For multi-county coalitions, the sample size is calculated using the total number of contracted providers among all counties in the coalition's service area. High risk providers, as defined in section D below, that are not captured in the random sample will be added to the list of providers that are sampled for annual monitoring. The coalition's monitoring plan may be developed to monitor 100% of its SR program providers annually.

D. SR Program Risk Assessment

A provider that has eight or more findings on ***Attachment A*** will be considered high risk. Additionally, using ***Attachment A***, if 15 percent or more of the child files in the selected sample result in questioned cost, that provider will be considered high risk. For example, if three out of 20 files result in questioned cost, that provider will be considered high risk.

The coalition shall monitor providers determined to be high risk more frequently than annually. Frequency of monitoring for providers determined to be high risk shall be identified in the coalition's monitoring plan. All follow up monitoring shall evaluate, at a minimum, the criteria that were found to be non-compliant in the previous monitoring. For criteria in ***Attachment A*** that evaluate a sample of children's files for compliance, a 10 percent error rate or higher will be applied to determine if the non-compliance observations will count as a high risk indicator. All non-compliance observations will still require corrections, regardless of the error rate percentage.

If an SR program provider has no findings for three consecutive years, the coalition may select to monitor the SR program provider using form DEL-SR 20M, ***Attachment A*** on a biennial basis.

Historical monitoring results (prior to the execution of the statewide school readiness provider contract) may be used by a coalition to determine risk level when developing the coalition's monitoring plan.

E. SR Children Sample Size

For Tier 2 monitoring, the coalition shall monitor a sample of at least twenty-five percent of a SR program provider's SR child files. If the SR program provider has less than 20 SR children, the sample will be 4 SR child files. If the SR program provider has 4 or less SR children, all SR child files will be reviewed. The sample should be representative of classrooms, billing groups and age of children. The percentage of SR child files to be reviewed is based on the total number of SR children enrolled with a SR program provider during the month of the monitoring engagement. For example, if the provider's actual child enrollment count is 65, 16 children should be the sample selected for review. When applying the 25% for the sample, please round to the nearest whole number.

F. Corrective Action Plans

If observations of noncompliance are made by coalition monitoring staff using either Tier 1 or Tier 2 monitoring, the coalition shall require a Corrective Action Plan (CAP) be developed and implemented by the school readiness program provider. The coalition must notify the provider in writing. The notice must identify the specific requirement(s) which the provider failed to meet and describe how the provider failed to meet each requirement. In addition, the notice must provide a detailed description of any required corrective action and set a deadline for completion of the corrective action. Finally, the notice must state that the provider may request a review of the findings of noncompliance. Upon determining that the provider has satisfactorily completed the corrective action, the coalition shall notify the provider in writing.

STATEWIDE SCHOOL READINESS PROVIDER CONTRACT MONITORING TOOL – Tier 2

Attachment A

Table of Contents

I. PARTIES AND TERMS OF THE CONTRACT....5

1. Not transferred/assigned contract

II. PROVIDER ELIGIBILITY....5

1. Provider type and services (informational)
2. Licensed or legally operating

III. PROVIDER RESPONSIBILITIES....6

1. Child care
2. Healthy and safe environment (for 2.a through 2.c, select the provider type that applies)
3. Quality Improvement Plans, if applicable
4. Developmentally appropriate curriculum
5. A character development program
6. Developmental screenings, if applicable
7. Unlimited parental access
8. Contracted slots program, if applicable.
9. Child assessments, if applicable.
6. Daily sign-in/sign-out sheets
7. Enrollment/Attendance Certifications
8. Reporting absences
9. Rilya Wilson Act (s. 39.604, F.S.)

