

A photograph of children playing in a park, overlaid with a dark semi-transparent filter. In the foreground, two young boys are focused on building a sandcastle. The boy on the left is wearing a red and grey long-sleeved shirt, and the boy on the right is wearing a blue plaid shirt. They are using yellow plastic buckets and shovels. In the background, other children are playing: one girl in a pink shirt is jumping rope, and another boy in a blue shirt is playing with a ball. The scene is set in a grassy area with trees in the distance.

FY24 RAN Informational Session

Goals for Today's Session

- 1 Introduce the FY24 RAN monitoring events.
- 2 Review the **content** and **activities** that are part of RAN Reviews.
- 3 Gather questions and share resources to support grant recipients.



Welcome from
Khari M. Garvin
Director, Office of Head Start

Child Health and Safety

The OHS holds a strong and uncompromising position when it comes to the safety of children.

We are committed to continuous quality improvement to improve oversight of Head Start programs, and to supporting our programs in preventing incidents that jeopardize children's safety.

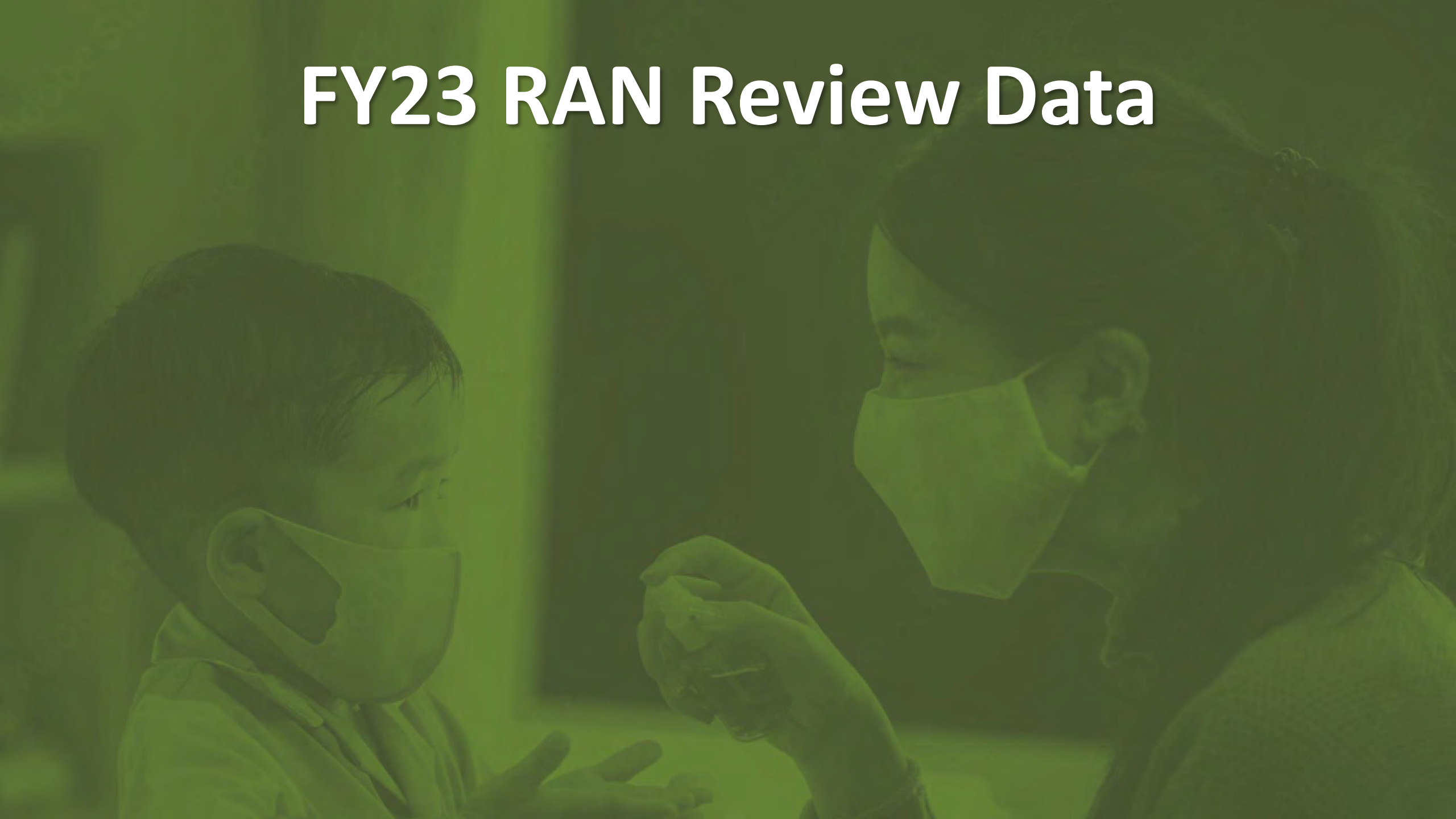
Child Health and Safety is a Priority

As highlighted in the OHS's five national priority areas:

- OHS expects that each child served in Head Start and Early Head Start programs is kept safe and secure
- Head Start programs will be a safe space for children to thrive.
- OHS will ensure that programs remain safe environments that children and families can trust for the critical services they need to support their success.



