



March 22, 2011

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

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

SUBJECT: Review of the United Planning Organization's Compliance With Health and Safety Regulations for Head Start Programs (A-03-09-00369)

Attached, for your information, is an advance copy of our final report on the United Planning Organization's (UPO) compliance with health and safety regulations for Head Start programs. We will issue this report to UPO within 5 business days. The Administration for Children and Families, Office of Head Start, requested this review.

If you have any questions or comments about this report, please do not hesitate to call me, or your staff may contact Lori S. Pilcher, Assistant Inspector General for Grants, Internal Activities, and Information Technology Audits, at (202) 619-1175 or through email at Lori.Pilcher@oig.hhs.gov or Stephen Virbitsky, Regional Inspector General for Audit Services, Region III, at (215) 861-4470 or through email at Stephen.Virbitsky@oig.hhs.gov. Please refer to report number A-03-09-00369.

Attachment



Office of Audit Services, Region III
Public Ledger Building, Suite 316
150 S. Independence Mall West
Philadelphia, PA 19106-3499

March 24, 2011

Report Number: A-03-09-00369

Mr. Dana M. Jones
President and Chief Executive Officer
United Planning Organization
301 Rhode Island Avenue, NW
Washington, DC 20001

Dear Mr. Jones:

Enclosed is the U.S. Department of Health & Human Services (HHS), Office of Inspector General (OIG), final report entitled *Review of the United Planning Organization's Compliance With Health and Safety Regulations for Head Start Programs*. We will forward a copy of this report to the HHS action official noted on the following page for review and any action deemed necessary.

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

Section 8L of the Inspector General Act, 5 U.S.C. App., requires that OIG post its publicly available reports on the OIG Web site. Accordingly, this report will be posted at <http://oig.hhs.gov>.

If you have any questions or comments about this report, please do not hesitate to call me, or contact Leonard Piccari, Audit Manager, at (215) 861-4493 or through email at Leonard.Piccari@oig.hhs.gov. Please refer to report number A-03-09-00369 in all correspondence.

Sincerely,

/Stephen Virbitsky/
Regional Inspector General
for Audit Services

Enclosure

Direct Reply to HHS Action Official:

Mr. David Lett
Regional Administrator
Administration for Children and Families, Region III
U.S. Department of Health & Human Services
Public Ledger Building, Suite 864
150 South Independence Mall West
Philadelphia, PA 19106

Department of Health & Human Services

**OFFICE OF
INSPECTOR GENERAL**

**REVIEW OF THE UNITED
PLANNING ORGANIZATION'S
COMPLIANCE WITH HEALTH AND
SAFETY REGULATIONS FOR
HEAD START PROGRAMS**



Daniel R. Levinson
Inspector General

March 2011
A-03-09-00369

Office of Inspector General

<http://oig.hhs.gov>

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

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

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

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Notices

THIS REPORT IS AVAILABLE TO THE PUBLIC
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Section 8L of the Inspector General Act, 5 U.S.C. App., requires that OIG post its publicly available reports on the OIG Web site.

OFFICE OF AUDIT SERVICES FINDINGS AND OPINIONS

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

EXECUTIVE SUMMARY

BACKGROUND

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

The United Planning Organization (the Grantee) is a private, nonprofit charitable organization that serves the residents of the District of Columbia (the District) as the city's designated community action agency. The Grantee provides services to 491 Head Start eligible children through a variety of programs at 10 facilities in the District and also provides funding to 5 delegate agencies. The Grantee received \$15,230,321 in Head Start funds from August 1, 2008, through July 31, 2009.

OBJECTIVE

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

SUMMARY OF FINDINGS

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

- The files on 57 of the Grantee's 127 employees (1) lacked a declaration form, (2) lacked evidence of a completed background check, (3) lacked evidence of a completed child protection register check, or (4) contained evidence that employees had convictions for offenses that should have disqualified the individuals from employment in jobs working with children. The files on all 127 employees were not maintained on the facilities' premises.
- The Grantee's driver did not meet all Federal driver-specific preemployment and training requirements.
- The Grantee's 10 childcare facilities did not meet all Federal Head Start and State requirements on protecting children from unsafe materials and equipment.
- Six of the Grantee's childcare facilities did not provide a fully secure environment for the children in their care.

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

State health and safety requirements. The Grantee's failure to comply with these requirements jeopardized the health and safety of children in its care.

RECOMMENDATIONS

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

- all employee files contain evidence of checks of the child protection register and evidence of completed background checks, no applicants are hired if they have been convicted of an offense listed in District regulations, and each facility maintains background check documentation on each employee on the premises;
- all drivers have met Federal driver-specific requirements;
- all unsafe materials and equipment are stored in locked areas out of the reach of children, all necessary repairs are addressed in a timely manner, all unsafe conditions are addressed, and all facilities meet State licensing requirements; and
- all facilities are secure.

UNITED PLANNING ORGANIZATION COMMENTS AND OFFICE OF INSPECTOR GENERAL RESPONSE

In its comments on our draft report, UPO concurred with most of our recommendations and described its actions to address the deficiencies that we identified. UPO did not concur with five findings related to preemployment requirements for its driver, a play area used at the Early Childhood Development Center (ECDC) #3, unlabeled infant formula and a hole in a door at Matthews Memorial, and chipped and cracked walls at the Sunshine Learning Center.

After reviewing the documentation that UPO provided with its comments, we agree that the two issues at Matthews Memorial are not Head Start findings, and we removed them from the report. Although UPO did not concur with the finding about the play area at ECDC #3, it closed the facility on September 30, 2010, which adequately addressed the recommendation. Nothing in UPO's comments caused us to change the remaining findings and recommendations.

UPO's comments are included as Appendix C. We have excluded the attachments accompanying UPO's comments because of their volume.

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INTRODUCTION

BACKGROUND

Federal Head Start Program

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

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

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

Federal and State Regulations for Head Start Grantees

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

In the District of Columbia (the District), all child development facilities must be licensed and must comply with the requirements of Title 29, chapter 3, of the District of Columbia Municipal Regulations (DCMR). Sections 4-1501.03 and .05 of the District's Child and Youth, Safety and Health Omnibus Amendment Act of 2004 (the Act) establish requirements for criminal background checks.

United Planning Organization

The United Planning Organization (the Grantee) is a private, nonprofit charitable organization that serves the residents of the District as the city's designated community action agency. The Grantee provides services to 491 Head Start eligible children through a variety of programs at 10 facilities in the District and also provides funding to 5 delegate agencies. The Grantee received \$15,230,321 in Head Start funds from August 1, 2008, through July 31, 2009.