IV. ACCESS....11

1. Access to facility
2. Access to records

V. MAINTENANCE OF RECORDS, DATA AND CONFIDENTIALITY....11

1. Family data and confidentiality agreements
2. Attendance record maintenance
3. Maintain records for five years

VI. COMPENSATION AND FUNDING....12

1. Private pay rate
2. Rates and Fees for Parents
3. Military Subsidies
4. Parent copayment collection
5. Head Start Agencies
6. Title 20 Schools

VII. NONDISCRIMINATION....14

STATEWIDE SCHOOL READINESS PROVIDER CONTRACT MONITORING TOOL – Tier 2

Attachment A

Table of Contents

1. Discrimination

VIII. NOTIFICATION....14

1. Timely unusual incident reporting
2. Written notification of incident

IX. Insurance....14

1. Worker's compensation insurance
2. Reemployment assistance insurance
3. General liability insurance
4. Homeowner's liability insurance or homeowner's insurance policy (for informal providers)
5. Insurance changes

X. MONITORING REVIEW ACKNOWLEDGEMENTS....16

OVERALL COMPLIANCE OBSERVATIONS....17

ATTACHMENT B – MINIMUM ANNUAL SAMPLE SIZE FOR PROVIDERS....18

ATTACHMENT C – SCHOOL READINESS CURRICULUM APPROVAL PROCESS – MONITORING CRITERIA 19

ATTACHMENT D – SCHOOL READINESS PROVIDER MONITORING CHART....20

STATEWIDE SCHOOL READINESS PROVIDER CONTRACT MONITORING TOOL – Tier 2
Attachment A
EARLY LEARNING COALITION OF The Nature Coast

Coalition Staff/Monitor: _____ Monitoring Date: _____ Program Year: _____

I. PARTIES AND TERMS OF THE CONTRACT

Provider Name (I-1): _____

Location Address (I-1): _____

Provider ID (I-1): _____ **Dates of Contract (I-3):** _____

1. Not transferred/assigned contract

Assessment activity - Does the ownership information match who is listed on the contract? If they match, then they are in compliance.

Yes ☐ **No**☐ *Did the provider obtain written approval of the coalition if it transferred or assigned its contract to another entity, corporation, or owner?* **(I-6)**
N/A☐

Notes:_____

_____

_____

II. PROVIDER ELIGIBILITY

1. Provider type and services (informational)

(Check all that apply) **(II-7 and III-20)**

☐ Child care facility	☐ Faith-based child care provider	☐ Full-time
☐ Family day care home	☐ Informal child care provider	☐ Part-time
☐ Large family child care home	☐ Before-school	☐ Extended-day
☐ Public school or nonpublic school	☐ After-school	☐ Extended-year

2. Licensed or legally operating

Assessment activity -

1. Access the DCF Child Care Administration, Regulation and Enforcement System (CARES) website or local licensing inspection reports and conduct a provider search for the provider in question.

Coalition Staff/Monitor: _____ Monitoring Date: _____ Program Year: _____

2. To determine if a private after school program or private summer camp, exempt from licensing, is legally operating, review level two background screenings for all center personnel. Review the provider's contract for the operating status and review the provider's final reimbursement report to verify that only children who are 5 years of age on or before September 1 and older are receiving service.
3. Review the Division of Public Assistance Fraud (DPAF) Dispositions Report available on the DEL coalition zone to verify that the provider, or an owner, officer, or board director thereof, has not been convicted of, found guilty of, or pled guilty or nolo contendere to, regardless of adjudication, public assistance fraud pursuant to s. 414.39, F.S., within the last five (5) years and is not acting as the beneficial owner for someone who has been convicted of, found guilty of, or pled guilty or nolo contendere to, regardless of adjudication, public assistance fraud pursuant to s. 414.39, F.S., within the last five (5) years.
4. Verify that the provider is not on the United States Department of Agriculture National Disqualified List nor does the provider share an officer or board director with a provider that is on the United States Department of Agriculture National Disqualified List.
5. Verify that informal providers meet state and federal requirements to be an eligible provider.
6. Verify that provider has successfully or in the process of successfully completing previous corrective actions or terms of probation due to noncompliance determinations from a prior contract.
7. Verify that provider or an owner, officer, or board director thereof, has not had their eligibility to provider School Readiness services revoked. For multi-site PROVIDERS, such as corporate chains or school districts, eligibility revocation is per site and not all locations unless specifically determined otherwise by the coalition.