FY23 RAN Review Data



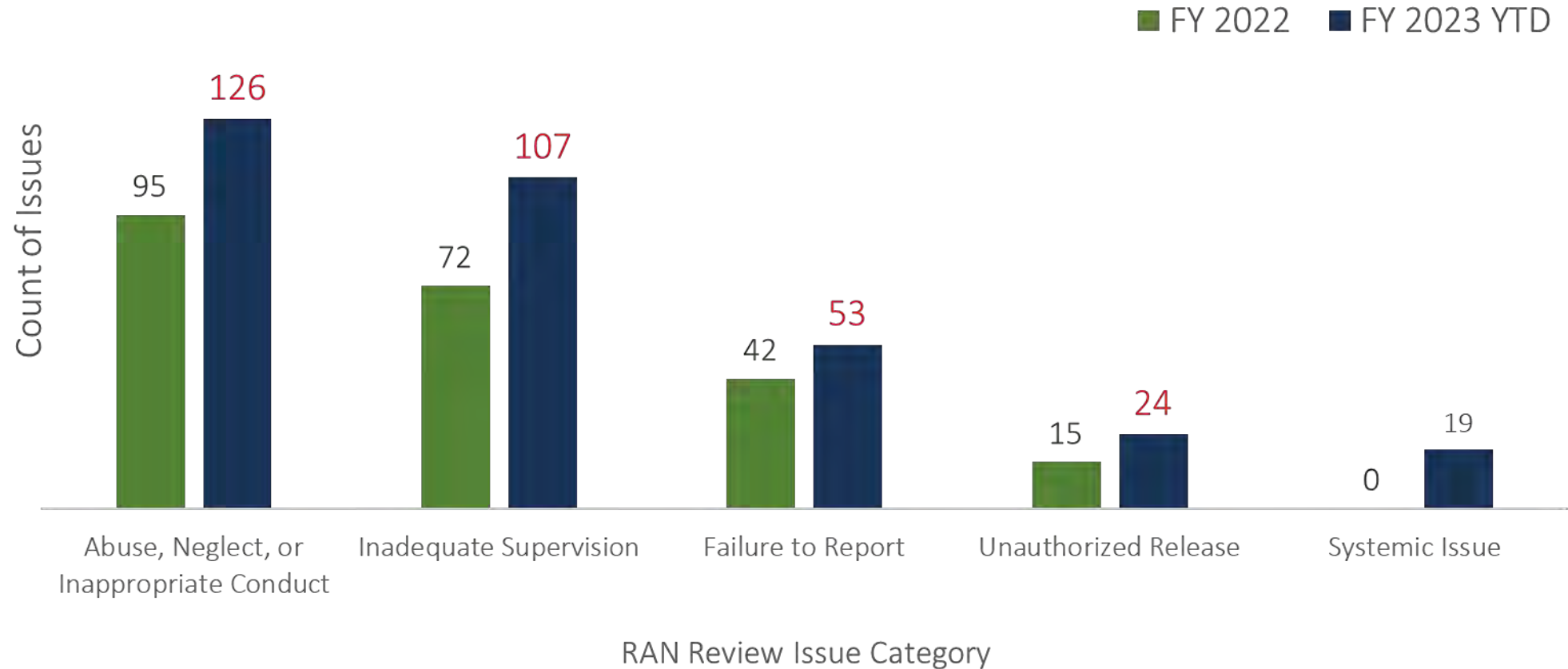
FY23 RAN Review Data

RAN reviews are conducted in response to a potential adverse child safety issue (abuse, neglect or inappropriate conduct; inadequate supervision; unauthorized release).

In FY23:

- **245 RAN reviews** have been conducted with reports shipped, **reviewing 223 grants** (with more reviews to be completed through Sept. 30)
- **329 findings** have been issued on RAN reviews

RAN Review Issues by Category FY22 to FY23 Comparison



Child Health and Safety Incidents



Incident Reporting

- Grant recipients will need to provide the following information when reporting:
 - Program information
 - Information about child/ren impacted by incident
 - Information about adult(s) involved in the incident
 - Incident details
 - Reporting details
 - Contributing factors
 - Actions taken
- Grant recipients should also provide any supporting documentation such as witness statements.



Sample Incident Reporting Form

Sample Incident Reporting Form

Program Information
 Recipient Name: _____
 Grant(s) #: _____

Subrecipient/Partnership:


Incident Number	Date Incident Occurred	Date program became aware of incident	Date reported to state, local or tribal entities	Date reported to OHS
Incident 1				
Incident 2				
Incident 3				

Additionally, has the recipient made reports to the following parties?

Additional Reporting	Notified Y/N	Date Notified	Additional Details (such as mode of notification, details of notification, etc.)
Notified all families of involved or potentially affected children (such as children in the same classroom, setting, etc.)			
Notified licensing agency or tribal agency			
Notified law enforcement			
Notified child protective services			
Notified governing body			
Notified Policy Council			

If law enforcement was involved please provide the details of their involvement:

If this was reported by a public media source, please provide the details of the news outlet (newspaper, stations, available video, including links to the sources):



- Purpose:
 - Ensure consistency in reporting of child incidents to the OHS.
 - Obtain necessary information about child incidents that have occurred.
- It is *recommended* that recipients use the Incident Reporting Form for each incident experienced and then attach the completed Incident Report Form(s) as part of the HSES incident notification to the Regional Office.
- Regional Offices will use the information provided on the Incident Reporting Form to facilitate initial discussions with grant recipients about the incident(s).



Child Health and Safety Incidents

There are two components of a child health and safety incident.



Child Health and Safety Incidents

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The
systems
that
support
health
and
safety

Root Cause Analysis Guide: Key Topics

Policies,
Procedures
and Staff
Training

Ongoing
Monitoring
and Staff
Supervision

Promoting
Positive
Environments

Mental
Health
Supports

Incident Types



Emergency Incidents

- **Physical abuse** is the intentional* act by a staff member or other adult to a child to cause physical harm to a child's body. Physical abuse may result in bruises, lacerations, fractured bones, burns, internal injuries, or serious bodily harm.
- **Sexual Abuse** is a term used to describe the employment, use, persuasion, inducement, enticement, or coercion of a child to engage in, or assist another person to engage in, sexually explicit conduct or the rape, molestation, prostitution, or other form of sexual exploitation of children, or incest with children.
- **Serious Child Injury** that require either hospitalization or emergency medical treatment.