Office of Inspector General Audits

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

OBJECTIVE, SCOPE, AND METHODOLOGY

Objective

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

Scope

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

We performed our fieldwork from August 10 through October 22, 2009, at the Grantee's administrative office and at its 10 childcare facilities in the District. At one facility, the Dance Institute, we inspected only classrooms operated by the Grantee.¹

Methodology

To accomplish our objective, we:

- selected the Grantee based on prior risk analyses and discussions with ACF officials;
- reviewed Federal and State laws, regulations, and policies related to Federal grant awards and the Head Start program;
- reviewed the Grantee's policies and procedures;
- reviewed the Grantee's files on all 127 Head Start employees;²
- reviewed the Grantee's licenses and documentation of fire inspections;
- visited the Grantee's 10 childcare facilities; and
- discussed our preliminary findings with the Grantee.

¹ The Community Development Institute also operated classrooms at the Dance Institute. We inspected them under a separate report (A-03-09-00361).

² The 127 employees were partially or fully funded by the Head Start grant award.

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objective.

FINDINGS AND RECOMMENDATIONS

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

- The files on 57 of the Grantee's 127 employees (1) lacked a declaration form, (2) lacked evidence of a completed background check, (3) lacked evidence of a completed child protection register check, or (4) contained evidence that employees had convictions for offenses that should have disqualified the individuals from employment in jobs working with children. The files on all 127 employees were not maintained on the facilities' premises.
- The Grantee's driver did not meet all Federal driver-specific preemployment and training requirements.
- The Grantee's 10 childcare facilities did not meet all Federal Head Start and State requirements on protecting children from unsafe materials and equipment.
- Six of the Grantee's childcare facilities did not provide a fully secure environment for the children in their care.

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

BACKGROUND CHECKS

Federal and State Requirements

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

Federal Head Start regulations (45 CFR § 1301.31(b)(2)) state that grantees must require each current and prospective employee to sign a declaration that lists:

- all pending and prior criminal arrests and charges related to child sexual abuse and their disposition,
- convictions related to other forms of child abuse and neglect, and
- all convictions for violent crimes.

In the District, child development facilities must comply with the requirements of “Criminal and Background History Checks” (29 DCMR § 328). Section 328.1 states that each employee must satisfactorily complete a criminal background check as required by the Act. Section 328.1(a) also requires each employee to satisfactorily complete a child protection register check before he or she can be unconditionally employed. Section 4-1501.05(b)(1) of the Act states that “[a]n applicant, employee, or volunteer required to apply for a criminal background check under § 4-1501.03 shall submit to a criminal background check by means of fingerprint and National Criminal Information Center checks conducted by the Mayor and the FBI.”

Pursuant to 29 DCMR § 328.1(e), “[t]he Facility shall deny employment to any person who has been convicted of an offense ... which constitutes a bar to employment in an agency that provides direct services to children ... as more fully described in subsection 313.1(e)” Such offenses include, among others, assault; assault with a dangerous weapon; burglary; robbery; kidnapping; and unlawful distribution or possession of, or possession with intent to distribute, a controlled substance.

Pursuant to 29 DCMR § 327.1(c), each facility must maintain “documentation and results of criminal and background history checks” on the facility premises in accordance with State regulations and with all other applicable Federal and State laws and rules.

Grantee’s Compliance With Federal and State Preemployment Requirements

The Grantee’s files on 57 of the 127 employees lacked evidence of compliance with 1 or more Federal or State preemployment requirements. Specifically:

- The files on 28 of the 127 employees did not contain a completed employee declaration form.
- The files on 27 of the 127 employees did not contain evidence of a background check.
- The files on 26 of the 127 employees did not contain evidence of a child protection register check.
- The background checks on three employees identified convictions for offenses that should have disqualified the individuals from employment in jobs working with children.³ The offenses included assault and battery, distribution of cocaine, and

³ The three employees included a food service aide, a food service driver, and a family services assistant.

possession with the intent to distribute cocaine, with the most recent conviction occurring in 1999.

In addition, the background check documentation for all 127 employees was maintained at the Grantee's administrative office, not on the facilities' premises as required.

By not ensuring that all employees who supervised or had routine unsupervised contact with children met all Federal and State preemployment requirements, the Grantee potentially jeopardized the safety of children in its care.

HEAD START DRIVER-SPECIFIC REQUIREMENTS

Federal Requirements

Pursuant to Federal Head Start regulations (45 CFR § 1310.16(b)), a grantee's applicant review procedure for drivers must include, at a minimum: (1) a review of general grantee staff qualifications with additional disclosure by the applicant of all moving traffic violations, regardless of penalty;⁴ (2) a check of the applicant's driving record through the appropriate State agency, including a check of the applicant's record through the National Driver Register, if available in the State; and (3) a medical examination by a licensed doctor of medicine or osteopathy, after a conditional offer of employment and before the applicant begins work, establishing that the individual is physically able to perform job-related functions with any necessary accommodations. In addition, 45 CFR § 1310.10(c) states that each agency providing transportation services is responsible for compliance with the applicable requirements of 45 CFR § 1310.

Federal Head Start regulations 45 CFR § 1310.17(b) also require that each grantee providing transportation services ensure that drivers receive a combination of classroom instruction and behind-the-wheel instruction before transporting children.

OHS's "Requirements for Head Start Bus Drivers" states that, prior to finalizing the hiring of a busdriver, an agency must be sure the applicant, among other requirements:

- passes a criminal background check,
- passes a screening for alcohol and drugs, and
- has good hearing and at least 20/40 vision with or without glasses.⁵

⁴ The general qualifications for a grantee's staff are specified in 45 CFR § 1304.52(b).

⁵ OHS, "Requirements for Head Start Bus Drivers," *Transportation Pathfinder*. Available online at <http://eclkc.ohs.acf.hhs.gov/>. Accessed on May 19, 2010.

Grantee's Compliance With Driver-Specific Requirements

Our review of the Grantee's files for its one driver found that the Grantee did not fully comply with the Federal preemployment and training requirements for drivers. Specifically, the file showed no evidence of classroom and behind-the-wheel training, no evidence of alcohol and drug screening, and no evidence of a hearing and vision test.