Yes ☐ **No**☐ *Is the provider licensed or legally operating?* ***(Verification needed) (II-7)***

License /Licensed Exempt ID:_____ Expiration Date:_____

If no, explain:_____

Notes:_____
_____
_____

III. PROVIDER RESPONSIBILITIES

1. Child care

Assessment activity -

1. Does written address match physical address? If yes, provider is in compliance. If not, provider is not in compliance.
2. Has mail been returned by the carrier indicating wrong address? If it has then not in compliance. If it has not, then in compliance.

Yes ☐ **No**☐ *Did the provider enroll SR children in accordance with the services established by the coalition on the child care (payment) certificate indicating authorized hours of care and are the sampled children at the physical location identified on the enrollment/attendance certification form?* ***(III-***

9,10) For sampled files, if the error rate is 10% or higher, this will constitute a finding for this criterion that will count toward the high risk assessment identified in section D above. All non-compliance observations will still require corrections, regardless of the error rate percentage.

2. Healthy and safe environment (for 2.a through 2.c, select the provider type that applies)

Health and Safety requirements are specifically addressed in each provider type attachment. ***(III-12)***

*** If any violations are observed while conducting onsite visit, report observations to DCF or local licensing agency.**

a. Licensed Provider, Licensed-Exempt Provider, Faith-Based Provider (religious-exempt), and Registered Providers Responsibilities

Assessment activity - View a copy of their most recent DCF or local licensing agency inspection report, Form OEL-SR-6201.

Yes ☐ **No**☐ *Is the provider providing a healthy and safe environment pursuant to s. 402.305(5), (6), and (7), as applicable, and as verified pursuant to Rule 6M-4.620(2)(a), FAC?*

Notes:_____
_____

b. Public and Non-Public Schools Responsibilities

Assessment activity - View a copy of their most recent DCF or local licensing agency inspection report, Form OEL-SR-6203.

Yes ☐ **No**☐ *Is the provider providing a healthy and safe environment pursuant Rule 6M-4.620(2)(c), FAC?*

c. Informal, Large Family Child Care Home, and Family Day Care Home Provider Responsibilities

Assessment activity - View a copy of their most recent DCF or local licensing agency inspection report, Form OEL-SR-6205.

Yes ☐ **No**☐ **N/A**☐ *Is the provider providing a healthy and safe environment pursuant to Rule 6M-4.620(2)(c), FAC?*

Notes:_____
_____

3. Quality Improvement Plans, if applicable

Assessment activity – View provider documentation, documented communication with the provider and coalition observations to evaluate and determine if the provider is in compliance with Exhibit 3 of the School Readiness Provider Contract.

Coalition Staff/Monitor: _____ Monitoring Date: _____ Program Year: _____

Yes ☐ **No**☐ **N/A**☐ *If applicable, did the provider complete or is on track to complete a quality improvement plan pursuant to Rules 6M-4.610 and 6M-4.740, FAC and in accordance with Exhibit 3 of the School Readiness Provider Contract?*

4. Developmentally appropriate curriculum

Yes ☐ **No**☐ **N/A**☐ *Is the provider using an approved Developmentally Appropriate Curriculum (as it specified in OEL-SR 20 and Attachment C of Form DEL-SR 20M)?* **(III-15)**

Curriculum used: _____ Edition or date: _____

Curriculum used: _____ Edition or date: _____

Curriculum used: _____ Edition or date: _____

Character Development Program included in curriculum? **Yes** ☐ **No**☐ **N/A**☐ For school age programs only

5. A character development program

Yes ☐ **No**☐ *Is the provider using the character development program as it identified in OEL-SR 20?* ***(III-16)***
N/A☐ **For school age programs only**

Program used: _____ Edition or date: _____

6. Developmental screenings, if applicable

Assessment activity - Review sample of SR children to determine if provider is conducting developmental screenings within the required timeframes in accordance with Rule 6M-4.720, FAC, to include family notification requirements of screening results.