Significant Incidents

- **Verbal or Emotional Abuse** - Occurs when an adult's actions or inactions cause harm to a child's psychological or intellectual functioning.
- **Neglect** - Frequently defined as the failure of a staff member with responsibility for the child to provide needed food, clothing, shelter, and/or medical care to the degree that the child's health, safety, and well-being are threatened with harm.
- **Inadequate Supervision** - Incidents involving lack of supervision while in the care or under the supervision of the which includes leaving a child alone anywhere on the grounds of a Head Start facility, as well as outside the facility in a parking lot, on a nearby street, or on a bus or another program-approved transportation or excursion.
- **Unauthorized Release** - Incidents where a child is released from a Head Start facility, bus, or other program-approved transportation to a person who does not have the permission or authorization from the child's parent or legal guardian to receive the child or to a location where no adult is present.
- **Inappropriate Conduct** - Any behavior or interaction between an adult and a child(ren) that is not best practice



RAN Protocol

Risk Assessment Notification (RAN) Review
Fiscal Year (FY) 2024 Monitoring Protocol

Risk Assessment Notification (RAN) Review Monitoring Protocol


Purpose
The Head Start Risk Assessment Notification (RAN) review will be conducted as needed, when the Office of Head Start (OHS) requires more information about a significant incident affecting the health and safety of program participants. The RAN review will:

- Document serious health and safety incidents and ensure that grant recipients are following requirements for timely, accurate reporting
- Identify if there are contributing program or management factors that may have enabled the incident
- Communicate any required corrective action steps to the grant recipient
- Provide feedback and inform support to strengthen program management approaches and prevent similar incidents from occurring in the future

The OHS will utilize information from RAN reviews to understand regional and national data trends, target support to grant recipients, and ensure healthy and safe learning environments for children, families, and program staff.

Approach

Exhibit 1: RAN Review Process



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graph LR; A[Incident Reporting] --> B[OHS Analysis]; B --> C[RAN Review]; C --> D[Review Report]
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Incident Reporting: Head Start grant recipients are required to immediately report significant incidents affecting the health and safety of program participants. Reports must be submitted immediately through HSES correspondence, and no later than 7 days following an incident. To support grant recipients in meeting this requirement, OHS is providing a sample template within this protocol that can be used to meet the reporting requirement (see page 9).

Incident reports must be sent to the Program Specialist or Regional Program Manager at the Regional Office through HSES correspondence. Grant recipients may refer to ACF-IH-HS-22-07 Reporting Child Health and Safety Incidents for more information. If you have any questions about the reporting requirement, contact your Program Specialist.

OHS Analysis: Upon receiving a report of a significant health and safety incident, the OHS will review the information and reach out to the program to request any additional information, as needed. Based on the information provided about the incident, the OHS will determine if a RAN review is required.

RAN Review: If a RAN review is initiated, the Regional Office will contact the grant recipient to schedule the review, which is conducted by the Program Specialist. The review is comprised of a virtual data tour.

The RAN Protocol is formatted in the same manner as the FA1 and FA2 Protocols.

It includes information about the:

- Purpose of RAN reviews
- Approach used for the RAN review process
- Roadmap to the RAN Protocol
- Content Areas, Performance Areas, and Performance Measures in a RAN review
- Federal regulations focused on in a RAN review
- Examples of data, documents, and systems recipients should be prepared to share during a RAN review



Substantial or Systemic Failures

During a RAN review, OHS may determine an area of failure under two categories: Substantial or Systemic.

Substantial failure is a significant one-time failure to meet the requirements.

For example, when there is actual physical or emotional harm done to children or there is fraud, waste and abuse detected.

Examples include kicking, punching, spanking, verbally assaulting, or sexually abusing children. Other examples include embezzlement of funds, lack of internal controls, and falsifying records.