MATERIAL AND EQUIPMENT SAFETY

Federal and State Requirements

Pursuant to Federal Head Start regulations (45 CFR § 1304.53(a)(7)), grantees must provide for the maintenance, repair, and safety of all Head Start facilities, materials, and equipment. The regulations (45 CFR § 1304.53(a)) require, among other things, that:

- each facility ensure that paint coatings on interior and exterior premises do not contain hazardous quantities of lead;
- the center-based environment is free of toxins, such as cigarette smoke, lead, and other air pollutants, as well as soil and water contaminants;
- all medications, including those required for staff and volunteers, be labeled, stored under lock and key, refrigerated if necessary, and kept out of the reach of children;
- rooms be well lit and provide emergency lighting in the case of power failure;
- approved, working fire extinguishers be readily available;
- an appropriate number of smoke detectors be installed and tested regularly;
- exits be clearly visible and evacuation routes be clearly marked and posted; and
- the selection, layout, and maintenance of playground equipment and surfaces minimize the possibility of injury to children.

Furthermore, 45 CFR § 1304.22(f) requires that first aid kits be readily available, well supplied, restocked, and inventoried at regular intervals.

Pursuant to 45 CFR § 1306.30(c), grantees also must ensure that Head Start facilities comply with any State and local licensing requirements. If these licensing standards are less comprehensive or stringent than the Head Start regulations or if no State or local licensing standards are applicable, grantees must ensure that their facilities comply with the Head Start Program Performance Standards related to health and safety found in 45 CFR § 1304.53(a).

State regulations (29 DCMR § 304.1) specify that before applying for a license, each facility must secure a certificate of occupancy for the premises or equivalent proof that the premises

comply with all applicable Federal and District fire, safety, building, and zoning regulations and codes. Each application must contain certification that the facility is free from lead-based paint hazards (29 DCMR § 306.3(k)).

State regulations (29 DCMR § 305) also require that each child development facility undergo an annual fire safety inspection and obtain certification that the premises conform to all applicable fire safety and related codes. The certification must be issued by the Department of Fire and Emergency Medical Services or by the Department of Consumer and Regulatory Affairs upon each annual application for license renewal.

State regulations (29 DCMR § 340.3) specify that during the summer months the temperature within each room of program space in the facility be maintained between sixty-eight degrees Fahrenheit (68°F) and eighty-two degrees Fahrenheit (82°).

State regulations (29 DCMR § 361.4) require that each facility provide bathroom facilities for use by adults separate from those for use by children.

State regulations (29 DCMR § 363) provide guidelines for the general safety and maintenance of child daycare facilities. These guidelines specify that, among other things:

- all playthings, equipment, materials, and furnishings shall not have sharp points or rough edges;
- unused electrical outlets that are within the reach of children be fitted with appropriate childproof protective receptacle closures (protective closures); and
- all cleaning and sanitizing supplies, toxic substances, paints, poisons, aerosol containers, and other items bearing warning labels be safely stored and kept inaccessible to children.

State regulations (29 DCMR § 367.1) specify that outdoor play spaces on the facility premises be enclosed with a fence or natural barrier that is at least 48 inches high, with a space no larger than 3.5 inches between its bottom edge and the ground, and designed to discourage climbing.

State regulations (29 DCMR § 367.13) specify that the center director, caregiver, or designated facility staff at each facility must thoroughly inspect each piece of playground equipment at least monthly for the following hazards:

- visible cracking, bending, warping, rusting, or breaking;
- exposed, cracked, or loose cement support footings;
- exposed tubing ends that require plugs or cap covers;
- accessible sharp edges or points;
- protruding bolt ends that require caps or covers;

- loose bolts, nuts, or screws that require tightening;
- splintered, cracked, or otherwise deteriorating wood; and
- exposed hard surfaces, especially under swings and slides.

State regulations (29 DCMR § 369) provide guidelines for emergency preparedness and first aid. Each facility must obtain and maintain a sufficient quantity of first aid supplies on the facility premises. The facility must maintain these supplies in a designated location that is readily available to staff and inaccessible to children.

State regulations (29 DCMR § 374.1) provide guidelines for infant formula. Each facility must ensure that feeding bottles for an infant or toddler be labeled with the name of the child to whom they belong and the date of preparation.

State regulations (29 DCMR § 377.2) specify that the facility must ensure that each medication ordered or prescribed is maintained by the facility in its original container and clearly labeled with the name of the child for whom it has been ordered or prescribed, the name of the medicine, the dosage, the method of administration, and the name and telephone number of the child's licensed health care practitioner.

Grantee's Compliance With Material and Equipment Safety Requirements

The Grantee's childcare facilities did not meet all Federal Head Start and State health and safety regulations on protecting children. Only 1 of the Grantee's 10 facilities, the Early Childhood Development Center (ECDC) #3, provided evidence that the facility was free from lead-based paint hazards. In addition, we noted the following deficiencies at the 10 facilities, and we discussed the deficiencies with the facility managers on duty during our visits. In some instances, the facility managers took immediate steps to address our concerns.

ECDC #1 (visited August 12–14, 2009)

- An uncovered bucket of washing powder with a warning label was located next to the dryer in a separate room with a closed but unlocked door that was accessible to children.
- The facility had no emergency lighting in the event of a power failure.
- Evacuation routes were not posted.
- Several electrical outlets in five classrooms lacked protective closures.
- A classroom had a hole in the wall covered with tape.
- Padding covering a concrete pillar in the middle of the play area was torn, exposing children to possible harm (Appendix A, Photograph 1).

- A child's inhaler did not have a name on it.
- First aid kits contained expired items.
- Two classrooms had glue traps (Appendix A, Photograph 2).

ECDC #3 (visited August 20, 2009)

- Holes in the fence enclosing the play area had been repaired with chains and locks. The chains and locks had sharp edges that exposed children to possible injury (Appendix A, Photograph 3).

ECDC #4 (visited August 11 and 12, 2009)

- The facility had no emergency lighting in the event of a power failure.
- Only one of the four classrooms had a fire extinguisher.
- First aid kits contained expired items.

ECDC #5 (visited August 10 and 11, 2009)

- The wall near the facility's front door had multiple holes (Appendix A, Photograph 4).
- The temperature in the facility was 85 degrees.
- Electrical outlets in all classrooms lacked protective closures.
- First aid kits contained expired medications.

ECDC #8 (visited August 19, 2009)

- Electrical outlets in two classrooms lacked protective closures.
- First aid kits contained expired items.
- A classroom had a glue trap.
- Ceiling tiles were water stained and appeared to be moldy.

ECDC #9 (visited August 18, 2009)

- One classroom had cracked tiles. A report on an inspection that the District's Child Care Licensing Branch conducted in February 2009 also noted these broken tiles.