Yes ☐ **No**☐ **N/A**☐ *If applicable, is the provider conducting developmental screenings in accordance with Rule 6M-4.720, FAC?* **(III-17)** ***For sampled files, if the error rate is 10% or higher, this will constitute a finding for this criterion that will count toward the high risk assessment identified in section D above. All non-compliance observations will still require corrections, regardless of the error rate percentage.***

7. Unlimited parental access

Yes ☐ **No**☐ *Does the provider afford parents unlimited access to their children during normal hours of provider operation when children are in the care of the provider?* ***(III-26)***

Coalition Staff/Monitor: _____ Monitoring Date: _____ Program Year: _____

8. Contracted slots program, if applicable.

Assessment activity - View provider documentation, documented communication with the provider and coalition observations to evaluate and determine if the provider is in compliance with Exhibit 4 of the School Readiness Provider Contract.

Yes ☐ **No**☐ **N/A**☐ *Did the provider comply with the requirements outlined in Exhibit 4 of the School Readiness Contract* ***(III.8)****?*

9. Child assessments, if applicable.

Assessment activity - View provider documentation, documented communication with the provider and coalition observations to evaluate and determine if the provider is in compliance with paragraph 32 of the School Readiness Provider Contract.

Yes ☐ **No**☐ **N/A**☐ *If applicable, did the provider conduct child assessments using a reliable assessor, as defined by the child assessment tool that meet the criteria described in s. 1002.82(k), F.S., at least three times during the year or on track to meet three times per year* ***(III-32)****?*

ATTENDANCE REPORTING

_____ Month(s) validated for attendance

10. Daily sign-in/sign-out sheets

Assessment activity - Review sign-in/sign-out logs for children in sample. Some non-compliance observations may not result in questioned cost but will require technical assistance.

Yes ☐ **No**☐ *Are the parent sign-in/sign-out daily attendance forms completed in accordance with rule (6M-4.500(1)-(4), FAC)?* ***(III-22) For sampled files, if the error rate is 10% or higher, this will constitute a finding for this criterion that will count toward the high risk assessment identified in section D above. All non-compliance observations will still require corrections, regardless of the error rate percentage.***

Yes ☐ **No**☐ *Did the observation result in a disallowed cost? Indicate amount* _____

Indicate any discrepancies found (including disallowed costs): **(VII-60)**

_____
_____
_____

11. Enrollment/Attendance Certifications

Assessment activity - Review enrollment/attendance certifications for children in sample and compare to the sign-in/sign-out forms. Observe and record attendance in each classroom sample and then compare them to the sign in sheets to make sure the sign in sheets are accurately reflecting children present. Some non-compliance observations may not result in questioned cost but will require technical assistance.

Coalition Staff/Monitor: _____ Monitoring Date: _____ Program Year: _____

Yes ☐ **No**☐ *Are the provider's monthly enrollment/attendance certifications completed in accordance with rule (6M-4.500(1)-(4), FAC)?* ***(III-22) For sampled files, if the error rate is 10% or higher, this will constitute a finding for this criterion that will count toward the high risk assessment identified in section D above. All non-compliance observations will still require corrections, regardless of the error rate percentage.***

Yes ☐ **No**☐ *Did the observation result in a disallowed cost? Indicate amount* _____

Indicate any discrepancies found (including disallowed costs): **(VII-60)**

_____
_____
_____

12. Reporting absences

Assessment activity - Review sign-in/sign-out log for children in sample. From the selected sample, determine which children were absent. Once a determination has been made, ask the provider for documentation that supports communication with DCF or the parent concerning absences as applicable. Determine if procedures were followed to substantiate compliance with attendance reporting.