Substantial or Systemic Failures (continued)

Systemic failure

- Systems must be established to ensure all staff, consultants, contractors and volunteers are in compliance with Head Start Program Performance Standards. These systems must include enough safeguards to ensure the health and safety of children, facilities, and federal funds are protected.
- A systemic failure could include but is not limited to monitoring staff, funds or facilities to ensure compliance, training staff on the appropriate implementation and execution of policies and procedures, ensuring staff abide by the programs code of conduct, ensuring appropriate internal controls, or a high frequency of problems across systems.
- Systemic failure is not exclusively related to the number of times, percentages or frequency an issue occurs. A systemic failure can be identified through a one-time occurrence that is representative of issues related to monitoring, training, or safeguarding children, parents, staff or federal funds in a program.

Regional Office Supports



Regional Office Supports



Incident / Complaint reported to Regional Office



Program Specialist follows-up with organization



Ask Questions



Implement Follow-up Action

Training and Technical Assistance (TTA)

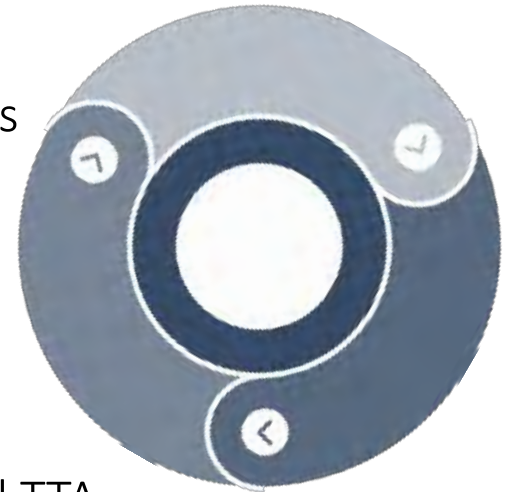


Training and Technical Assistance (TTA)

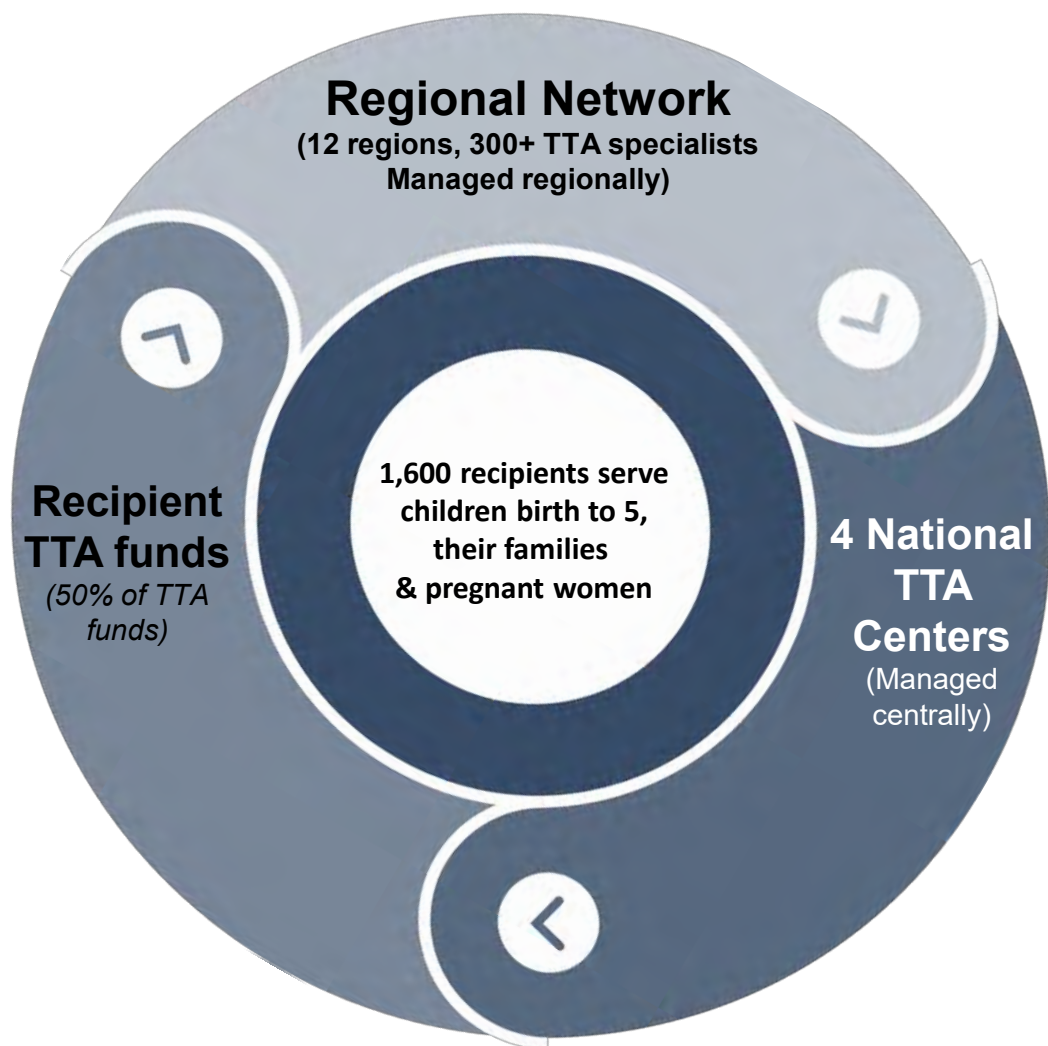
Head Start programs are committed to helping children and families be successful in school and in life.