- The wooden fence enclosing the outdoor play area had loose boards with protruding nails that exposed children to possible injury (Appendix A, Photograph 5).
- Four unpadded metal support posts in the middle of the outdoor play area exposed children to possible injury (Appendix A, Photograph 6).
- A power strip accessible to children lacked protective closures.
- Expired infant formula was in the refrigerator.
- The first aid kit contained expired medication.

ECDC #10 (visited August 17, 2009)

- Cleaning and sanitizing supplies with warning labels were stored on the floor in an unlocked closet that was accessible to children.
- The outdoor play area was littered with debris, including large pieces of wood, a condom, clothing, and trash bags (Appendix A, Photograph 7).
- Separate bathroom facilities for staff and children were not available.
- Electrical outlets in three classrooms lacked protective closures.
- The children's bathroom had a glue trap.
- Ceiling tiles in two areas of a classroom were water stained and appeared to be moldy (Appendix A, Photograph 8).

Dance Institute (visited August 11 and 12, 2009)

- A tree stump on the playground exposed children to possible injury (Appendix A, Photograph 9).
- The first aid kit contained expired items.
- The fire inspection approval certificate expired on July 29, 2009.

Matthews Memorial (visited October 19 and 20, 2009)

- Cleaning and sanitizing supplies with warning labels were stored in an unlocked closet accessible to children (Appendix A, Photograph 10).
- The facility had emergency lighting only in the kitchen.

- A child's inhaler did not have a name on it, and none of the staff knew whom it belonged to.
- A child's allergy medicine that expired in June 2009 did not have a name on it.
- Several electrical outlets in a classroom lacked protective closures.
- The first aid kit contained expired items.

Sunshine Learning Center (visited October 21 and 22, 2009)

- A fire extinguisher on a classroom shelf was accessible to children (Appendix A, Photograph 11).
- The floor tiles and the walls in five classrooms were chipped and cracked (Appendix A, Photograph 12).
- Loose floor strips and frayed carpeting in one of the classrooms created tripping hazards.
- Raised rubber padding near a slide in the play area created a tripping hazard.
- Evacuation routes were not posted in two classrooms.
- Electrical outlets in nine classrooms lacked protective closures.
- First aid kits contained expired medications.
- The fire inspection approval certificate expired on September 23, 2009.

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

FACILITY SECURITY

Federal and State Requirements

Pursuant to Federal Head Start regulations 45 CFR § 1304.53(a)(7), grantees must provide for the security of all Head Start facilities. The regulations (45 CFR § 1304.53(a)(9)) require that outdoor play areas at center-based programs be arranged so as to prevent any child from leaving the premises and entering unsafe and unsupervised areas.

State regulations (29 DCMR § 342) require that an outdoor play area be in an enclosed yard on the facility premises, in a nearby park or playground, or in a rooftop play space that meets State safety standards. State regulations (29 DCMR § 367) also specify that each facility with an outdoor play area on the premises enclose the space with a fence or natural barrier that is at least

48 inches high, with a space no larger than 3.5 inches between its bottom edge and the ground, and designed to discourage climbing.

Grantee's Compliance With Facility Security Requirements

Six of the Grantee's childcare facilities did not meet all Federal Head Start and State facility security regulations. We noted the following deficiencies at the six facilities, and we discussed the deficiencies with the facility managers on duty during our visits. In some instances, the facility managers took immediate steps to address our concerns.

ECDC #1 (visited August 12 – 14, 2009)

- The fence enclosing the play area was only 40 inches high in several locations (Appendix B, Photograph 1).
- The bottom of the chain link fence that enclosed the play area was not anchored sufficiently to prevent children from crawling under it and leaving the premises.

ECDC #3 (visited August 20, 2009)

- The play area was not completely enclosed by a fence, giving children access to a parking lot.

ECDC #5 (visited August 10 and 11, 2009)

- Several areas of the fence enclosing the play area had 5 inches of space between the bottom edge and the ground.
- There was a 6-inch hole at the bottom of the fence and a 4-inch gap between the fence and the gate, which allowed children to enter unsafe and unsupervised areas.

Dance Institute (visited August 11 and 12, 2009)

- The entrance to the outdoor play area did not have a gate, allowing children to leave the premises and unauthorized people to enter the play area (Appendix B, Photograph 2).
- The fence enclosing the play area had a very large hole that a child could easily fit through and enter unsafe and unsupervised areas (Appendix B, Photograph 3).

Matthews Memorial (visited October 19 and 20, 2009)

- The fence enclosing the play area had 1½ inches of space between the bottom edge and the ground.

Sunshine Learning Center (visited October 21 and 22, 2009)

- The fence enclosing the play area had 6 inches of space between the bottom edge and the ground.
- The fence enclosing the play area was only 43 inches high.

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

INADEQUATE OR INCONSISTENTLY FOLLOWED PROCEDURES

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

RECOMMENDATIONS

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

- all employee files contain evidence of checks of the child protection register and evidence of completed background checks, no applicants are hired if they have been convicted of an offense listed in District regulations, and each facility maintains background check documentation on each employee on the premises;
- all drivers have met Federal driver-specific requirements;
- all unsafe materials and equipment are stored in locked areas out of the reach of children, all necessary repairs are addressed in a timely manner; all unsafe conditions are addressed, and all facilities meet State licensing requirements; and
- all facilities are secure.

UNITED PLANNING ORGANIZATION COMMENTS

In its comments on our draft report, UPO concurred with most of our recommendations and described its actions to address the deficiencies that we identified. UPO did not concur with five findings. It stated that its driver met all Federal requirements and provided previously submitted documentation that the driver had received a medical examination and held a commercial license. UPO also stated that children never used the play area enclosed by a hazardous fence at ECDC #3 and that the infant formula observed at the Matthews Memorial facility was not for UPO's Head Start children because UPO did not have an infant program agreement with the facility. UPO agreed that the tiles on the floor at the Sunshine Learning Center were chipped and cracked but disagreed that the walls were also damaged.

UPO's comments are included as Appendix C. We have excluded the attachments accompanying UPO's comments because of their volume.

OFFICE OF INSPECTOR GENERAL RESPONSE

UPO's documentation did not show that its driver received classroom and behind-the-wheel training, alcohol and drug screening, or a hearing and vision test. The photographs of the drywall in five classrooms at the Sunshine Learning Center show that the walls were chipped and cracked, and we have amended our report to include a photograph showing the chipped and cracked walls (Appendix A, Photograph 12). Nothing in UPO's comments caused us to change these findings and recommendations.