Yes ☐ **No**☐ *If applicable, did the provider notify the coalition if a child was absent for five (5) consecutive days with no contact from parent by the close of the fifth (5th) day, according to rule?* ***(III-23) For sampled files, if the error rate is 10% or higher, this will constitute a finding for this criterion that will count toward the high risk assessment identified in section D above. All non-compliance observations will still require corrections, regardless of the error rate percentage.***

N/A☐

_____
_____
_____

13. Rilya Wilson Act (s. 39.604, F.S.)

When an at-risk child has an unexcused absence or seven consecutive days of excused absences, the school readiness provider shall notify the Department of Children and Families or community-based lead agency and the early learning coalition.

Assessment activity - Review sign-in/sign-out log for at-risk children in sample. From the selected sample, determine which children were absent. Once a determination has been made, ask the provider for documentation that supports communication with DCF or the parent concerning absences as applicable. Determine if procedures were followed to substantiate compliance with attendance reporting.

Yes ☐ **No**☐ *If applicable, did the provider abide by the provisions of the Rilya Wilson Act for each at-risk child under the age of school entry by documenting any notification contact made with the DCF or community-based agencies' case manager?* ***(III-24) For sampled files, if the***

Coalition Staff/Monitor: _____ Monitoring Date: _____ Program Year: _____

error rate is 10% or higher, this will constitute a finding for this criterion that will count toward the high risk assessment identified in section D above. All non-compliance observations will still require corrections, regardless of the error rate percentage.

N/A☐

Indicate any discrepancies found:

_____
_____
_____

Notes:_____

IV. ACCESS

1. **Access to facility**

   Yes ☐ **No**☐ *Does the provider allow coalition staff (contractor or sub-contractor) or DEL staff immediate access to facility per contract?* ***(V-39)***

   Immediate is defined in the context of what someone would see as reasonable time.

   to grant access to the site. Monitoring staff should take into consideration eating time and staff available (without disrupting normal operations and teacher/student ratios), etc.

2. **Access to records**

   Yes ☐ **No**☐ *Does the provider allow coalition staff (contractor or sub-contractor) or DEL staff immediate access to records per contract?* ***(V-40)***

   Immediate is defined in the context of what someone would see as reasonable time to grant access to the site. Monitoring staff should take into consideration eating time and staff available (without disrupting normal operations and teacher/student ratios), etc.

Notes:_____
_____
_____

V. MAINTENANCE OF RECORDS, DATA AND CONFIDENTIALITY

1. **Family data and confidentiality agreements**

   Assessment activity - Review confidentiality agreements signed by provider staff.

   Yes ☐ **No**☐ *Does provider protect child & family data and have staff complete confidentiality agreements in accordance with provider contract?* ***(VI-41)***
   The monitor should select a sample of staff to review during on-site visits.

Coalition Staff/Monitor: _____ Monitoring Date: _____ Program Year: _____

2. Attendance record maintenance

Yes ☐ **No**☐ *Does the provider maintain records of sampled children, including sign in and sign out documentation, enrollment and attendance certifications, documentation to support excused absences and proof of parent co-payments for children funded by the SR program per contract?* ***(VI-42) For sampled files, if the error rate is 10% or higher, this will constitute a finding for this criterion that will count toward the high risk assessment identified in section D above. All non-compliance observations will still require corrections, regardless of the error rate percentage.***

3. Maintain records for five years

Assessment activity - Review sample of 5 child records (including payment certificates, sign in and sign out documentation, enrollment and attendance certifications, documentation to support excused absences and proof of parent co-payments) to include children who were terminated or who were enrolled and paid for 5 years prior to the date of the onsite visit

Yes ☐ **No**☐ **N/A**☐ *Does the provider maintain the above mentioned records for audit purposes for a period of five (5) years from the date of the last reimbursement request for that fiscal year or until the resolution of any audit findings or any litigation related to this Contract, whichever occurs last?* ***(VI-42) For sampled files, if the error rate is 10% or higher, this will constitute a finding for this criterion that will count toward the high risk assessment identified in section D above. All non-compliance observations will still require corrections, regardless of the error rate percentage.***

Yes ☐ **No**☐ *Did the observation result in a disallowed cost? Indicate amount* _____

Indicate any discrepancies found (including disallowed costs): **(VII-60)**

Notes:_____
_____
_____

VI. COMPENSATION AND FUNDING

1. Private pay rate

Assessment activity - Review most recent provider CCR&R update or other provider communication regarding private pay to the coalition and compare to what the provider currently reports as its private pay rate, including if a provider charges parents a differential between the private pay rate and the coalition reimbursement rate and registration fees.