OHS funds these TTA options to help your program succeed.

- **National TTA Centers** are content experts who create free TTA trainings, tools and resources for Head Start programs. Many resources are on the OHS website, called ECLKC. (<https://eclkc.ohs.acf.hhs.gov/>)
- **Regional TTA teams** are available in your region to help your program reach goals and solve challenges.
- **Recipient TTA funds** allow grant recipients to directly purchase supplemental TTA services from vendors who are not connected to the OHS-funded Regional TTA teams or National Centers.



TTA Support Recipient's Success



OHS TTA SYSTEM OFFERS RECIPIENTS:

- **Training:** group instruction, delivered in-person, online or self-directed.
- **Technical Assistance:** targeted consulting for programs, delivered in-person, by phone or online, and through universally accessible resources.
- **TTA funding** is 2.5%+ of the federal Head Start appropriation (Head Start Act, Sec. 640)

Regional TTA Supports for Responding to Child Incidents

TTA Specialist support can include:

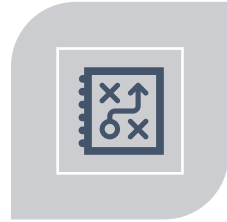
- Completing a root cause analysis
- Identifying strategies and evidence to demonstrate compliance
- Developing a comprehensive written plan
- Implementing and monitoring the plan
- Supporting the implementation of prevention strategies



Most common topics addressed during TTA around child incidents



**SAFETY
PRACTICES**
(32%)



**PROGRAM
PLANNING AND
SERVICES**
(9%)



**QUALITY
IMPROVEMENT
PLAN**
(7%)



STAFF WELLNESS
(7%)