During our visit to the ECDC #3 facility, we observed children using the play area enclosed by a hazardous fence. UPO closed this facility on September 30, 2010, which adequately addressed the recommendation.

We have removed the findings related to unlabeled formula in the refrigerator and the hole in the door to the infant's room at the Matthews Memorial facility because UPO did not have a Head Start infant program agreement at Matthews Memorial.

APPENDIXES

APPENDIX A: LACK OF COMPLIANCE WITH MATERIAL AND EQUIPMENT SAFETY REQUIREMENTS



Photograph 1 – Taken at ECDC #1 on 8/12/2009 showing torn padding covering a concrete pillar in the middle of the play area, exposing children to possible harm.



Photograph 2 – Taken at ECDC #1 on 8/12/2009 showing a glue trap with a dead roach in it.



Photograph 3 – Taken at ECDC #3 on 8/20/2009 showing holes in the fence enclosing the play area that had been repaired with chains and locks. The chains and locks had sharp edges that exposed children to possible injury.



Photograph 4 – Taken at ECDC #5 on 8/11/2009 showing holes in the wall near the front door of the facility.



Photograph 5 – Taken at ECDC #9 on 8/18/2009 showing the wooden fence enclosing the play area. Some of the boards were loose and had protruding nails that exposed children to possible injury.



Photograph 6 – Taken at ECDC #9 on 8/18/2009 showing four metal support posts in the middle of the outdoor play area. The posts were unpadding and exposed children to possible injury.



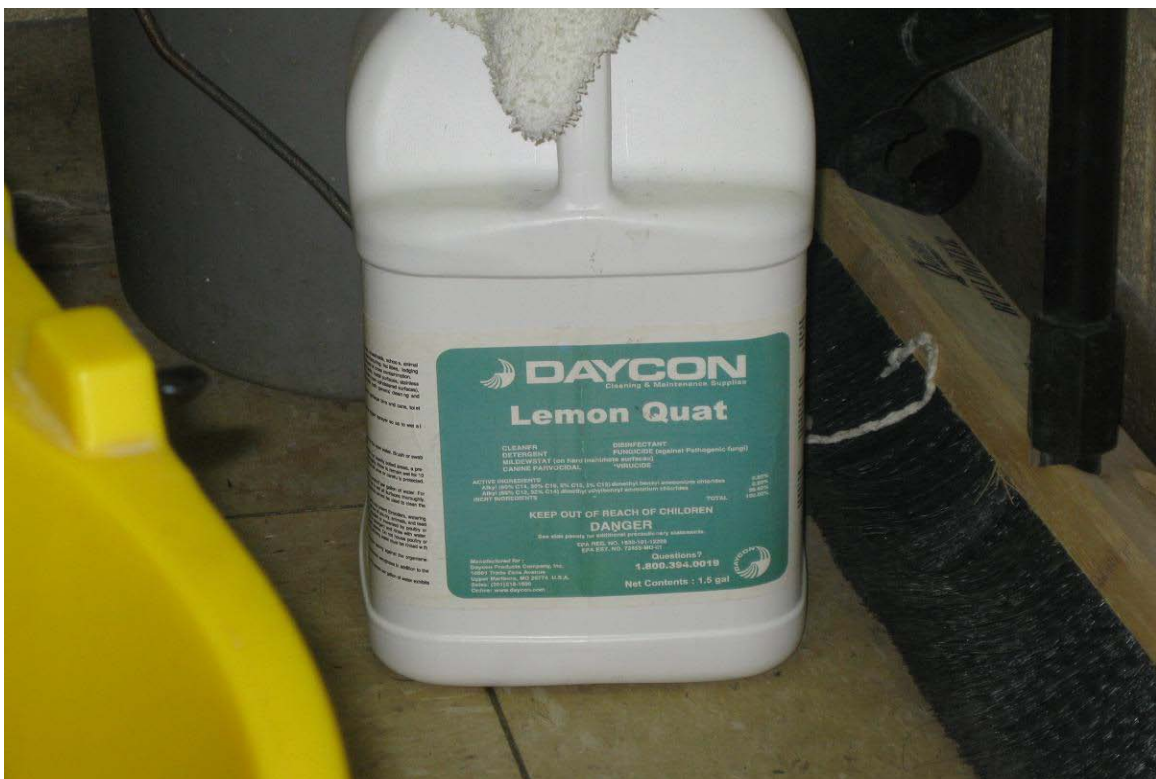
Photograph 7 – Taken at ECDC #10 on 8/17/2009 showing the outdoor play area littered with debris.



Photograph 8 – Taken at ECDC #10 on 8/17/2009 showing water-stained ceiling tiles that appeared to be moldy.



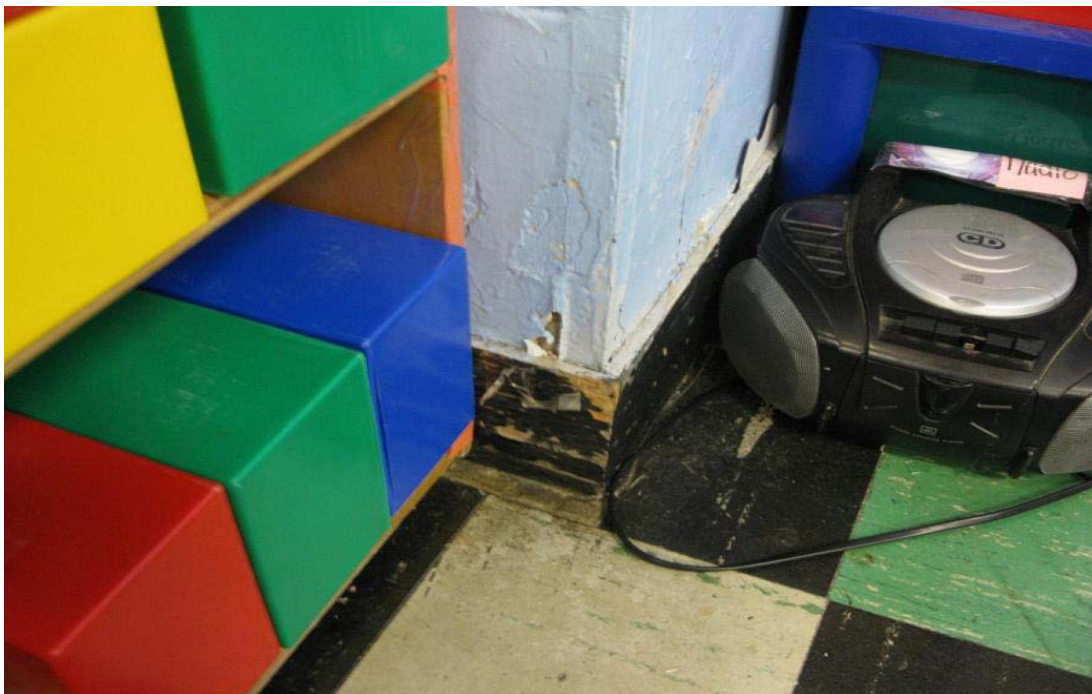
Photograph 9 – Taken at the Dance Institute on 8/11/2009 showing a tree stump on the playground that exposed children to possible injury.