Yes ☐ **No**☐ **N/A**☐ *Did the provider report changes to the coalition to its private pay rate no later than the close of business on the day of the change?* ***(VII-52)***

Yes ☐ **No**☐ **N/A**☐ *Is the provider's rates for SR services equal to or less than the provider's private pay rate?*

Coalition Staff/Monitor: _____ Monitoring Date: _____ Program Year: _____

2. Rates and Fees for Parents

Assessment activity - Review private pay information that the provider gives to parents, including if a provider charges parents a differential between the private pay rate and the coalition reimbursement rate and registration fees. Verify that a list of fees is available to parents and if applicable the type of written notice given if there is a different between the private pay rate and the SR rate. Parents of children in the sample may also be interviewed.

Yes ☐ **No**☐ *Did the provider provide the parent with a list of any fees it charges and, if applicable, written notice of the difference between the private pay rate and SR reimbursement, prior to the parent enrolling his/her child?* ***(VII-53)***

3. Military Subsidies

Assessment activity - Review sampled children for military affiliation.

Yes ☐ **No**☐ **N/A**☐ *Did the provider notify the coalition if it received military subsidy payments through or from the Child Care Aware of America© (formally NACCRRA) or any legal successor organizations, on behalf of any child enrolled in the provider's SR program?* ***(VII-54)***

4. Parent copayment collection

Assessment activity - Review documentation that validates parent copayment collection by provider for children in sample.

Yes ☐ **No**☐ *Does the provider have a method for documenting and collecting the required copayment and issuing receipts to parents?* ***(VII-55) For sampled files, if the error rate is 10% or higher, this will constitute a finding for this criterion that will count toward the high risk assessment identified in section D above. All non-compliance observations will still require corrections, regardless of the error rate percentage.***

5. Head Start Agencies

Assessment activity - Review sampled children sign in/sign out log for evidence that children attended above and beyond the scheduled Head Start program hours.

Yes ☐ **No**☐ **N/A**☐ *If applicable, is the provider's Head Start program in addition to and not in substitution for its school readiness program?* ***(VII-62)***

6. Title 20 Schools

Assessment activity - Review sampled children sign in/sign out log for evidence that children attended above and beyond the scheduled public school program hours.

Yes ☐ **No**☐ **N/A**☐ *If applicable, is the provider's public school program in addition to and not in substitution for its school readiness program?* ***(VII-63)***

Notes:_____
_____
_____

VII. NONDISCRIMINATION

1. Discrimination

Yes ☐ **No** ☐ *Has the coalition received any formal complaints regarding this provider related to discrimination against children on the basis of race, national origin, ethnic background, sex, religious affiliation, or disability or regarding discrimination against staff persons on the basis of religion?* **(IX-65)**

VIII. NOTIFICATION

1. Timely unusual incident reporting

Yes ☐ **No** ☐ *Did the coalition verify that the provider reported unusual incidents on file during the visit to the coalition by no later than the close of business on the next business day of the unusual incident? An unusual incident is defined in Form OEL-SR 20 (October 2018) at number 81 as incorporated by reference in Rule 6M-4.610, FAC.* ***(XI-81)***

N/A ☐

2. Written notification of incident

Yes ☐ **No** ☐ *Did the provider submit a written report of the incident on file during the visit to the coalition within three business days?* ***(XI-81)***
N/A ☐

Notes:_____
_____
_____

IX. Insurance

1. Worker's compensation insurance

Yes ☐ **No** ☐ **N/A** ☐ **Waiver** ☐ (if applicable, obtain a copy of the waiver)

Does the provider have Workers' Compensation insurance that covers the term of the contract? ***(III-21)***