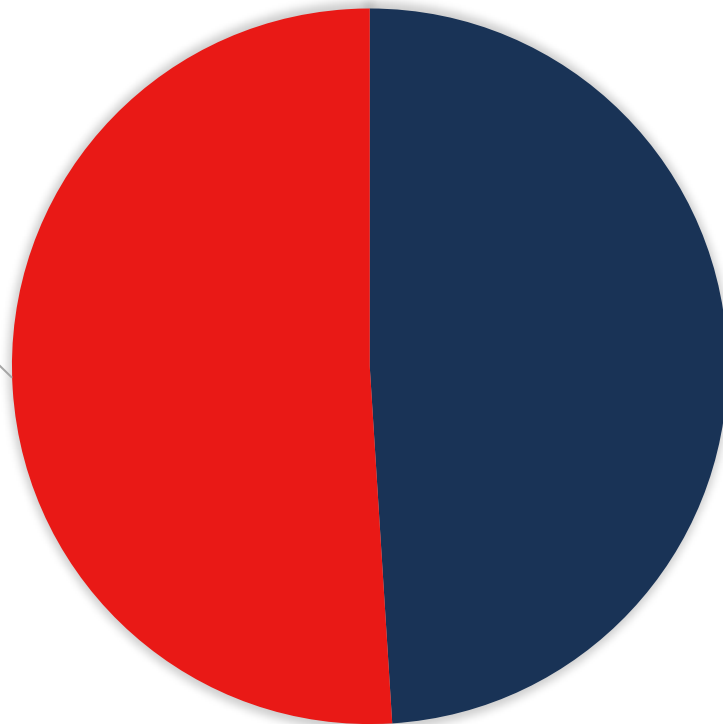
**ONGOING
MONITORING
AND
CONTINUOUS
IMPROVEMENT**
(6%)

**Other common TTA topics around child incidents include
Human Resources, Learning Environments, and Teaching/Caregiving Practices.**



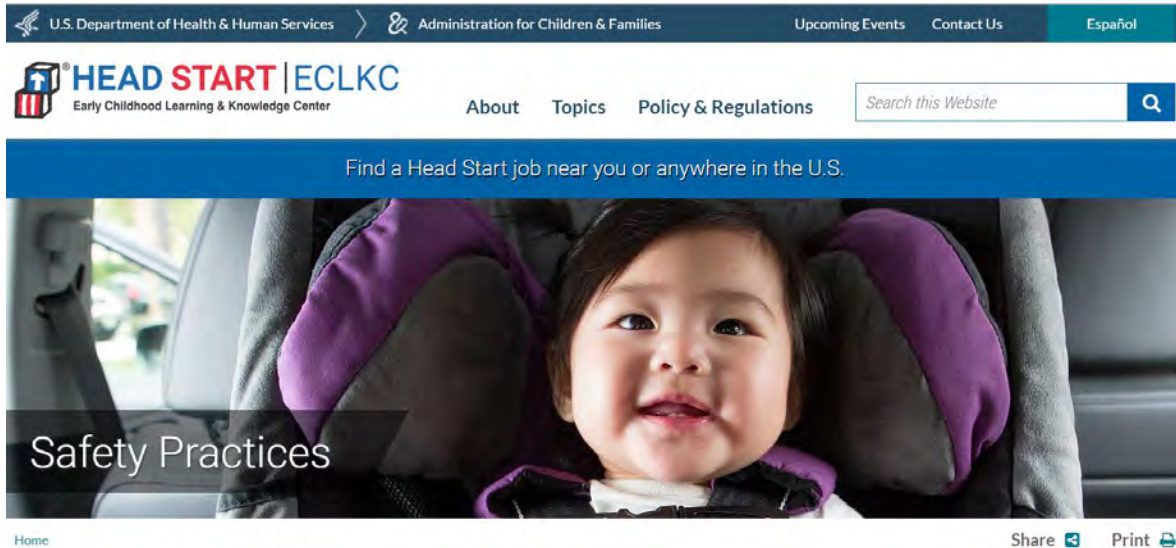
Only 50% of recipients with child incidents worked with Regional TTA to support correction

51% of recipients worked with Regional TTA to support correction



49% of recipients did not work with Regional TTA to support correction

Resources to Prevent and Address Child Incidents



Free National Center resources are available to support recipients with implementing a culture of safety to both prevent and address child incidents, including:

- [Embedding Health and Safety in Your Program's Culture](#)
- [10 actions to create a culture of safety](#)
- [Active Supervision](#)
- [Active Supervision for Child Safety](#)
- [Addressing Child Incidents Through a Culture of Safety](#)



Thank you for joining!
Please submit questions at
<https://tinyurl.com/OHSRANQandA>