Photograph 10 – Taken at Matthews Memorial on 10/19/2009 showing a dangerous chemical with a warning label in an unlocked closet accessible to children.



Photograph 11 – Taken at Sunshine Learning Center on 10/21/2009 showing a fire extinguisher on a shelf accessible to children.



Photograph 12 – Taken at Sunshine Learning Center on 10/21/2009 showing chipped and cracked drywall in one of the classrooms.

APPENDIX B: LACK OF COMPLIANCE WITH FACILITY SECURITY REQUIREMENTS



Photograph 1 – Taken at ECDC #1 on 8/13/2009 showing that the fence enclosing the outdoor play area was 40 inches high rather than the required 48 inches.



Photograph 2 – Taken at the Dance Institute on 8/11/2009 showing that the entrance to the outdoor play area did not have a gate, allowing children to leave the premises and unauthorized people to enter the play area.



Photograph 3 – Taken at the Dance Institute on 8/11/2009 showing a hole in the fence enclosing the outdoor play area that allowed children to enter unsafe and unsupervised areas.

APPENDIX C: UNITED PLANNING ORGANIZATION COMMENTS

UNITED PLANNING ORGANIZATION
COMMUNITY ACTION AGENCY for WASHINGTON, DC

January 11, 2010

Mr. Stephen Virbitsky
Regional Inspector General
For Audit Services
Department of Health & Human Services
Public Ledger Building, Suite 316
150 S. Independence Mall West
Philadelphia, PA 19106-3499

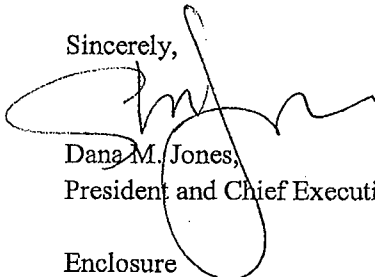
RE: Report Number: A-03-09-00369

Dear Mr. Virbitsky:

Enclosed with attachments are the United Planning Organization's (UPO) comments in response to the U.S. Department of Health & Human Services, Office of Inspector General (OIG), draft report entitled *Review of the United Planning Organization's Compliance With Health and Safety Regulations for Head Start Programs*. Please note, a number of the visited sites reflected in the draft report closed prior to receipt of the draft report and or UPO discontinued contractual relationships with subgrantees prior to receipt of the draft report.

If you have any questions or comments about our comments, please do not hesitate to call me at (202) 238-4695, or contact Monica Scott Beckham, General Counsel, at (202) 238-4702 or through e-mail at mbeckham@upo.org.

Sincerely,



Dana M. Jones,
President and Chief Executive Officer

Enclosure



United Planning Organization's

Comments On

U.S. Department of Health & Human Services, Office of Inspector General (OIG) Draft Report Entitled *Review of the United Planning Organization's Compliance With Health and Safety Regulations for Head Start Programs*

I. Grantee's Compliance With Federal and State Preemployment Requirements

Concurrence:

- The files on 28 of the 127 employees did not contain a completed employee declaration form.

CORRECTIVE ACTION TAKEN August 2010- All 127 employee files, inclusive of the 28 identified, have been completed and signed declaration forms

- The files on 27 of the 127 employees did not contain evidence of a background check.

CORRECTIVE ACTION TAKEN October 2010- All 127 employee files, inclusive of the 28 identified, contain evidence of a Metropolitan Police Department and Federal and Local background checks.

- The files of 26 of the 127 employees did not contain evidence of a child protection register check.

CORRECTIVE ACTION TAKEN September 2010- All 127 employee files, inclusive of the 26 identified, contain evidence of a child protection register checks.

- The background checks on three employees identified convictions for offenses that should have disqualified the individuals from employment in jobs working with children.

CORRECTIVE ACTION TAKEN August 2010- All employees that had disqualifying convictions were counseled and their employment terminated.

- Background check documentation for all 127 employees was maintained at the Grantee's administrative office, not on the facilities premises as required.

CORRECTIVE ACTION TAKEN September 2010- Background check documentation for all 127 employees is maintained on each facilities' premises as required.

All of the above Federal and State Preemployment Requirements are a part of the UPO preemployment protocols. **See attached Appendix A.**

II. Grantee's Compliance With Driver-Specific Requirements

Concurrence and Nonconcurrence:

- Files for its one driver did not contain evidence of classroom and behind-the-wheel Training, no evidence of alcohol and drug screening, and not evidence of a hearing and vision test.

NONCONCURRENCE- Medical Examination Report for Commercial Driver Fitness Determination dated 3/19/09 in Grantee's files. **See attached Appendix B.**

Employee resigned in October 2010 prior to receipt of report.

III. Grantee's Compliance With Material and Equipment Safety Requirements

Concurrence (ECDC #1):

- Uncovered bucket of washing powder with a warning label was located next to the dryer in a separate room with a closed but unlocked door that was accessible to children.

CORRECTIVE ACTION TAKEN August, 2010- Bucket of washing powder removed and lock added to door for safe environment. **See attached Appendix C, ECDC #1, photograph 1.**

- Facility has no emergency lighting in the event of a power failure.

CORRECTIVE ACTION PLANNED- Request for lighting contract completed and vendor selected. Contract to be forwarded to selected vendor by not later than January 14, 2010. In the interim the facility has emergency lamps in the event of a power failure. **See attached Appendix C, ECDC #1, photograph 2.**

- Evacuation routes were not posted.

CORRECTIVE ACTION TAKEN August 2010- Evacuation routes posted. See attached Appendix C, ECDC #1, photograph 3.

- Several electrical outlets in five classrooms lack protective closures.

CORRECTIVE ACTION TAKEN August 2010 – Protective closures were placed on several outlets in each of the five classrooms. See attached Appendix C, ECDC #1, photograph 4.