2. Reemployment assistance insurance

Yes ☐ **No** ☐ **N/A** ☐

Does the provider have Reemployment assistance insurance that covers the term of the contract? ***(III-21)***

3. General liability insurance

Yes ☐ **No** ☐ *Did the coalition verify that the provider maintained general liability insurance (including transportation insurance if applicable) and provided the coalition with written evidence of coverage?* ***(OEL-SR20 L, FFN, LE)***

Coalition Staff/Monitor: _____ Monitoring Date: _____ Program Year: _____

N/A☐

4. Homeowner's liability insurance or homeowner's insurance policy (for informal providers)

Yes ☐ **No**☐ *Did the coalition verify that the provider maintained home owner's insurance and provided the coalition with written evidence of coverage?* ***(OEL-SR20 FFN)***

N/A☐

5. Insurance changes

Assessment activity - Verify proof of insurance. If provider demonstrates current insurance information then they are compliant.

Yes ☐ **No**☐ *Did the provider submit advance written notice of cancellation or changes to insurance coverage a minimum of ten (10) calendar days to the coalition?* ***(OEL-SR20 L, FFN, LE)***

N/A☐

Notes:_____
_____
_____

STATEWIDE SCHOOL READINESS PROVIDER CONTRACT MONITORING TOOL – Tier 2
Attachment A
EARLY LEARNING COALITION OF The Nature Coast

Coalition Staff/Monitor: _____ Monitoring Date: _____ Program Year: _____

X. MONITORING REVIEW ACKNOWLEDGEMENTS

Follow-up required? **Yes** ☐ **No** ☐ Date Due: _____

Description of follow-up required: (if additional space is needed, use Overall Compliance Observations section)

_____

_____

_____

_____

_____

Acknowledged by:

Printed Name and Title of Coalition Representative	Signature of Coalition Representative	Date
_____	_____	_____

Acknowledged by:

Printed Name and Title of SR Program Provider Representative	Signature of SR Program Representative	Date
_____	_____	_____

STATEWIDE SCHOOL READINESS PROVIDER CONTRACT MONITORING TOOL – Tier 2

Attachment A

EARLY LEARNING COALITION OF The Nature Coast

Coalition Staff/Monitor: _____ Monitoring Date: _____ Program Year: _____

OVERALL COMPLIANCE OBSERVATIONS

ATTACHMENT B – MINIMUM ANNUAL SAMPLE SIZE FOR PROVIDERS

# of Providers	Minimum Sample Size
<20	75%
30	25
35	28
40	31
45	34
50	37
55	38
60	39
65	40
70	42
75	44
80	47
85	50
90	53
95	56
100	58
110	62
120	65
130	68
140	70
150	72
160	74
170	76
180	78
190	80
200	81
210	82
220	83
230	84
240	85
250	86
260	87
270	88
280	89
290	90
300	91
325	93
350	95
375	98
400	100
425	102
450	103

# of Providers	Minimum Sample Size
475	106
500	108
525	109
550	110
575	111
600	112
625	113
650	114
675	115
700	116
725	116
750	117
775	117
800	118
900	119
1,000	121
1,500	122
2,000	123
2,500	124
3,000	125
3,500	126
4,000	127
4,500	128
5,000	129
5,500	130
6,000	131
6,500	132
7,000	133
7,500	134
8,000	135
8,500	136
9,000	137
9,500	138
10,000	139
11,750	140
12,500	141
13,750	142
15,000	144
16,750	145
17,500	146
18,750	148
>20,000	150

ATTACHMENT C – SCHOOL READINESS CURRICULUM APPROVAL PROCESS – MONITORING CRITERIA

Section 1002.88 (1) (f), Florida Statutes, requires school readiness providers to *"Implement one of the curricula approved by the department that meets child development standards."* The information below is a guide for monitoring curriculum use and implementation.