- A classroom had a hole in the wall covered with the tape.

CORRECTIVE ACTION TAKEN August 2010- New drywall installed. See attached Appendix C, ECDC #1, photograph 5.

- Padding covering a concrete pillar in the middle of the play area was torn, exposing children to possible harm (Appendix A, photograph 1).

CORRECTIVE ACTION TAKEN January 2011. New padding installed to cover concrete pillar in the middle of the play area. See attached Appendix C, ECDC #1, photograph 6.

- A child's inhaler did not have name on it.

CORRECTIVE ACTION TAKEN August 2010- All medications properly stored and labeled. See attached Appendix C, ECDC #1, photograph 7.

- First aid kits contained expired items.

CORRECTIVE ACTION TAKEN August 2010- Zee Medical restocked all first aid kits and expired items discarded. See attached Appendix C ECDC #1, photograph 8.

- Two classrooms had glue traps. (Appendix A, Photograph 2).

CORRECTIVE ACTION TAKEN August 2010- Glue traps removed and not allowed to be placed at facilities.

NONCONCURRENCE (ECDC# 3):

- Holes in fence enclosing the play area had been repaired with chains and locks. The chains and locks had sharp edges that exposed children to possible injury (Appendix A, Photograph 3).

The play area was never used by the facility as a play area for the children.

Site closed on 9-30-2010 prior to receipt of draft report.

CONCURRENCE (ECDC#4):

● Facility had no emergency lighting in the event of a power failure.
In the interim the facility had emergency lamps in the event of a power failure. **See attached Appendix C, ECDC #4, photograph 2.**

● Only one of the four classrooms had a fire extinguisher.
CORRECTIVE ACTION TAKEN August 2010- One additional fire extinguisher added to site. **See attached Appendix C, ECDC #4, UPO Form.**

● First aid kits contained expired items.
CORRECTIVE ACTION TAKEN August 2010- Zee Medical restocked first aid kits and expired items discarded. **See attached Appendix C, ECDC #4, Zee Medical Invoice.**

Site closed 10-29-10 prior to receipt of draft report.

CONCURRENCE ECDC#5:

●The wall near the facility's front door had multiple holes.
Site closed on 10-20-2010 prior to receipt of draft report and relocated to new facility.

●The temperature in the facility was 85 degrees.
CORRECTIVE ACTION TAKEN August 2010- Classroom thermostats set for 76 degrees daily.

●Electrical outlets in two classrooms lacked protective closures.
CORRECTIVE ACTION TAKEN August 2010- Protective closures were placed on electrical outlets in two classrooms.

●First aid kits contained expired items.
CORRECTIVE ACTION TAKEN August 2010- Zee Medical restocked and expired items discarded. **See attached ECDC #5, Zee Medical Invoice.**

Site closed on 10-20-2010 prior to receipt of draft report and relocated to new facility.

CONCURRENCE (ECDC# 8):

- Electrical outlets in two classrooms lacked protective closures.

CORRECTIVE ACTION TAKEN August 2010- Protective closures placed on electrical outlets in two classrooms.

- First aid kits contained expired items.

CORRECTIVE ACTION TAKEN August 2010- Zee Medical restocked first aid kits and expired items discarded. **See attached Appendix C, ECDC #8, Zee Medical Invoice.**

- A classroom had a glue trap.

CORRECTIVE ACTION TAKEN August 2010-Glue trap removed and not allowed to be placed at facilities.

- Ceiling tiles were water stained and appeared to be moldy.

CORRECTIVE ACTION TAKEN August 2010- Water stained ceiling tiles removed and replaced. **See attached Appendix C, ECDC #8, photograph 9.**

CONCURRENCE ECDC# 9:

- One classroom had cracked tiles. A report on an inspection that the District's Child Care Licensing Branch conducted in February 2009 also noted these broken tiles.

Site closed on 3-26-10 prior to receipt of draft report

- Wooden fence enclosing the outdoor play area had loose boards with protruding nails that exposed children to possible injury (Appendix A, Photograph 5).

Site closed on 3-26-10 prior to receipt of draft report

- Four unpadded metal support posts in the middle of the outdoor play area exposed children to possible injury (Appendix A, Photograph 6).

Site closed on 3-26-10 prior to receipt of draft report

- A power strip accessible to children lacked protective closures.

Site closed on 3-26-10 prior to receipt of draft report

- Expired infant formula was in the refrigerator.

Site closed on 3-26-10 prior to receipt of draft report

- The first aid kit contained expired medication.

CORRECTIVE ACTION TAKEN September 2009- Zee Medical restocked and expired items discarded. **See attached Appendix C, Zee Medical Invoice.**

CONCURRENCE ECDC# 10

- Cleaning and sanitizing supplies with warning labels were stored on the floor in an unlocked closet that was accessible to children.

CORRECTIVE ACTION TAKEN July 2010- Cleaning and sanitizing supplies with warning labels stored in locked cabinet that is not accessible to children.

- The outdoor play area was littered with debris, including large pieces of wood, a condom, clothing, and trash bags (Appendix A, Photograph 7).

Play area owned by the District Government. **Site closed on 9-30-10 prior to receipt of draft report**

- Separate bathroom facilities for staff and children were not available.

CORRECTIVE ACTION TAKEN July 2010 lower restroom designated for staff Use.

- Electrical outlets in three classrooms lacked protective closures.

CORRECTIVE ACTION TAKEN July 2010- Protective closures provided for electrical outlets in three classrooms.

- The children's bathroom had a glue trap.

CORRECTIVE ACTION TAKEN September 2010- All glue traps in children's bathroom discarded and not allowed to be placed in children's bathroom.

- Ceiling tiles in two areas of a classroom were water stained and appeared to be moldy (Appendix A, Photograph 8).

Site closed on 9-30-10 prior to receipt of draft report.

NONCONCURRENCE & CONCURRENCE (Dance Institute):

- A tree stump on the playground exposed children to possible injury (Appendix A, Photograph 9).

CORRECTIVE ACTION TAKEN July 2010. Dance Institute no longer uses photographed Public Playground. Playground installed at Dance Institute facility.

- The first aid kit contained expired items.

CORRECTIVE ACTION TAKEN August 2010- Zee Medical restocked first aid kit and expired items discarded. **See attached Appendix C, Dance Institute, Zee Medical Invoice.**

- The fire inspection approval certificate expired July 29, 2009.

CORRECTIVE ACTION TAKEN July 2010- See attached Appendix C, Dance Institute, Fire Inspection Report.

CONCURRENCE & NONCONCURRENCE (Matthews):

- Cleaning and sanitizing supplies with warning labels were stored on the floor in an unlocked closet that was accessible to children.

CORRECTIVE ACTION PLAN July 2010 - Cleaning and sanitizing supplies with warning labels stored in locked cabinet not accessible to children. **See attached Appendix C, Matthews, UPO Facility Short Checklist and Monitoring Report**

- The facility had emergency lighting only in the kitchen.

CORRECTIVE ACTION PLAN July 2010 to identify locations for needed emergency lighting and request lighting to be placed in identified locations. **See attached Appendix C, Matthews, UPO Facility Short Checklist and Monitoring Report.**

- A child's inhaler did not have a name on it, and none of the staff knew whom it belonged to.

CORRECTIVE ACTION TAKEN July 2010 – Children's medication stored and properly labeled in locked box accessible to office.

- A child's allergy medicine that expired in June 2009 did not have a name on it.

CORRECTIVE ACTION TAKEN July 2010- Expired medication was discarded.

- Three bottles of infant formula in the refrigerator were not labeled with children's names or preparation dates.

NONCONCURRENCE–UPO did not have Head Start infant agreement with subgrantee and formula not used for Head Start children.

- Several electrical outlets in a classroom laced protective closures.

CORRECTIVE ACTION TAKEN July 2010 – Protective closures were placed on the several electrical outlets in the classroom. **See attached Appendix C, Matthews, UPO Facility Short Checklist and Monitoring Report.**

- There was a hole in the door to the infants' room.

NONCONCURRENCE –UPO did not have Head Start infant agreement with

subgrantee.

- The first aid kit contained expired items.

CORRECTIVE ACTION TAKEN April 2010 – Zee Medical restocked first aid kit and expired items discarded. **See attached Appendix C, Matthews, Zee Medical Invoice.**

Slot purchase agreement expired May 2010 prior to receipt of draft report.

CONCURRENCE (Sunshine Learning Center):

- A fire extinguisher on a classroom shelf was accessible to children (Appendix A, Photo 11).

CORRECTIVE ACTION TAKEN July 2010- Fire extinguisher removed from children's access and mounted on wall. **See attached Appendix C, Sunshine, photograph 10 and Monitoring Report.**

- The tiles on the walls and floors in five classrooms were chipped and cracked.
CORRECTIVE ACTION TAKEN December 2010- New tile floors installed and **See attached Appendix C, Sunshine, photograph 11.**
NONCONCURRENCE regarding tiles on walls. The walls are dry wall and no chips or cracks found.

- Loose floor strips and frayed carpeting in one of the classrooms created tripping hazards.

CORRECTIVE ACTION TAKEN July 2010- **See attached Appendix C, Sunshine, photograph 12 and UPO Facility Short Checklist.**

- Raised rubber padding near a slide in the play area created a tripping hazard.
CORRECTIVE ACTION TAKEN July 2010- **See attached Appendix C, Sunshine, photograph 13.**

- Evacuation routes were not posted in two classrooms.
CORRECTIVE ACTION TAKEN July 2010- Evacuation routes posted in the two classrooms. **See attached Appendix C, Sunshine, photograph 14 and UPO Facility Short Checklist.**

- Electrical outlets in nine classrooms lacked protective closures.

CORRECTIVE ACTION TAKEN July 2010- Protective closures for were placed on electrical outlets in nine classrooms. **See attached Appendix C, Sunshine, photograph 15 and UPO Facility Short Checklist.**

- First aid kits contained expired medications.

CORRECTIVE ACTION TAKEN August 2010- Zee Medical restocked first aid kits and expired items discarded. **See attached Appendix C, Sunshine, Zee Medical Invoice.**

- The fire inspection approval certificate expired on September 23, 2009.

CORRECTIVE ACTION TAKEN April 2010 - See attached Appendix C, Sunshine, DC Fire Inspection Report.

IV. Grantee's Compliance With Facility Security Requirements

CONCURRENCE ECDC# 1:

- The fence enclosing the play was only 40 inches high in several locations (Appendix B, Photograph 1).
- The bottom of the chain link fence that enclosed the play area was not anchored sufficiently to prevent children from crawling under it and leaving the premises.

CORRECTIVE ACTION PLAN- Site Director shall be informed to no longer use the identified play area that is owned and operated by the District of Columbia Department of Parks and Recreation.

CONCURRENCE ECDC#3:

- The play area was not completely enclosed by a fence, giving children access to a parking lot.

Site closed on 9-30-2010 prior to receipt of draft report.

CONCURRENCE ECDC#5:

- Several areas of the fence enclosing the play area had 5 inches of space between the bottom edge and the ground.

Site closed on 10-20-2010 prior to receipt of draft report and relocated to new

facility.

- There was a 6 inch hole at the bottom of the fence and a 4-inch gap between the fence and the gate, which allowed children to enter unsafe and unsupervised areas. **Site closed on 10-20-2010 prior to receipt of draft report and relocated to new facility.**

CONCURRENCE DANCE INSTITUTE:

- The entrance to the outdoor play area did not have a gate, allowing children to leave the premises and unauthorized people to enter the play area (Appendix B, Photograph 2).

CORRECTIVE ACTION TAKEN- Dance Institute does not use photographed Public Playground. Playground installed at Dance Institute facility fall 2010 prior to receipt of draft report.

- The fence enclosing the play area had a very large hole that a child could easily fit through and enter unsafe and unsupervised areas (Appendix B, Photograph 3).

CORRECTIVE ACTION TAKEN- Dance Institute does not use photographed Public Playground. Playground installed at Dance Institute facility fall 2010 prior to receipt of draft report.

CONCURRENCE MATTHEW MEMORIAL:

- The fence enclosing the play area had an 11 ½ inches of space between the bottom edge and ground.

CORRECTIVE ACTION TAKEN SUMMER 2010- Playground demolished prior to receipt of draft report.

CONCURRENCE SUNSHINE LEARNING CENTER

- The fence enclosing the play area had 6 inches of space between the bottom edge and the ground.

CORRECTIVE ACTION PLAN- Plastic/wooden barriers were added to retrofit the 6 inch space at the bottom edge and the ground. **See attached Appendix C, Sunshine, photograph 16.**

- The fence enclosing the play area was only 43 inches high.

CORRECTIVE ACTION PLAN- Request to be made by third week of January to Sunshine Learning Center to correct fence height.