Requirements	Examples of Indicators	Results
Providers must select the approved version, year, or edition list on the most current Approved School Readiness Curricula List.	Selection may be verified by: • Written attestation from provider • Copy of purchase receipt • Visual confirmation	
A copy of the curriculum should remain on-site at the provider and be accessible to teachers.	• Visual confirmation	
Curriculum Implementation	**Examples of Indicators**	
Review lesson plan and/or interview for evidence of curriculum implementation to ensure alignment to the Florida Early Learning and Developmental Standards: Birth to Kindergarten.	Lesson plan review: • Are learning activities representative of all early learning domains? • Are activities both child guided and teacher guided? • Does the schedule allow for a variety of learning experiences including play, large group, small group, and outdoor time? • Are there opportunities for flexibility?	
If a lesson plan is not available for review, implementation may be verified though interview and or/observation.	Interview/observation: • Talk about the curriculum you use. • How does the curriculum meet the needs of children in your program? • How do you think the curriculum promotes learning for young children? • How do the children respond to the curriculum? • Tell me about the training you have received on this curriculum. • How do you involve families?	

Additional Comments:

_____
_____
_____
_____
_____
_____

Follow-up Required:

_____
_____
_____
_____
_____

ATTACHMENT D – SCHOOL READINESS PROVIDER MONITORING CHART

Risk Indicator	SR Program Risk Assessment	Enter x for each area of non-compliance*	Comments
		NA	
#1	**I. PARTIES AND TERMS OF THE CONTRACT** a. Not transferred/assigned contract		
	II. PROVIDER ELIGIBILITY a. Provider type and services **(informational)**	NA	
#2	b. Licensed or legally operating		
#3	**III. PROVIDER RESPONSIBILITIES** a. Child care*		
#4	b. Healthy and safe environment		
#5	c. Quality improvement plans, if applicable		
#6	d. Developmentally appropriate curriculum		
#7	e. A character development program		
#8	f. Developmental screenings*		
#9	g. Unlimited parental access		
#10	h. Contracted slots program, if applicable		
#11	i. Child assessments, if applicable		
#12	j. Daily sign-in/sign-out sheets*, disallowed cost indicator		
#13	k. Enrollment/Attendance Certifications*, disallowed cost indicator		
#14	l. Reporting absences*		
#15	m. Rilya Wilson Act*		
#16	**IV. ACCESS** a. Access to facility		
#17	b. Access to records*		

#18	**V. MAINTENANCE OF RECORDS, DATA AND CONFIDENTIALITY** a. Family data and confidentiality agreements*		
#19	b. Attendance record maintenance*		
#20	c. Maintain records for five years*, disallowed cost indicator		
#21	**VI. COMPENSATION AND FUNDING** a. Private pay rate		
#22	b. Rates and Fees for Parents		
#23	c. Military Subsidies		
#24	d. Parent copayment collection*		
#25	e. Head Start Agencies		
#26	f. Title 20 Schools		
#27	**VII. NONDISCRIMINATION** a. Discrimination		
#28	**VIII. NOTIFICATION** a. Timely unusual incident reporting		
#29	b. Written notification of incident		
#30	**IX. Insurance** a. Worker's compensation insurance		
#31	b. Reemployment assistance insurance		
#32	c. General liability insurance (or Homeowner's liability insurance, informal providers only)		
#33	d. Insurance changes		
	X. MONITORING REVIEW ACKNOWLEDGEMENTS - TOTAL NUMBER OF OVERALL COMPLIANCE OBSERVATIONS	**Total #_____**	**Percentage of Questioned Cost -**

Note:

A provider that has eight or more findings as assessed by this monitoring tool, will be considered high-risk, (.25 x 33 =~ 8). Additionally, if 15 percent or more of the files for risk indicators 12, 13, and 20 in the selected sample result in a disallowed cost, that provider will be considered high-risk. For example, if three out of 20 files result in questioned cost, that provider will be considered high-risk.

***For sampled files, if the error rate is 10% or higher for risk indicators 3, 8, 12, 13, 14, 15, 17, 18, 19, 20, and 24, this will constitute a finding for this criterion that will count toward the high risk assessment identified in section D above. All non-compliance observations will still require corrections, regardless of the error rate percentage.**